

**Submission
No 179**

INQUIRY INTO HOME SCHOOLING

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I would like to respond to the submission to the Home Schooling Inquiry made by Mr Michael Coutts-Trotter on behalf of the Department of Family and Community Services.

Background

My name is Karleen Gribble. I am an Adjunct Fellow in the School of Nursing and Midwifery at the University of Western Sydney and my research interests include parenting methods for newly adopted/placed abused, neglected and traumatised children. I have published research on this subject in peer-reviewed professional psychological, medical and social work journals. I have also engaged in the training of health professionals and social workers on the subject of parenting traumatised children. Materials I developed have been used in adoption applicant parent training in several Australian jurisdictions as well as internationally. Upon occasion my expert opinion is sought for child protection court cases. From 2009 to 2013 I was an advisor to the Federal Attorney General on adoption via the National Intercountry Adoption Advisory Group.

I am also the mother of two children with a history of severe neglect and abuse, one of whom was adopted via intercountry adoption, the other joining our family via the NSW foster care system. Both children are currently registered for home education in NSW. For the last decade I have provided peer support to individuals who are parenting children who have been neglected or abused who were considering home educating their children or who were already home educating their children.

In the Department of Family and Community Services submission, Mr Coutts-Trotter stated, *“Evidence shows that children and young people in out of home care are best supported educationally with formal educational environments by specialist educationalists.”* Mr Coutts-Trotter did not back up this statement with any supporting references and I am not familiar with any research that would substantiate it. Rather, existing research, including that from the NSW Department of Family and Community Services and the NSW Department of Education and Communities, supports the proposition that meeting the educational, social and emotional needs of children in out of home care in schools can be extremely difficult and children are commonly failed by the NSW education system. Most children in out of home care have a history of abuse, neglect and trauma to a lesser or greater extent and it is this background that makes providing them with an adequate education challenging.

Children in out of home care often fail to gain an adequate education in schools

Poor outcomes

The Department of Family and Community Services own research (Townsend (2012) *Are We Making the Grade: The Education of Children and Young People in Out of Home Care*), identified significantly poorer outcomes for children in out of home care. The report states, *“Many children in care are not faring well educationally”*. Low school engagement was noted as well as problematic peer and academic issues in school for children in out of home care in NSW.

Lagging behind and not catching up

‘Are We Making the Grade’ further identified that many children entered out of home care lagging well behind their peers in basic skills such as reading. Other NSW research found that once

children fall behind educationally, it is very difficult for them to catch up in school and the disadvantage compounds over time (Willms (2014) *Student Engagement in New South Wales Secondary Schools: Findings from the Tell Them From Me Pilot*).

Asynchronous development

Detailed in my own research is the asynchronous development displayed by children who have been abused and neglected (Gribble (2007) A model of caregiving of children adopted after institutionalization. *Journal of Child and Adolescent Psychiatric Nursing* 20(1): 14-26). There can be a wide variation between the chronological, social, emotional and intellectual development of children with a history of trauma. Thus, even where children are able to manage the academic work of school, delays in their emotional and social development mean that bullying and ostracisation are a real problem. Being the victim and perpetrator of bullying was also detailed in 'Are We Making the Grade'. Children with a history of abuse and neglect often need a lot of assistance with developing and maintaining relationships with peers. Such support is difficult to provide in a school environment where there may be one teacher supervising 50 or 100 students in the playground. In reality, children with a history of abuse, neglect and trauma often lag behind in all areas of their development.

Stress and lack of coping ability leads to disruptive behaviour

Children who have been traumatised often exhibit disruptive behaviours because they find the school environment to be overstimulating and stressful and because trauma has left them with a diminished ability to manage stress and regulate their emotions. As stated in the 'Making the Grade' report, "Schools were unable to respond appropriately to the emotional needs of children in care...they do not always understand attachment, trauma and anxiety issues and...this could result in inappropriate responses to children's behaviour" and "Many schools do not understand the needs of abused, neglected and traumatised children and as a result, the responses to children could be punitive or harsh." However, we should not be overly critical of school staff in relation to this issue as they have many children whose safety and learning they must promote and the behaviour of traumatised children can be extremely challenging, being not only disruptive but often posing a danger to themselves and others.

