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with Children and Young People**



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Contents

Editorial Comment: Child and Youth Care and the Video Assisted Referee	5
<i>Mark Smith</i>	
Never Say Sorry	11
<i>Kiaras Gharabaghi</i>	
The role of informal networks in the lives of young people transitioning from care: A review of the literature	17
<i>Philip Teer</i>	
Real People	43
And What About the Drugs?	46
<i>Hans Skott-Myhre</i>	
Children’s Rights To Education And Non-Discrimination In Schools: Young People With Disabilities In The School System & the role of Child and Youth Care	55
<i>Samantha (Sam) Walsh and Tara M. Collins</i>	
Postcard from Leon Fulcher	70
Information	75

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Reframing The Trauma Lens

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Professionals and carers have long understood that a particularly difficult experience or cumulative disadvantage in a child's life can leave a legacy that impacts their present-day functioning. It is also true that not all children who have experienced adversity seem to be overly affected by it. So, we should not necessarily assume a debilitating reaction to past experience. In the space of little more than a decade, this connection between past and present has come to be understood through a lens of trauma, yet the question of just what trauma is remains largely unexamined.

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What does the evidence tell us on trauma and trauma informed care?

What are the politics of trauma?

What are the implications of trauma approaches for professionals and carers?

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Child and Youth Care and the Video Assisted Referee

Mark Smith

I've been meaning to write this piece for a while now. It was on my list of things to write when, a few months ago, I committed to return to writing a regular column for *CYC-Online* until work and life got in the way once again. But the fact that it is my turn to do the editorial this month gives me the chance to dust down my idea.

When I used to write a regular column and struggled with ideas for what to write about, I would sometimes fall back on something football (soccer for the uninitiated) related. And I do so again here. The exact focus became clearer during last year's World Cup in Qatar but the idea had been germinating for a month or so previously from when Scotland introduced Video Assisted Referee (VAR) technology. It was first rolled out at a Hibs (my team) game on a Friday evening in October.

The background to the demands for VAR to be introduced in Scotland (it is already used in many countries) was fans' claims of referees' incompetence and even corruption. As someone who had spent a lot of time at university and subsequently when my own children were younger, refereeing football games, I never bought into this – I just didn't believe



March 2023

ISSN 1605-7406

there was time in the moment from seeing something happen on the field to blowing my whistle to think through what outcome I might want from a particular decision. The result was that I, and I suspect all referees, called things as we saw them, probably getting most but certainly not all of those calls right. Ironically, some of the wrong calls were what made football exciting and animating.

While I never believed that VAR would improve football, advocates felt it would bring objectivity, certainty and would open up the black box of decision making. I have to report that I was right. The experience is that VAR has just brought more chaos, as decisions that seemed perfectly sound and were undisputed on the field of play are being brought back for further analysis, and in many cases overturned. Fans can no longer experience the euphoria of goals scored in the moment, for there is always the prospect of them being rescinded on subsequent video analysis. The very essence of football as spontaneous and contested has been sanitised. Moreover, few of these decisions have brought the hoped for clarity – the contestation remains, it is just no longer spontaneous. Pundits and fans now argue over the rightness or wrongness of VAR decisions. The ire of the very same fans who once targeted the incompetence of referees on the field has transferred to referees officiating from behind TV screens.

What has this got to do with CYC, you might wonder. Well, for me, the arguments over VAR took me back to my days in practice, and particularly in management, when staff would tell me that we needed more and better rules. That way, staff and youth would benefit from that old shibboleth of residential care, 'consistency'. Now I know my Henry Maier, and his sage advice that consistency is neither possible nor desirable. And I used, with



varying degrees of success, to let staff know that. Yet still, every new generation of CYCs seems to want consistency. I have worked in places where the more precise this pursuit of consistency became, the more ridiculous and unworkable the outcomes.

The root problem in such situations, whether we focus on football or CYC practice, centres around the nature of knowledge. Now, I don't believe, as much contemporary culture would have it, that there are no objective facts - just subjective experience. If a player is ten yards offside, then that's generally a matter of fact rather than opinion. If a player is in line with a defender and it's hard to determine whose body part is in front of another's, that comes down to interpretation. The same in CYC. In some situations, what is good and bad or right or wrong, is clearcut. In many situations, though, we are again left to make a judgment between differing interpretations of the same event. And, as in football, it can depend on the lens you bring to a situation or the angle from which you are able to view it.

