

CHILDREN IN RESIDENTIAL CARE AND EDUCATION

Tore Andreassen

How are the academic outcome for children in residential care?
 Education level for children from social welfare in Norway related to
 type of intervention during the period of 1993 – 1999. Percent.

Type of intervention	Secondary school		N
	first year or less	College or more	
Children and youth centre	77,1	3,7	1483
Institutions	77,1	4,1	825
Strong foster homes	71,5	5,4	736
Home based interventions	65,9	6,4	4526
Family placements	56,7	8,7	904
Ordinary foster homes	56,7	9,2	2056
Comparison/ordinary children	20,4	39,9	14422

Kristofersen & Clausen, NOVA:
 Barnevernsklinter 1990-2011. Oslo 20.nov.
 2008

How are the outcome for children from institutions as young adults? – Use of social economical help

Proportion of short- and longterm clients during 1997–2005 related to type of placement during 1993–1999. Percent. (N= 17.480)

Type of placement 1993–1999	Social help 1997–2005			N
	No help	Short term	Long term	
Children and youth centres	15,4	23,4	61,2	2635
Institutions	14	24,2	61,7	1448
Special foster homes	25	26,3	48,7	1284
Home based interventions	31,3	31,6	37,2	8271
Family placement	33,7	29,5	36,8	1380
Ordinary foster homes	33,3	27,1	39,6	3265
All types of interventions	29,4	29,2	41,4	17480
Normal population	88,3	8,1	3,6	24571

Children in residential care

- Often suffer from insufficient educational services
- Education often takes place within the residential setting together with other children in the institution

Important questions:

- Is education within residential setting a good solution?
- Are there reasons why this is not the best for the children?
- Is it maybe better if they are taught in ordinary schools?
- Is this a possibly solution?
- How could this be done?

- Children from residential care often fail in academic topics
- They often get too little support regarding school from institutional staff
- They often get education within residential setting instead of mainstream ordinary school
- One reason for this is their behaviour. Some of them shows a behaviour that makes it difficult to be in ordinary school. This presentation will focus on why ordinary school is the best for the children, on the behaviour as a barrier, and ways to meet this challenge.

Education for children in residential care

- Better with education within residential settings than no education. Education is important in it self
- Better with education in ordinary mainstream school than education within the residential setting

Why?

1. Isolation from children without problems is a riskfaktor
2. Isolation is a barrier for prosocial influence from peers
3. Education within residential settings gives few possibilities to train prosocial behaviour in «normal» settings, and often support negative behaviour through «deviancy training»

Major Risk Factors for problem behaviour

The "Central Eight" Risk Factors	The "Big Four" Risk Factors	History of antisocial behaviour
		Antisocial personality pattern
		Antisocial cognition
		Antisocial associates / isolation from prosocial peers
		Family problems
		School and/or work
		Leisure and/or recreation
		Substance abuse

Important risk-factors for youth

Be in a setting that:

- ❖ Implies contact with other youth with behaviour problems
- ❖ in combination with isolation from other youth without behaviour problems.

Such a situation may influence the behaviour negatively, and reduce the probability for a positive development

Peer culture and the Risk of iatrogenic effects of group treatment

- Influence of antisocial peers and antisocial peer cultures are important risk factors. This is known as «deviance-training»
- In residential settings an unintended consequence might be that the group might contribute to the development and maintenance of antisocial behaviour, and then to iatrogenic effects of the treatment (Dodge, Dishion and Lansford, 2006).
- **The risk of negative influence from antisocial peers implies that the period of time used in residential setting should be as short as possibly, and should be linked to community services (school, leisure time).**

How to work with children placed in institutions in ordinary school?

- Need for knowledge about behaviour problems in school staff (how to manage, what factors contribute both negatively and positively, and how to analyze behaviour before action is taken)
- Need for knowledge about behaviour problems in institutional staff (how to manage, what factors contribute both negatively and positively, and how to plan and support youth and school staff)
- **Need for cooperation between school staff (teacher) and institutional staff**

Development of behaviour problems

According to a number of researchers, antisocial behaviour develops as a result of the child's behaviour and interaction with the social environment and the child's parents (Hollenstein, Granic, Stoolmiller, & Snyder, 2004).

Patterson and colleagues maintain that these behaviours occur in stages and that behaviours of one stage will result in certain predictable reactions from the child's social environment, leading to further actions from the child. This is an interactional process.

