Chapter 1
Introduction

Patricia McNamara, Carme Montserrat, and Sarah Wise

> *There are many problems, but I think there is a solution to all these problems; it's just one, and it's education.*
> *Malala Yousafzai*

This book aims to assist those working with children and young people in out-of-home care (OHC), or on their behalf. Its purpose is to lift educational aspirations, expectations and outcomes of this cohort of students by improving the knowledge base within this helping domain. The volume offers empirical insights and best practice examples of teaching and learning with children and young people in care. The content applies to formal learning settings, the home (foster care, kinship care, residential care and other OHC settings) as well as within the community. Across Europe, young people with a care background have been found to be around five times less likely to attend tertiary education than those who have not been in care (Jackson & Cameron, 2014). Similarly, very few care-leavers make the transition to university in Australia and New Zealand (Matheson, 2016; McNamara, Harvey, & Andrewartha, 2019). Whilst relatively more students with a care background in the US enter tertiary programs, many do not manage to graduate (Okpych & Courtney, 2018). It is widely acknowledged that poor education outcomes, from early childhood onwards, can undermine lifelong opportunities, health and wellbeing (McNamara et al., 2019; Wise, 2016a, 2016b). Such outcomes also often impact negatively on the social sphere, constraining long-term personal development, including community inclusion and active citizenship (Garner, Forkey, & Szilagyi, 2015). Growing international concern has led to the development of approaches that

---

P. McNamara · S. Wise
Department of Social Work, University of Melbourne, Parkville, VIC, Australia
e-mail: mcnamara.p@unimelb.edu.au; sarah.wise@unimelb.edu.au

C. Montserrat (✉)
Faculty of Education and Psychology, Research Institute on Quality of Life,
University of Girona, Girona, Spain
e-mail: carme.montserrat@udg.edu

address inequities faced by young people in care, including inequality of opportunities in education (Courtney & Hook, 2017; Jackson, Ajayi, & Quigley, 2005; Mendes & Snow, 2016; Montserrat & Casas, 2017; Montserrat & Casas, 2014).

This volume profiles some of the most important current initiatives that aim to narrow education achievement gaps between children in care (or young people with a care background) and their peers. It offers a range of responses to challenges encountered in achieving good education outcomes, from childhood to adulthood and from the micro to the macrosystems level (Bronfenbrenner, 1979). Initiatives presented herein include formal education interventions as well as informal psycho-socio-emotional learning approaches, much of which families are delegated to manage on behalf of society. In that context Plato's definition of education retains contemporary resonance:

> *Education is the constraining and directing of youth towards that right reason, which the law affirms, and which the experience of the best of our elders has agreed to be truly right.*
> Plato (1872 translation). "Laws. Appendix: Lesser Hippias. First Alcibiades. Menexenus. Index of persons and places", p.189

Internationally, contemporary formal and informal education are most often expected to produce young people who are *'successful learners, confident and creative individuals, active and informed citizens'* (Melbourne Declaration on Education Goals for Young Australians, 2008).

We embrace a broad-based definition of OHC:

> Out-of-home care is the care of children….who are unable to live with their primary caregivers. It involves the placement of a child with alternate caregivers on a short- or long-term basis (Department of Human Services, Victoria, Australia, 2007). Out-of-home care can be arranged either informally or formally. Informal care refers to arrangements made without intervention by statutory authorities or courts, and formal care (generally) follows a child protection intervention (either by voluntary agreement or a care and protection court order), most commonly due to cases of abuse, neglect or family violence (Campo & Commerford, 2016).

OHC takes a variety of forms; kinship care, foster care, residential care and family group homes are some of the most common types. Internationally, children and young people in care present a remarkably similar education profile. They often have lower than average educational performance when entering child protection services as the result of adversities experienced prior to entering care. These include poverty, maltreatment and family dysfunction; but many children also experience risks to education failure after entering care. Instability in education and care placements especially, can undermine learning outcomes during care and create barriers to education post-care (AIHW, 2015).

Over the past two decades, evidence has converged from multiple disciplines including neuroscience, education, behavioural science, public health, the social sciences, and medicine on the effects of early trauma on the developing brain (Dowd, 2017). Stress that is frequent and/or prolonged in early childhood creates "toxic stress" that can negatively impact development of socio-behavioural skills and cognitive-linguistic capacities in the early years and across the lifespan (Harvard Center on the Developing Child, 2019).