Nevertheless, some referees seem to get more decisions right than wrong, and some child and youth care workers seem to come to better decisions than others, and do so more consistently. They demonstrate what might be thought of as practice wisdom – we know wise referees and practitioners when we see them – even if they don't get everything right, we tend to be reassured by the fact that it is them caught up in a difficult situation, having to make decisions about it. How they handle such situations has little to do with rules but is far more about dispositional or character traits that seem to lead them to do the right thing more times than not. In fact, trying to apply rules and to be consistent in situations that are invariably unique can lead to disaster; we may need to bend rules to fit



with the particular circumstances we face and we need to be comfortable in and to enjoy the strangeness that is CYC (and football).

Running alongside my angst over VAR, I have been involved in a few discussions, perhaps, I'll admit, those of old men reminiscing over old professional glories, around how CYC as a field risks losing touch with knowledge of some of its founding figures and ideas. I find it interesting that in writing this piece, I, without thinking of theory, fall back on Henry Maier, whose writing I was introduced to by Leon Fulcher back at Stirling University in the 1980s, and subsequently by Thom Garfat when I started writing for *CYC-Online*. Henry's (if I can be presumptuous enough to use his first name) messages are timeless. Remember this one – 'consistency is neither possible nor desirable'.

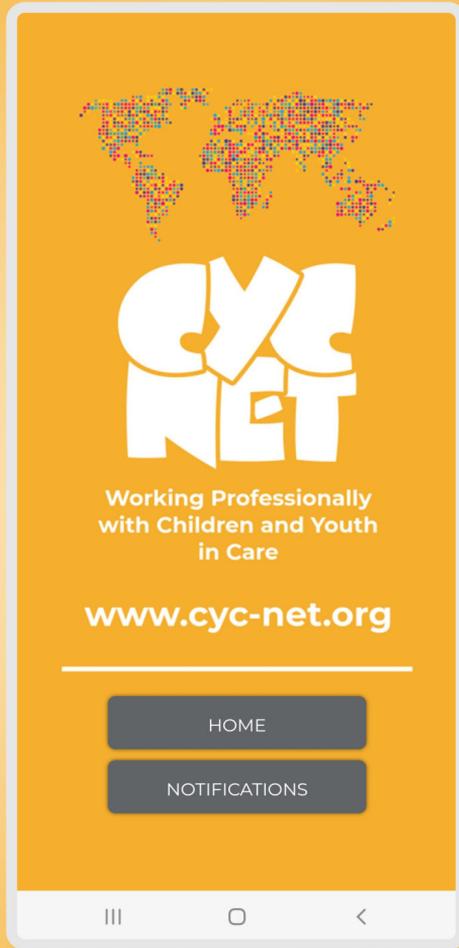
DR MARK SMITH was a practitioner and manager in residential child care settings for almost 20 years before entering academia. His first academic post was at the University of Strathclyde, where he set up and taught a Masters programme in residential child care. In 2005, he moved to the University of Edinburgh as lecturer, and subsequently, senior lecturer, in social work. He served as head of social work there from 2013-2017. In 2017 he joined the University of Dundee as Professor of Social Work.