During the first stage of aggressive behaviour development, family variables, such as harsh parental discipline and poor adult supervision, result in the child being "trained" to engage in aggressive behaviour.

These behaviours become functional in the sense that the child may be allowed to escape from tasks when he or she acts aggressively. Also, aggressive behaviours may be positively reinforced through attention and approval, which results in maintenance of the behaviours.

Children in these situations do not learn socially skillful responses to others, but they learn aggressive behaviour that results in meeting their needs.

Following this stage, children who are aggressive often find themselves rejected by their peer group and experiencing academic failure.

Having learned aggressive behaviours in early childhood, these children become rejected because they do not demonstrate the social skills that allow them to be socially competent with peers.

Patterson et al. report that children who engage in aggressive behaviours spend less time on academic tasks and have more difficulty with classroom survival skills (e.g., staying in seat, answering questions). These behaviours result in a higher incidence of academic failure.

Once children have learned aggressive behaviour and experienced peer rejection and academic failure, they are at a higher risk for developing delinquent behaviour. These children have a tendency to become involved with deviant peer groups who also engage in aggressive behaviours.

Development of behaviour problems in stages (Patterson, 1992)

atet

1. **Basic training:** Learning to control the environments through aggressive behaviour
2. **The environment reacts:** Difficulties in complying to the requirements from the environment. Poor performance at school. Gradually rejected from other.
3. **Deviant peers:** Seeking like-minded friends. "Trained" in negative attitudes and skills, and fail in learning of social skills.
4. **Career as antisocial adult:** Problem with relating to work, social requirements, and so on.

How problem behaviour develop through time

Childhood	Early school years	Adolescence	Adult
Behaviour problem	Low schoolmotivation	Criminality	Criminality
Family problem	Weak performance	Alc. and substance	Alc. and subst
	Family problem	Low schoolmotiv.	Neg. network
	Negative peers	Weak performance	Low education
		Family problems	Unemployd
		Negative peers	Bad economy
		Truancy	Divorce
		Emotional problems	Family violence
			Psychiatr.prob.
			Early death

Characteristics of children with behaviour problems

- Difficult and demanding behaviour from early age
- Weak cognitive and social skills
- Negative parent-child relations
- Problems regarding school and peers
- Affiliation to deviant peers

Problems in school

- Poor motivation and weak skills (both social skills and academic performance)
- Often conflict with teachers
- Often negative relationship to classmates
- Often truancy from school and drop out
- Often increased contact with deviant peers (behaviour problems and/or substance abuse)

The needs of children with behaviour problems

- Learn new skills (anger management and social skills as alternative to negative behaviour)
- Educational support
- Experience that threats or violence does not pay
- Experience that positive behaviour pay
- To be in contact with prosocial peers

Three types of schoolbased interventions

1. School- and classroom centered interventions
2. Student centered interventions
3. Multicentered interventions

1. School- and classroom centered interventions

- Action plans for how this school work with behaviour problems
- Common and positive formulated rules, and consequent reactions of rule violations
- Proactive and relational leading of classroom education, plans for co-operation with students

2. Student centered interventions

- Special academic support if needed
- Programs for social skills training (like Aggression Replacement Training (ART) or other)
- Systematic responding on positive and negative behaviour
- Systematic analysis of behaviour before planning an intervention. Functional Behaviour Analysis (FAB) is useful for this purpose.

Aggression Replacement Training

- **Skillstreaming – behavioural component**
 - **Interpersonal skills training**
 - 60 skills for late elementary and middle school children
 - 50 skills for adolescents
 - teaches juveniles what to do
- **Anger control training – emotional component**
 - **Affective skills training**
 - coaches juveniles in identifying the causes, cues and consequences of anger and aggressive responding
 - teaches juveniles to use pro-social alternatives
- **Moral reasoning training – cognitive component**
 - **Values based training**
 - through the discussion/debate of relevant moral dilemmas juveniles are guided to adopt more mature and pro-social moral judgements
 - immature moral reasoning is subjected to challenges by trainers and group members

Practical vs Comprehensive FBA

	Practical FBA	Comprehensive FBA
For:	Students with <u>mild to moderate</u> problem behaviours (behaviours that are <u>NOT dangerous</u> or occurring in many settings)	Students with <u>moderate to severe</u> behavioural problems; may be <u>dangerous and/or occurring in many settings</u>
What:	Relatively simple and efficient process to guide behaviour support planning	Time-intensive process that also involves archival records review, family-centered planning, and collaboration with agencies outside of school
Conducted by whom:	School-based personnel (e.g., teachers, counselors, administrators)	Professionals trained to conduct functional assessments with students with severe problem behaviours (e.g., school psychologists, behaviour specialists)