Across the world, rates of admission to OHC are high during infancy and early childhood, because children are at their most vulnerable. Attachment disruption, neglect and abuse are common sources of toxic stress that affect the biological and developmental functioning of children in care (Perry, 2009; Schore, 2005; Van der Kolk, 2013). It has long been accepted that secure attachment relationships early in life are central to long-term psychosocial wellbeing (Bowlby, 1965; Bowlby, 1982; Erikson, 1950; Freud & Burlingham, 1944). With advances in neuroscience, it is now understood that lack of, or disruption to, healthy attachment relationships can impair development of the orbitoprefrontal cortex, resulting in problems with self-regulation and auto-regulation in learning situations. This often undermines capacity for sustained concentration and focus along with positive engagement with teachers and peers (Downey, 2012, 2007).

Factors during pregnancy also have considerable impact on the developing brain. It is common for children in care to experience adverse impacts on cognition and learning, as well as socioemotional regulation because their mother was anxious, stressed or depressed and/or used alcohol and drugs during pregnancy (Bruce, Fisher, Pears, & Levine, 2009; Davis, Gagnier, Moore, & Todorow, 2013; McLean & McDougall, 2014; Perry, 2001). The importance of intervention early in life to address adverse impacts of attachment disruption and other toxic stressors as well as exposures in utero has been consistently stressed by clinicians and researchers (Perry, 2009; Van der Kolk, 2013).

Children are at their most vulnerable in infancy and early childhood, but also their most adaptable. The early years are when the brain has greatest plasticity and capacity for change (Harvard Center on the Developing Child, 2019). Early interventions that aim to redress adversely impacted areas of brain development during the very early years and at the pre-school stage can prove highly protective and have the potential to impact learning outcomes in the short and longer term. Speech therapy which addresses delayed and/or impaired linguistic development is but one example (Frederico et al., 2014; Snow & Powell, 2012; Snow, Timms, Lum, & Powell, 2019). However, without effective intervention, by the time a child in care starts primary school, toxic stress experienced early in life will have weakened the 'architecture of the developing brain', compromising executive function and self-regulation skills in the classroom (Downey, 2012, 2007).

In the early primary school years, under-developed executive function creates substantial challenges for a child in care to develop foundational formal learning skills in reading, writing and mathematics as well as informal socio-emotional skills. There is growing evidence, however, that one-on-one interventions at this point, such as tutoring and mentoring with literacy and numeracy can be helpful (Flynn, Marquis, Parquet, Peeke, & Aubrey, 2012; Forsman & Vinnerlung, 2012), especially when delivered in therapeutic environments, where the child experiences congruence at home and at school; a 'learning placement and a caring school' (Cameron, Jackson, & Connelly, 2015).

Children in care often do not receive the remedial help they need and enter high school with levels of formal and informal learning well behind their mainstream

peers (AIHW, 2015; Cameron, Jackson, & Connelly, 2015; McNamara, 2016; Courtney & Hook, 2017). Deficits in literacy can be especially limiting during secondary education, as standard learning objectives usually require that large amounts of text are processed and analysed. Mathematics too, often assumes a steeper learning curve at this point, requiring more sophisticated executive functioning. When the gap between capacity and set learning tasks becomes too great, many students from care backgrounds who are experiencing learning difficulties, such as dyslexia and dyscalculia, disengage from classroom activities (Downey, 2012, 2007; McNamara, 2016). Without intensive intervention, this gap frequently widens by adulthood. Behaviour problems associated with under-developed self-regulation capacity can also become more profound in adolescence, further alienating the young person from effective learning and disrupting classroom dynamics (Downey, 2012, 2007). The impacts of disengagement can be compounded when young people experiencing similar unaddressed learning struggles are placed in together, in class and in care. Too often, this leads to young people being excluded from school for periods of time or even permanently (Association of Children's Welfare Agencies, NSW, ACWA, 2017). When social and academic alienation become overwhelming, many young people in care discontinue formal schooling prior to completion of their secondary education. Should this coincide with leaving care without planful support there can be serious adverse consequences in terms of lifelong wellbeing. Once again, creative and inclusive strategies, employed at home and at school can create good education and bio-psycho-social outcomes at this stage of development. There is also evidence that paid and unpaid work experience can promote social inclusion and build life skills and competencies during the high school years (Gilligan, 2008).