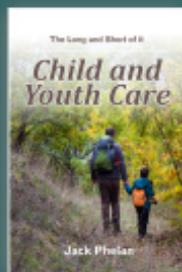
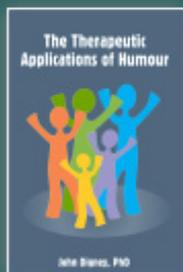
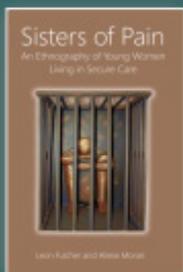
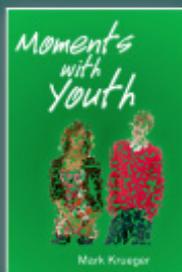
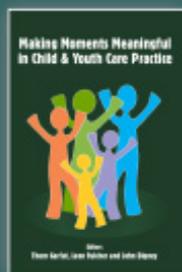
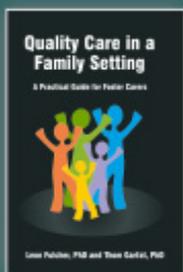
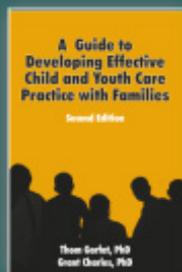
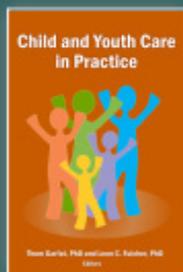
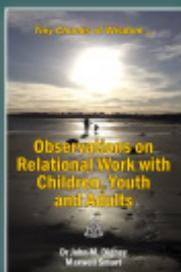
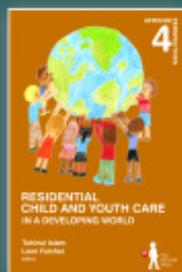
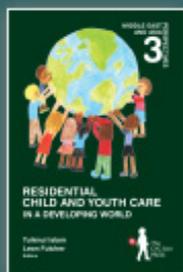
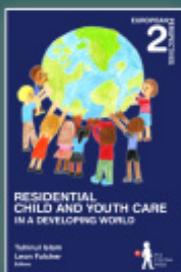
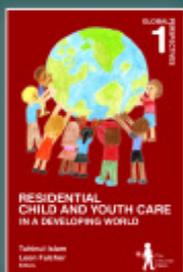
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Never Say Sorry

Kiaras Gharabaghi

Every now and then, I listen to a child and youth care practitioner talk about their day at work, whether that be in a residential program, a school, or a recreation centre. And surprisingly often, that day involves dealing with a young person who has done something to upset other young people, was removed from the group of young people they upset, and then allowed to re-enter that group under the condition that they say 'sorry'. This part of the story is usually told almost casually, in passing, as if it were the most obvious thing and not in need of contemplation at all. Instead, the story centers around what happened before the young person was removed, and how things continued after the young person re-joined the group. And yet, I would suggest that the most interesting part of the story is this phenomenon that we often make young people apologize for their misdeeds before allowing them to be with other young people. Far from trivial or obvious, I think this is a rather important moment, and not one that speaks particularly well of relational practices, anti-oppressive practices, or, for that matter, youth-centered practices. So, this month, I want to encourage us to think about all the things that go into forcing a young person to say sorry before being able to re-join the group.

The first thing that happens is that we eliminate a million ways in which a young person might think about whatever it is they did to upset others.



March 2023

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By reducing the possibilities to saying sorry, we eliminate, for example, the young person's view that what they did was the right thing to do in the context of either what was happening in the group at the time, or in the context of what the young person felt they needed to do in order assert their self-worth, their identity, or their way of being in the world. Asking young people to say sorry means that we are not asking them to explain their thinking; in fact, it means that we encourage *not thinking* about where the original behaviour or actions came from, and instead to undo those actions by simply saying sorry.

The second thing that happens is that the process of negotiating re-entry into the group becomes a binary power play. We demand a very specific product (saying sorry), and we impose this demand on the young person regardless of how the young person makes sense of it. For the group of young people who will receive the 'sorry', the message is not that the offending young person is sorry, but that they have been sufficiently disempowered by the child and youth workers to submit to their demand to say sorry. What the other youth see is a peer who has been stripped of their autonomy. This may well be satisfying for a moment of time, but beyond that moment, it is a message to all the young people that when the time is right, anyone can be stripped of their autonomy and made to do whatever is demanded by those in charge.