Practical FBA process

Define behaviour in observable & measurable terms

Ask about behaviour by interviewing staff & student

- specify routines **where** & **when** behaviours occur

- summarize **where, when, & why** behaviours occur

See the behaviour

- observe the behaviour during routines specified

- observe to verify summary from interviews

Hypothesize: a final summary of **where, when & why** behaviours occur

ABC's of Understanding **Why** students engage in problem behaviour:

Finding out the Pay-off or Function of Behaviour

A= Antecedent(s). Find out the events that occur right before the behaviour.

- Allows you to predict: Where (During routine)? & When (Trigger event)?

B=Behaviour. Find out what is the observable problem behaviour?

C=OutCome/Consequence. Find out what happens after the behaviour occurs? **WHY?**



Practical FBA

Always start with the behaviour

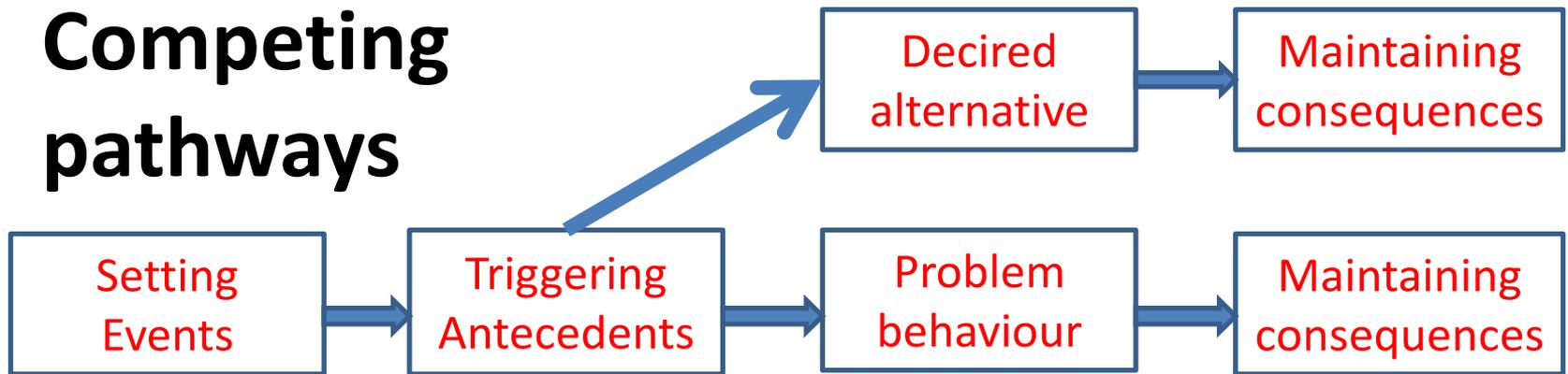
Despite the ABC concept, the behaviour (B) is our starting point!