In a context of learning gaps and other socio-emotional difficulties, it is unsurprising that young people from care backgrounds across the western world do not transition to tertiary education at the same rate as their peers. Graduation from tertiary education can be even less achievable it seems (Courtney & Hook, 2017; Jackson et al., 2005; Jurczyszyn, 2016; Matheson, 2016; McNamara et al., 2019; Montserrat & Casas, 2014; Okpych & Courtney, 2018). When young people from care do enter tertiary education, they are frequently limited by their neurodevelopmental profile and poor preparation in terms of academic skill development (often the result of a poor-quality secondary education). Financial, housing and mental health difficulties can also present serious obstacles (Matheson, 2016; McNamara et al., 2019). Young people entering tertiary education from care clearly benefit from creative equity and access interventions such as those employed by the Buttle Foundation in the United Kingdom (Jackson et al., 2005; Jackson & Cameron, 2012, 2014) and the Chafee Educational and Training Voucher Program (ETV) in the United States (Courtney, 2009; Okpych & Courtney, 2018). In Australia also, the *Raising Expectations* program is producing positive outcomes (Centre for Excellence in Child and Family Welfare, 2019).

Notwithstanding neurodevelopmental and other complex psycho-social challenges including poverty related issues and mental health problems, children and young people in care can and do display extraordinary resilience as learners (Harvard

Center on the Developing Child, 2019). There are clearly a range of bio-psycho-social elements contributing to this (Heft, 2013; McNamara, 2016). Concomitantly, it is increasingly acknowledged that to make a real difference in the lives of disenfranchised children and families, a more holistic or 'joined-up' response is needed, one that targets multiple interacting factors impacting education outcomes operating at different levels of the eco-developmental system (Cameron, Jackson, & Connelly, 2015; Heft, 2013; Garner et al., 2015, p. 495). An ecological-developmental lens reveals the complex transactions between family, education, OHC, and other key systems and the developing child. It is unsurprising that Bronfenbrenner's model has been applied effectively in this domain over some decades (Anderson, 1983; Arthur-Kelly, Lyons, Butterfield, & Gordon, 2003; Bronfenbrenner, 1979; Elias & Dilworth, 2003; Heft, 2013; McNamara, 2005, 2016).

It is clearly vital for educators to intervene therapeutically and for carers to actively promote learning (Cameron, Jackson, & Connelly, 2015). Nurturing, safe and supportive relationships with and around the child at home and at school can also contribute to good learning outcomes. Home based tutoring by literacy and numeracy trained foster carers and other mentors is a good example of this (Cameron, Jackson, & Connelly, 2015; Flynn et al., 2012). Close collaboration and communication between home, school, community-based welfare and other service sectors is also critical to success, such as well-functioning Care Teams (McNamara, 2016). Processes in OHC services and in other sectors that do not involve.

OHC of children and young people can have negative impacts. A placement change determined at a local child welfare case planning meeting, for example, may be swiftly followed by a change of school, potentially disrupting the child's secure learning base. At the broad macrosystems level, the values and beliefs expressed though welfare and education institutions are especially important. A contemporary example of this is the recent policy shift on the part of most Australian state governments to raising the statutory age for leaving foster care in Australia from 18 years to 21 years. This move to an increased level of socio-emotional, housing and financial support follows similar initiatives in the UK, the US, Canada and New Zealand; the approach has evidenced-based potential to facilitate better learning outcomes at high school and in tertiary education (Okpych & Courtney, 2018). That positive change has come about through focused long-term lobbying of governments at state and federal levels by the welfare and education sectors (e.g., the *Home Stretch Campaign*, http://thehomestretch.org.au/).

This volume manifests the importance of viewing educational outcomes as a product of a complex array of factors operating across various developmental levels and ecological subsystems. That perspective places the child at the centre and identifies key issues of policy, practice and research relating to education in OHC. It addresses issues that span child welfare and education systems to produce a strong corpus of quantitative and qualitative evidence. Readers will find this knowledge relevant across the developmental continuum. The book critically engages with and advances conceptual understanding of the teaching and learning relationship as a powerful therapeutic medium that can assist in healing trauma and addressing attachment disruption at home, at preschool, in school and in institutions of higher

learning (Downey, 2012, 2007; Jackson et al., 2005; Cameron, Jackson, & Connelly, 2015). We identify and explore contemporary opportunities and constraints operating in both caregiving and education sectors, and at the interface between them, during and post out-of-home care. There is existing evidence that challenges (including frequent change of school, insufficient funding to address learning difficulties and lack of identification of those in care/post-care as an equity cohort) too often create insurmountable barriers, resulting in education disengagement and poor education outcomes (Harvey, McNamara, & Andrewartha, 2016; Jackson & Cameron, 2012, 2014; McNamara, 2016; McNamara et al., 2019; Montserrat and Casas, 2014, 2017; Wise, 2016a, 2016b; David & Wise, 2016). Strategies have been developed and evaluated internationally which can address such challenges. Examples are presented from the nine countries represented in the book; these always emphasise the relevant developmental context for specific interventions.