The importance of attachment and the challenges posed by school attendance

A further factor to consider in the education of children in out of home care is the importance of attachment. As detailed in a review undertaken by the then NSW Department of Community Services (NSW Department of Community Services (2007) *The Importance of Attachment in the Lives of Foster Children: Key Messages from Research*), the relationship that a child has with their primary caregiver/s is central to the development in all areas of their lives. Children cannot feel secure without a decent attachment to a caregiver whom they feel that they can trust to protect them and keep them safe. When a child feels secure they are able to expend their energy on learning rather than just concentrating on survival. As described in the Department of Community Services review, "The more secure a child feels the more energy and enthusiasm they have to be curious, to learn, to seek understanding, and to try to make sense of the world".

Again as described in 'The Importance of Attachment in the Lives of Foster Children,' children

who have experienced abuse and neglect at the hands of caregivers and/or have experienced multiple placement in different families (as is the case for many children in out of home care) are often extremely resistant to developing a relationship with their foster parent/s. These children have found adults to be untrustworthy and in order to prevent themselves from being further hurt will attempt to keep any adult at a distance and seek to sabotage the development of positive relationships. This is described in my previously cited publication, 'A model of caregiving for children adopted after institutionalization'. The impact of a lack of attachment, or a disorganised attachment, on the development of children can be catastrophic. The burden to society of individuals whose trauma has not been adequately dealt with so as to enable them to form healthy attachments to others and function in society is massive. This is played out in high rates of serious mental illness, violence, crime, drug abuse, incarceration, homelessness and poor parenting capacity; and so the cycle of abuse and neglect continues in individuals who experienced abuse, neglect and trauma as children (Rees (2005) Thinking about children's attachments. *Archives of Diseases in Childhood* 90: 1058-1065). To be perfectly frank, assisting a child to heal from past trauma should be the first priority in promoting their wellbeing. Without such healing academic learning is greatly hampered and any learning that does occur is of limited usefulness.

Building a relationship of trust and a secure attachment is a process that can be extremely time consuming. The time that children spend in school, and therefore away from their caregiver/s, is significant. Where children are experiencing bullying or other negative experiences in school, the inability of their caregiver/s to protect them from this can facilitate the continuation of deeply held beliefs that adults cannot be trusted and safety is unobtainable. For some children, these factors can seriously detract from the development of the attachment relationship and therefore from development in other areas, including educationally.

Summary of existing research

In summary, the existing research indicates that children who have been abused and neglected are best supported by an educational environment that

- Recognises the impact of adverse early experiences on the child and responds with flexible and individually tailored learning experiences
- Fosters positive relationships with peers
- Involves caregivers who are committed to the child, and who value education and prioritise it
- Responds appropriately to their behaviour

Home education is able to provide an environment that includes all of these characteristics.

My experience with families who have home educated a child with a history of abuse, neglect and trauma

The following is primarily based upon my personal experience of home educating my daughters and my interactions with other families parenting adopted, fostered, and kinship-cared children with histories of abuse, neglect and trauma.

Those seeking to home educate children with a history of abuse, neglect and trauma are committed to their child and their education

All of the foster, adoptive or kinship-caring parents I have met who have sought to home educate their child have been deeply committed to their child and their education. The desire to home educate universally comes from a deep desire to achieve the best outcomes psychologically and educationally for their child. This is not an option that uncommitted, unloving caregivers consider. It is a responsibility that individuals take extremely seriously and only after carefully considering the complexities of undertaking home education with a child with a history of abuse neglect and trauma. However, this is usually not something that is undertaken alone as parents seek the assistance of many health and other professionals such as doctors, psychologists, occupational therapists, speech therapists, early intervention specialists as well as home education support groups in their delivery of their home education program. The deep knowledge that parents and caregivers have of their child enables the appropriate delivery of education.

Home education can improve the emotional wellbeing of abused, neglected and traumatised children

Although school is a positive experience for many children, it is often a negative experience for children with a history of abuse, neglect and trauma. As previously described, many such children lack the basic social and academic skills of their peers, find the academic work of school too difficult and find peer interactions to be destructive. The school environment can be extremely stressful and overwhelm the capacity of these children to cope, resulting in destructive behaviours, ongoing conflict with teachers and students, exclusion from activities or suspension/expulsion from school. All of these things have a negative impact on the emotional wellbeing of children. Children who have been abused and neglected often have an underlying belief that they are no good, that they are worthless and bad because, of the abuse and neglect they experienced (deep down they blame themselves for the abuse). Negative experiences in school can just reinforce their preexisting trauma. Psychiatric drugs are often used as a behavioral management tool and in some cases they can make the child easier to manage however, they do not treat the root cause of behavioral difficulties.