The third thing that happens is that we demonstrate a lack of commitment to the concept of truth and reconciliation. While we use these terms mostly in the context of healing from large-scale social oppressions, such as the genocide of Indigenous peoples in Canada and the United States, or apartheid in South Africa, the concept of truth and



reconciliation is at the heart of virtually all conflict resolution and subsequent healing processes, even at much smaller scales of group conflict in the context of a residential program or a classroom. Fundamentally, the concept demands that there be truth about what happened, why it happened, and whose benefits whatever happened served, and that there then be strategies, commitments, and resolutions to move forward in a different way that integrates the injustice of the past into the construction of a future with equitable power and privilege sharing. Saying sorry obscures the truth. In fact, saying sorry suggests that whatever was done wrong was not really meant to be done wrong and therefore we regret doing it wrong. This is almost never the truth. Far more likely is that whatever was done wrong was meant to be done wrong because it served purpose and created real or perceived benefits for the wrong doer, and sometimes, even usually, for others in the group who simply were not identified as benefactors of the wrongdoing. For example, when a young person yells out racist phrases at the group, that young person is removed from the group and can't re-enter the group until they say sorry to the group. But it wasn't just the offending young person who benefitted from yelling the racist phrases at the group. Their act reinforced the power of the dominant racial group and perpetuated white supremacy, so that even young people who may not have participated in yelling out such phrases benefit from this having happened. Instead of taking up the complex ways in which wrongdoing impacts on social contexts, we obscure this truth by individualizing the issue and undoing it using that simple phrase of total disempowerment – I am sorry. Without truth, there can be no reconciliation.



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The fourth and final thing I want to expose this month is that saying sorry doesn't only raise the question of whether one *actually is* sorry. It also raises the question as to whether *one ought to be* sorry for having upset others. I think about this in two different ways. First, what exactly is the offending young person sorry for? Are they sorry that they allowed themselves to be impulsive, perhaps rude, socially awkward, or otherwise imperfect in their behaviour? Are these not the very reasons they are likely in this program in the first place? Are they essentially apologizing for being who they are and how they are? One might replace the sorry with this:

“Forgive me for presenting myself as I am and as every psychological report, behaviour assessment, intake screening and professional opinion has agreed reflect the outcomes of my circumstances; from now on, I will pretend to be different, negate my history, identity and circumstances, and conform to whatever expectations you may have of me to meet the normative requirements of human interactions you have imposed here”.

Second, there have been many occasions where I have observed challenging behaviours on the part of young people that were provoked by the actions of the staff in the setting, or by the inaccessibility of the environment, or by the lack of customization of some performance demand placed on the young person. In those instances, I am not really sure that the behaviour of the young person is the problem. It may, quite to the contrary, be entirely justified and appropriate given the circumstances. Who should be saying sorry in these instances? The young person for their



behaviour, or the professionals for failing to meet the needs of the young person at that moment in time?

My point is that making young people say they are sorry before allowing them to rejoin the group is a loaded process. There is much more going on here than simply resolving tension and getting the day or the shift back on track. Perhaps most importantly, we lose so much opportunity for group learning in this process by essentially imposing the resolution of the issue entirely onto the young person identified as the offender. Sometimes, saying sorry actually perpetuates significant injustice and serves the benefit of those whose wrongdoing is much more sinister than a simple behaviour deemed inappropriate. I think a much better way of dealing with these kinds of circumstances is to engage the rich and generally very useful ideas embedded in restorative practices, which are not based on the demand for remorse but instead focus on community healing, with accountability spread across the community rather than in truth-negating gesture of saying sorry. I know all of this seems like I am making a simple issue rather complicated. So, sorry about that ...

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The role of informal networks in the lives of young people transitioning from care: A review of the literature

Philip Teer

Abstract

Young people leaving the care system face significant challenges when making the transition to adulthood, with limited support from other agencies. Their outcomes are significantly poorer than those of their non-care peers. This review aims to synthesise recent research on informal network support for care leavers making the transition to adulthood.

Keywords

Children in care, transition, social networks

Introduction

The link between leaving care and poor life outcomes is well established. Care leavers are poorly equipped prior to transition and



March 2023

ISSN 1605-7406

17

subsequently experience loneliness, isolation, poor mental health, unemployment, poverty, drift and homelessness (Stein, 2005).

Numerous papers and reports have highlighted such shortcomings and offered recommendations aimed at supporting care leavers. For example, the policy document *Care Matters* (DHSSPS, 2007) highlights the need to strengthen support for young people leaving care as they make the transition to adulthood. Nevertheless, the quality of support for care leavers remains patchy, and the 'longstanding problem' of poor outcomes (National Audit Office, 2015, p. 5) continues to present challenges for policymakers and governments, both in the UK and internationally.