The volume offers empirical insights and best practice examples of teaching and learning with children and young people in care; in formal learning settings, at home (in foster care, kinship care, residential care and other OHC settings) as well as in the community. It brings together international research from different disciplines (education, social work, psychology, social care and childhood and youth studies) across the developmental continuum. This is the first book to focus on education in care internationally, from early childhood to tertiary education, with an interdisciplinary lens. It starts to fill an international knowledge gap in relation to how good learning experiences can enrich and add enjoyment to the lives of children and young people in care as they grow and develop. Learning can also have therapeutic benefit in healing trauma and attachment disruption associated with abuse and neglect (Cameron, Jackson, & Connelly, 2015). There is strong evidence that positive experiences of learning in childhood and adolescence can facilitate successful education outcomes which, in turn, support childhood and lifelong wellbeing. Potentially the latter can manifest across the domains of work, further study, relationships, finance, community engagement and active citizenship, cultural enrichment and spirituality, health and mental health (Mendes & Snow, 2016).

Importantly too, the book generates new insights into the development and incorporation of diverse research, policy and practice methods in the context of education in OHC, demonstrating how innovative contemporary methods are applied by researchers internationally. This will potentially lead to much needed fresh initiatives, including cross national research, to address knowledge gaps in this under-investigated and under-resourced domain. The lived experience of children and young people and their rights as learners especially, have yet to be adequately explored. This book clearly identifies both opportunities and challenges encountered by young people in care and post care on their learning journeys. It gives voice to authors who have overcome enormous barriers to succeed educationally. That content enriches a limited existing archive of narratives from care leavers who have successfully completed further education (Jurczyszyn, 2016; Mendes, Michell & Wilson, 2014; Michell, 2012).

Education of children and young people in OHC is too often overshadowed by the urgent imperatives of removal from harm and placement in stable care, along

with the growing awareness of a need to address mental health concerns. Research, policy and practice presented in this book supports privileging of education consistent with the UN Convention on the Rights of the Child (UNCRC, 1989). A child rights agenda demands that education of children and young people in care must become a higher priority in policy planning, program development and practice internationally.

References

Anderson, C. (1983). An ecological developmental model for a family orientation in school psychology. *Journal of School Psychology, 21*(3), 179–189.

Arthur-Kelly, M., Lyons, G., Butterfield, N., & Gordon, C. (2003). Classroom management: Creating positive learning environments. In *South Melbourne* (2nd ed.). Vic: Cengage Learning Australia.

Association of Children's Welfare Agencies. (2017). *SNAPSHOT – Educational engagement of children and young people in out of home care in NSW: Preliminary findings*. Retrieved from https://www.acwa.asn.au/wpcontent/uploads/2017/10/ACWA_Education_OOHC_Snapshot

Australian Institute of Health and Welfare. (2015). *Educational outcomes for children in care: Linking 2013 child protection and NAPLAN data* (Cat. no. CWS 54). Canberra, Australia: AIHW.

Bowlby, J. (1965). *Childcare and the growth of love* (2nd ed.). Harmondsworth, England: Pelican Books.

Bowlby, J. (1982). *Attachment: Vol. 1, Attachment and loss*. New York: Basic Books.

Bronfenbrenner, U. (1979). *The ecology of human development: Experiments by nature and design*. Boston, MA: Harvard University Press.

Bruce, J., Fisher, P. A., Pears, K. C., & Levine, S. (2009). Morning cortisol levels in preschool-aged foster children: Differential effects of maltreatment type. *Developmental Psychobiology, 51*(1), 14–23.

Cameron, C., Jackson, S., & Connelly, G. (2015). *Educating children and young people in care: Learning placements and caring schools*. London: Jessica Kingsley.