The stress of school commonly also results in escalation of challenging behaviours at home. For example, families have described to me how their child managed well during the school holidays but when school started back and the stress overwhelmed the child and they saw actions like fire lighting, cruelty to animals, self harming and threats of violence and violence from their child. However, the removal of stress of the school environment when children begin home education can enable some children to be able to cope with normal interactions with their family. For caregivers, the removal of the need to fight to manage difficult behaviours can allow for more positive interactions between parent and child and reduce the stress of the caregiver significantly (no small thing as it can be extremely difficult to parent traumatised children). It is important to note that what I am talking about here is not removal of all stress, but reduction of stress to a level that the child can manage so that they are able to develop adaptive coping strategies (rather than be overwhelmed and deploy maladaptive strategies). Many families have told me of the positive impact of stress reduction to a manageable level, through avoidance of school and institution of home education.

As previously mentioned, home education provides the time and opportunity for the development

of the attachment relationship between children and their caregiver/s. A child normally develops a secure attachment with caregiver/s in infancy and early childhood as caregiver/s repeatedly meeting the child's needs (for food, comfort, contact etc). The opportunity for these needs to be met may occur hundred's of times each day. Through the cycle of need, arousal, resolution the child develops an internal working model of themselves as lovable, of the world as a safe place and of their caregiver as trustworthy. Where a child has been abused and neglected this cycle is disrupted. The repeated rejections of their needs means that the child develops an internal working model of themselves as unloveable, of the world as a dangerous place and of caregivers as untrustworthy. When a child is newly placed in a family, helping them to heal from trauma involves changing their internal working model. However, the pathways in a child's brain that constitute a negative view of themselves and the world can be very strong and creating new pathways is very difficult, the tendency to use the well established pathways is strong. The damage that was created in negative relationships can only be healed via positive relationships. The most important relationship for a child is with their primary caregiver/s.

Parenting that seeks to assist children to heal from trauma and be able to develop positive relationships with others is sometimes called therapeutic parenting. It involves taking advantage of everyday interactions to change the child's internal working model so that they are able to see themselves positively, feel safe and trust others. The more interactions that occur in which the child is able to experience themselves as loved and worthy and the parent as caring and trustworthy, the faster the attachment relationship can develop and healing occur. Many families have told me of the leaps forward that they experienced in their child's sense of safety, self worth, trust and attachment that occurred when they had more time together and more opportunity for positive interactions because the child was no longer at school and was being home educated.

Home education can improve the capacity of abused, neglected and traumatised children to form healthy relationships with peers and others

Abused, neglected and traumatised children have not had a healthy first relationship with a primary caregiver upon which to base future relationships. Because abuse, neglect and trauma have deprived them of this foundation for relationships, such children often really struggle with relationships with their peers. They are different from others, they often do not have basic social skills, they may not have ever had the opportunity to play and not really know how to do it, they can act strangely, be frightening to other children and just not cope. My experience, and the experience of families I have supported, is that traumatised children need intensive supervision and coaching to develop good social skills and prevent the reinforcement of negative behaviours in interactions with their peers. The school environment is largely unable to provide this supervision and support because of the high child to adult ratios. However, when children are home educated the development of these social skills can be prioritised and involvement with peers can be supervised to facilitate positive interactions and prevent negative ones. The ability to enable peer interactions in small groups and with adults nearby is a very positive thing in terms of relationship development. The other factor at play in such situations is that a large proportion of home educated children have special needs of some kind and they do not have the same expectation of conformity in their peers that children in schools appear to often have. This makes them more accepting of diversity and difference. Finally, since children need not be striated

according to age in home education support groups, friendships across different ages are common in home educated children. Thus, children with a history of abuse, neglect and trauma are able to develop friendships with children whose emotional and social development best matches their own (usually younger children) rather than be restricted to same age peers. Parents have told me that home education enabled their children to develop their first close relationships with peers.

Home education promotes the education of abused, neglected and traumatised children

Since home education facilitates the development of attachment with primary caregiver/s and reduces stress it increases feelings of safety for children. Without feeling safe children find it extremely difficult to take advantage of learning opportunities provided to them- they often cannot learn effectively. Thus, home education can promote the education of abused, neglect and traumatised children just by helping them to feel safer and freeing them to learn rather than concentrate on survival.