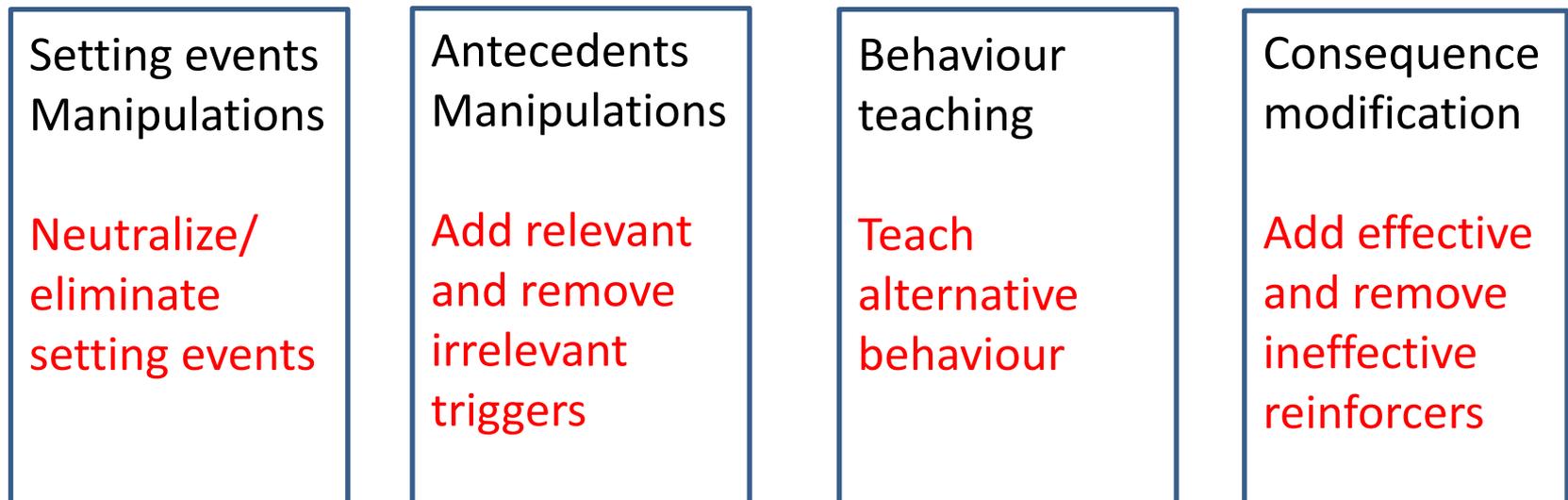
Defining Observable Problem Behaviours

- Definitions of behaviours need to be:
 - Observable: The behaviour is an action that can be seen.
 - Measurable: The behaviour can be counted or timed.
 - **Defined so clearly that a person unfamiliar with the student could recognize the behaviour without any doubts!**

Competing pathways



Behaviour support planning



3. Multicentered interventions

- Broad-spectred interventions that target several risk factors
- Multisystemic interventions that target student, school, home and friends
- Multisystemic Therapy (MST) is an example of multicentered interventions

How could the institutional staff support the school and how could they work together regarding school?

Example from MultifunC

Residential / institution

Community

Inntake

Treatment

Transition

Reintegration / aftercare

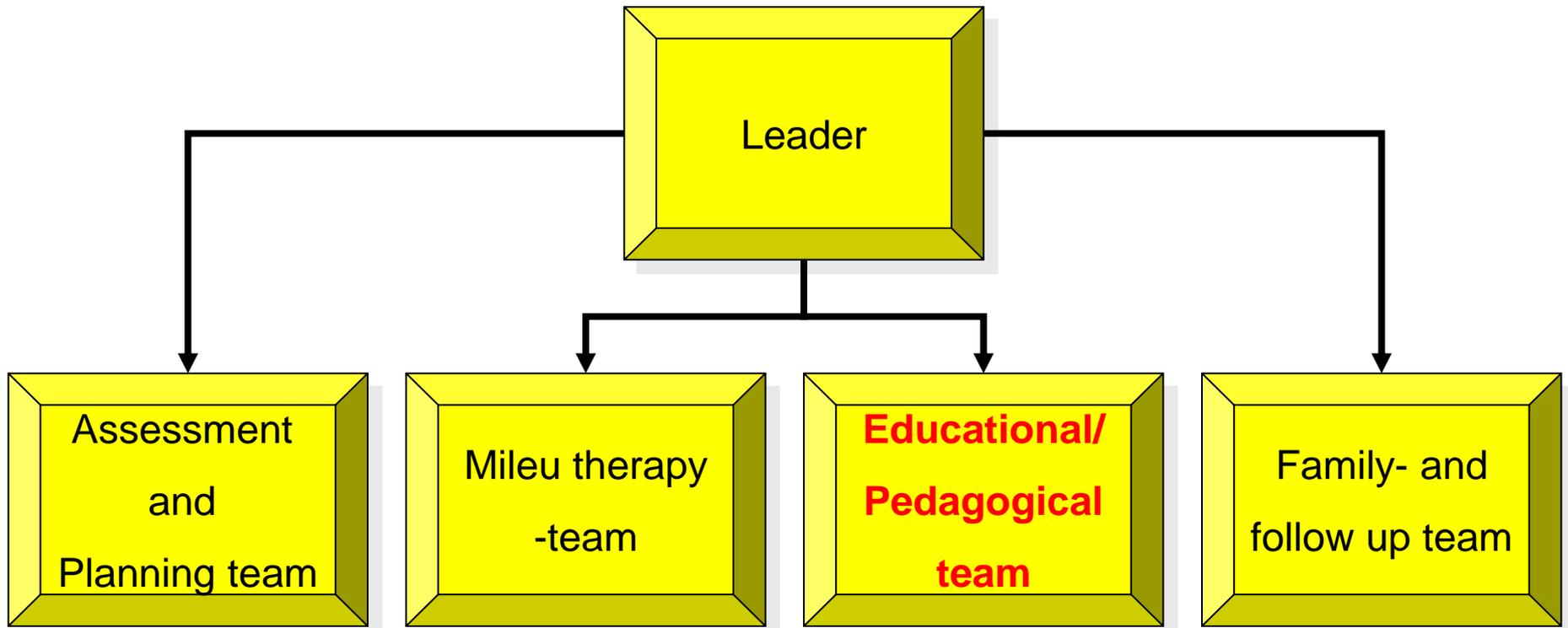
Motivation	Motivation	Prepare	Family support
Assesment	Focused Treatment	re-entry	
Structure	Treatment climate		