Campo, M., & Commerford, J. (2016*). Supporting young people leaving out-of-home care* (CFCA Paper No. 41). Melbourne, Australia: Australian Institute of Family Studies. Retrieved from aifs.gov.au/cfca/publications/supporting-young-people-leaving-out-homecare/outcomes-young-people-leaving-care

Centre for Excellence in Child and Family Welfare, Melbourne, Victoria, Australia. (2019) *Getting more care leavers into uni*. Retrieved from https://www.cfecfw.asn.au

Courtney, M., & Hook, J. (2017). The potential educational benefits of extending foster care to young adults: Findings from a natural experiment. *Children and Youth Services Review, 72*, 124–132.

Courtney, M. E. (2009). The difficult transition to adulthood for foster youth in the US: Implications for the state as corporate parent. *Social Policy Report, 23*(1), 3–18.

David, L., & Wise, S. (2016). The *TEACHaR* program: Achieving better education outcomes for children and young people in out-of-home care. *Developing Practice, 45*, 34–43.

Davis, K., Gagnier, K., Moore, T., & Todorow, M. (2013). Cognitive aspects of fetal alcohol spectrum disorders. *Wiley Interdisciplinary Reviews: Cognitive Science, 4*(1), 81–92.

Department of Human Services, Victoria, Australia. (2007). *The home-based care handbook*. Melbourne, Australia: Department of Human Services. Retrieved from www.dhs.vic.gov.au/about-the-department/documents-and-resources/reportspublications/home-based-care-handbook

Dowd, M. (2017). Early adversity, toxic stress, and resilience: Pediatrics for today. *Pediatrics Annals, 46*(7), 246–249.

Downey, L. (2012, 2007). *Calmer classrooms: A guide to working with traumatised children*. Melbourne, Australia: Commission for Children and Young People, Victorian State Government. Retrieved from www.ccyp.vic.gov.au

Elias, M., & Dilworth, J. (2003). Ecological/developmental theory, context-based best practice, and school-based action research: Cornerstones of school psychology training and policy. *Journal of School Psychology, 41*(4), 293–297.

Erikson, E. (1950). *Childhood and society*. Harmondsworth, UK: Pelican. 1965.

Flynn, R., Marquis, R., Parquet, M.-P., Peeke, L., & Aubrey, T. (2012). Effects of individual direct-instruction tutoring on foster children's academic skills: A randomized trial. *Children and Youth Services Review, 90*(3), 1183–1189.

Forsman, H., & Vinnerlung, B. (2012). Interventions aiming to improve school achievements of children in out-of-home care: A scoping review. *Children and Youth Services Review, 34*(6), 1084–1091.

Frederico, M., Jackson, A. L., Black, C. M., Joffe, B., McConachy, J., & Worthington, N. (2014). *Small Talk: Identifying communication problems in maltreated children – Developing a problem identification tool*. Melbourne, Australia: Berry Street Childhood Institute. https://aifs.gov.au/cfca/pacra/small-talk-identifying-communication-problemsmaltreated-children. Accessed 24 Apr 2019

Freud, A., & Burlingham, D. (1944). *Infants without Families*. New York: International Universities Press.

Garner, A., Forkey, H., & Szilagyi, M. (2015). Translating developmental science to address childhood adversity. *Academic Paediatric Association, 5*(5), 493–502.

Gilligan, R. (2008). Promoting resilience in young people in long-term care—The relevance of roles and relationships in the domains of recreation and work. *Journal of Social Work Practice, 22*(1), 37–50.

Harvard Center on the Developing Child. (2019). *Early childhood development*. Retrieved from https://developingchild.harvard.edu/resources/inbrief-science-of-ecd/

Harvey, A., McNamara, P., & Andrewartha, L. (2016). Towards a national policy framework for care leavers in Australian higher education. In P. Mendes & P. Snow (Eds.), *Young people transitioning from out-of-home care: International research, policy and practice pp* (pp. 93–113). London: Palgrave Macmillan. http://aed.sagepub.com/content/early/2015/05/14/0004944115587529

Mendes, P., Baidawi, S., & Snow, P. (2014). Young people transitioning from out-of-home care: A critical analysis of leaving care policy, legislation and housing support in the Australian state of Victoria. *Child Abuse Review, 23*(6), 402–414.

Heft, H. (2013). Environment, cognition, and culture: Reconsidering the cognitive map. *Journal of Environmental Psychology, 33*, 14–25.

Jackson, S., Ajayi, S., & Quigley, M. (2005). *By Degrees: Going to university from care*. London: Institute of Education, University of London.

Jackson, S., & Cameron, C. (2012). *Final report of the YiPPEE project. Young people from a public care background: Pathways to further and higher education in five European countries*. London: Thomas Coram Research Unit, University of London.