In addition, extensive research indicates that a strength of home education is the ability to provide children with an individualised education (Jackson, Allan (2010) Fundamental elements in examining a child's right to education: A study of home education research and regulation in Australia. *International Electronic Journal of Elementary Education* 2(3)). This is also a common theme in submissions to this inquiry. As previously discussed it is recognised that the impact of abuse, neglect and trauma upon children means that they require an individualised education. With the ability to provide one-on-one tuition at exactly the level and of the type required by the child and with the capacity for flexibility in delivery in terms of timing and method, home education is extremely well placed to meet the needs of a child with atypical skills, knowledge and needs. The ability of home education to meet the special needs of children is well documented, including in Australia (e.g. Kidd, Kaczmarek (2010) The experiences of mothers home educating their children with autism spectrum disorder. *Issues in Educational Research* 20(3): 257-275). Those parenting children with a history of trauma, without exception, attest to the ways in which home education has been able to encourage their children's education. Many come to home education after the school system has spectacularly failed their child and it is abundantly clear that the reduction in stress and the ability to provide an individually tailored education program via home education has been of great benefit to their child.

It should be noted that while some traumatised children may benefit from home education in the long term, for some, short term home education may be sufficient to consolidate relationships and allow for enough catch up in development and skills to enable successful school attendance. In addition, the option of part time school, part time home education should be available to children with a history of trauma. Although, school may be too difficult for children who have been abused and neglected to engage in full-time, part-time may be manageable. Furthermore, children with a history of trauma are often extremely difficult to parent and while school may not be working well for them, their parents/carers may not be able to manage full time home education. However, part time school, part time home education may be manageable for the parent and benefit of the child.

Home education can facilitate the healing of trauma and integration as a functioning member of society

School education is of necessity targeted primarily at providing an opportunity for academic learning for children. It is assumed that most children will learn that they are lovable, worthy individuals who can trust adults to protect them outside of school. Those children who have not learnt these lessons usually cannot learn these things in school and without this knowledge they are unable to effectively participate in the academic learning of school. Furthermore, if they do not acquire this knowledge they will have great difficulty in functioning successfully in society regardless of their level of academic learning. By facilitating the development of attachment between primary caregiver/s and child, by the promotion of feelings of safety, and by the provision of an individually tailored education program, home education promotes the overall wellbeing of the child to the benefit of society as a whole.

Ideology should not override the best interests of individual children

Although it was not my experience with our foster (now adopted) daughter, many foster families have great difficulty in obtaining permission to home educate their child even, where it is clearly demonstrated that school is failing their child educationally, socially and emotionally. It is not unusual for children in out of home care to have experienced multiple suspensions from school, multiple expulsions from school or to be attending school for as little as one hour a day and yet for permission to home educate to be denied. Children's wishes to be home educated are also routinely discounted, as are the views of health professionals such as GPs and psychologists in relation to the suitability of at least a trial of home education. Foster parents are often told that it is impossible for permission to be obtained for children in out of home care to be home educated. It is extremely distressing for foster parents who love their foster child deeply and who day in and day out have to deal with the consequences of school failing the child to have home education ruled out as a possibility. Such decisions are often by management who have never even met the child even where caseworkers are supportive. Much is asked of foster parents, it is an extremely difficult job when undertaken conscientiously. The inability to make important parenting decisions is one of the most traumatic aspects of foster parenting- the sense of powerlessness of seeing a loved child suffer, but being prohibited from taking an action that appears likely to be beneficial, is immense.

The Department of Family and Community Services submission states, "*DEC and FACS have a Memorandum of Understanding about the respective roles to play in meeting the educational needs of children and young people in care...A decision to home school a child in OOHC therefore raises a significant issue in relation to who can effectively monitor the educational arrangement.*"

It is true that the education of home educated children is primarily monitored by their parents/carers. However, if school is failing a child, it matters not how effectively that failure is being monitored. It can be argued that the Department of Family and Community Services should have confidence in their assessment and commission of foster carers. They should respect the desire of foster parents to seek the best outcomes for children in their care where they have demonstrated this commitment, including in relation to their education. The 'Are We Making the Grade' report, emphasised the importance of, "*Having a care environment that was safe, welcoming and with carers who were committed to the individual child and their education*". As previously discussed, I would suggest the commitment to the child and their education of any foster carer who was seeking permission to home educate is of an extremely high level and that

this should be taken into account. Further, the Department of Family and Community Services should undertake a review of the case histories of children in out of home care who are being home educated to gain a greater understanding of the outcomes of home education for such children including in relation to stability of placements, further education and employment. An ideology that supports public education for children in out of home care should not override the best interests of individual children. There should be recognition that home education can be an extremely positive educational option for children in out of home care.