Duration of residential stay:
about 6 months (not fixed)

Duration of aftercare:
about 4-5 months (not fixed)



Organizational model of each MultifunC-unit



For each juvenile there will be Treatment teams across all teams including one or several staff from each team.

Support to school

- The educational team plan how to intervene regarding school and gives support to teachers both regarding behaviour and academic questions
- Daily or later weekly report/contact between the educational team and the teacher
- The milieu-team support the youth
- The youth is rewarded for success

General co-operation

- Each MultifunC-unit inform the school about the treatment model in MultifunC
- Seek to establish general routines for co-operation (how to manage and react to situations that may appear, and sharing information)
- Both the MultifunC-staff and the school staff need to be seen as equally parts in the co-operation, but the institutional staff should always respect the teachers needs.

Co-operation regarding specific youth

- Pedagogical team inform the school in advance when a new youth arrives
- Former problems in school are discussed together with the youth and the teacher with focus on how to avoid this to happen again
- Focus both on behavioural and academic questions
- Establish concrete routines for co-operation working with this youth

Routines should include

- How to facilitate learning
- Strategies if behaviour problems occur
- Routines for continuous contact and evaluation of the youths function at school (daily, weekly? By phone, e-mail, meeting?)

Contact between institution and school

- Frequency of contact is discussed between teacher and staff, but the best is more frequent contact in the beginning and then less frequent
- The form of contact and the time for such contact is decided by the teacher (phone, meeting, other).
- Focus is checklist and whats working or not working good, and how to meet problems

The first week at school

Concrete goals for the first week:

- Behaviour, meet at time, attendance at all lessons, etc.). Decided together with teacher – what is most important?
- Plan strategies for each day the first week (How to succeed? **What could go wrong?**). If necessary staff from the institution may follow the youth to school.
- Develop a simple checklist to evaluate
- Involvement of the youth in how to succeed

- After the first week is evaluated, there is made a plan based on success or problems. Problems from earlier school does not necessary continue.
- Goals are developed on short term and long term (What to focus on first, what should be next weeks focus, what should be goals the next month?)
- Analyses of problems and sustaining factors
- Developing strategies to reach the goals, including what the youth should do, how he or she should be met, what could be barriers to succeed, and building a re-inforcment system (reward for the youth if he or she succeeds). This is regulated from the institution.

The institutional work with the youth

- Describe problem behaviour if there is one
- Make analyses of the problem (what makes the problem?)
- Planning intervention together with youth and teacher
- Implement the intervention
- Evaluating the intervention together with youth and school
- Planning new interventions

Interventions

- Skills training (ex. anger management, homework help, etc.). All MultifunC-units include **Aggression Replacement Training**
- Support to the youth to be at time, and discussions about behaviour in situations that may be difficult
- Establish rewarding systems to reinforce positive behaviour in school

What about the other children?

- One important question is about the other children in school, those without behaviour problems.
- Does youth with behaviour problems influence them negatively?
- **Yes, it could disturb their education for a short while, but it does not make them conduct disordered youth!**

How does MultifunC succeed regarding school?

- The most of the youth are in ordinary schools
- Some of them are not able to get educated in ordinary schools from the beginning. Then they get educated within residential setting, with clearly goal of be transferred to ordinary schools
- Some youth (about 20%) does not succeed

How is the co-operation with schools

- In the beginning the schools did not want to receive the youth from the institutions
- **Now:** The co-operation works nice, and the schools experience that they does not just receive problem youth, they also get support
- This support influences also the schools work with other problem children in school, children that is not living in institutions.



**Thank you
for your time!**