Jackson, S., & Cameron, C. (Eds.). (2014). *Improving access to further and higher education for young people in public care: European policy and practice*. London: Jessica Kingsley.

Jurczyszyn, R. (2016). Going to university from care: An endurance event? *Developing Practice: The Child, Youth and Family Work Journal, 46*(4), 29–41.

Matheson, I. (2016). From the Guest Editor Special Issue on Education in Out of Home Care. *Developing Practice: The Child, Youth and Family Work Journal, 46*(4), 2–5.

McLean, S., & McDougall, S. (2014). *Fetal alcohol spectrum disorders: Current issues in awareness, prevention and intervention* (CFCA Paper No. 29). Melbourne, Australia: Child Family Community Australia, Australian Institute of Family Studies.

McNamara, P. (2005). Residential treatment. In A. Maluccio, C. Canali, & T. Vecchiato (Eds.), *Outcome-based research to improve the wellbeing of children and families* (pp. 61–72). Padua, Italy: Fondazione Zancan.

McNamara, P. (2016). 3rs+: Improving the primary school years for Australian children in out-of-home care [online]. *Developing Practice: The Child, Youth and Family Work Journal, 45*, 57–70.

McNamara, P., Harvey, A., & Andrewartha, L. (2019). Passports out of poverty: Raising access to higher education for care leavers in Australia. *Children and Youth Services Review, Special Issue, 97*(1), 85–93.

Mendes, P., & Snow, P. (Eds.). (2016). *Young people transitioning from out-of-home care: International research, policy and practice*. London: Palgrave Macmillan.

Michell, D. (2012). A suddenly desirable demographic? Care leavers in Higher Education. *Developing Practice, 33*(Spring), 44–58.

Montserrat, C., & Casas, F. (2014). Stability and extended support. In S. Jackson & C. Cameron (Eds.), *Improving access to further and higher education for young people in public care. European policy and practice* (pp. 178–214). London: Jessica Kingsley Publishers.

Montserrat, C., & Casas, F. (2017). The education of children and adolescents in out-of-home care: A problem or an opportunity? Results of a longitudinal study. *European Journal of Social Work*. https://doi.org/10.1080/13691457.2017.1318832

Okpych, N., & Courtney, M. (2018). Barriers to degree completion for college students with foster care histories: Results from a 10-year longitudinal study. *Journal of College Student Retention: Research, Theory & Practice.* https://doi.org/10.1177/1521025118791776. Accessed 24 Apr 2019.

Perry, B. (2001). Chapter 18: The neurodevelopmental impact of violence in childhood. In D. Schetky & E. P. Benedek (Eds.), *Textbook of child and adolescent forensic psychiatry* (pp. 221–238). Washington, DC: American Psychiatric Press, Inc.

Perry, B. (2009). Examining child maltreatment through a neurodevelopmental lens: Clinical applications of the neurosequential model of therapeutics. *Journal of Loss and Trauma, 40*, 240–255.

Schore, A. (2005). Back to basics: Attachment, affect regulation, and the developing right brain: Linking developmental neuroscience to pediatrics. *Pediatrics International Review/American Academy of Pediatrics, 26*(6), 204–217.

Snow, P., & Powell, M. (2012). Youth (in)justice: Oral language competence in early life and risk for engagement in antisocial behaviour in adolescence. *Trends and Issues in Crime and Criminal Justice, 435*, 1–6.

Snow, P., Timms, L., Lum, J., & Powell, M. (2019). Narrative language skills of maltreated children living in out-of-home care. *International Journal of Speech-Language Pathology*. (in press).

United Nations (UN). (1989). *Convention on the Rights of the Child, 20 November 1989* (Treaty Series, vol. 1577). http://www.refworld.org/docid/3ae6b38f0.html. Accessed 18 Nov 2016.

van der Kolk, B. (2013). The neurobiology of childhood trauma and abuse. *Child & Adolescent Psychiatric Clinical N America, 12*, 293–317.

Wise, S. (2016a). High-quality early childhood education and care can help address education inequality: Background to the Early Childhood in Foster and Kinship Care study. *Developing Practice: The Child Youth and Family Work Journal, 45*, 44–56.

Wise, S. (2016b). Enhancing the early learning environments of young children in out-of home care can help address education inequality: Background to the Early Childhood in Foster and Kinship Care study. *Developing Practice, The Child Youth and Family Work Journal, 45*, 45–53.