Prior to leaving care at eighteen, young people can experience nurturing relationships with carers who provide ongoing emotional and practical support. While a small number in Northern Ireland may stay in foster placement until 21 as part of the Going the Extra Mile (GEM) initiative, the majority of young people will leave their care placement before turning eighteen. The post-care framework significantly decreases the support that young people receive, whether they have been in a foster or residential placement, and most make the journey out of care largely on their own (The Centre for Social Justice, 2013). Literally overnight, some will move from their care placement to independent living in the community with a limited network of people around them. As one care leaver put it, "I never left care, care left me" (The Centre for Social Justice, 2013).

Research on care leavers suggests their transition out of care and into adulthood is 'compressed and accelerated', placing unrealistic responsibilities and expectations on them (Stein, 2012). Furthermore, predisposing factors related to early trauma can impact on their ability to



trust others, affect emotional development and increase the likelihood of isolation (Smith, 2011).

In 2017/2018, there were 313 care leavers in Northern Ireland (DOH, 2018). The Health and Social Care Services (NI) retains responsibility for supporting young people post-18 into early adulthood. This responsibility was strengthened by the Children (Leaving Care) Act (Northern Ireland) 2002, which placed additional duties on the Trust to improve the life outcomes of young people leaving care through a Pathway Plan prior to leaving care. While the legal framework is clear, the system is not working effectively to deliver good outcomes (National Audit Office, 2015). For example, while the Pathway Plan includes consideration of support, identity, social needs and family relationships, in practice these elements are often missing, with practical aspects of transition, such as housing, training and employment, receiving primary focus (Munro, Lushey, Ward & National Care Advisory Service, 2011).

Recognition is emerging of the important role informal networks and relationships play in determining the quality of life after care (Winter, 2015). Various studies in this review have identified that strong relationships and supportive networks enable young care leavers to meet the significant life challenges they face and help to improve outcomes.

That said, the benefits of informal networks for care leavers have not received sufficient theoretical or policy focus to date (Dima & Pinkerton, 2016). This review therefore has four objectives: (1) identify and evaluate evidence from research on care leavers' experience of informal networks when making the transition from care; (2) explore how informal networks influence their adjustment to adulthood; (3) present recommendations for



further research; and (4) stimulate discussion to influence practice and policy regarding preparation for leaving care.

Limitations

The author is a team leader in a long-term residential home for young people aged twelve to seventeen which is part of the Belfast Health and Social Care Trust, Children's Community Services Directorate. The nature of this role, which involves working with care leavers transitioning out of residential care, with particular focus on their emotional needs, elevates the risk of confirmation bias (Nickerson, 1998) or overcompensation to avoid bias in the selection process.

These factors may have influenced the selection of studies and the focus on areas relevant to the author's own interests at the expense of others.

Method

A systematic search was undertaken using three bibliographic databases: PsycINFO (Ovid platform), Social Care Online (SCIE) and Social Services Abstracts. Systematic searching identified three concepts: 'children in care', 'transition' and 'social networks'. Of the 161 studies retrieved initially, ten articles were identified following expansion and amendment of the search terms as being pertinent to the review topic and meeting the inclusion criteria.



Inclusion criteria

The primary focus of this review, and therefore of the studies selected for inclusion, is on informal networks. A significant challenge in the selection process was the lack of an agreed definition of this term. For the purposes of this review, informal networks include those adults in the community who do not have a paid role in the young person's care and with whom the young person has a personal significant relationship. These include biological and extended family members, mentors, former carers, foster carers and individuals from community organisations.

To be selected, studies must have been peer reviewed and published in English between April 2018 and January 2000. This time range ensured content was relevant to current policies and practices. The selected studies varied in size, geographical location and age of participants, and include both residential care settings (n=5) and foster care settings (n=5). They also varied methodologically, with data collected through interview, survey and focus groups involving various participants, including care leavers, carers, and caseworkers.



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Findings

Emerging themes

- Informal networks and interdependent approaches can play an important role in helping young people transition out of care;
- Negative experiences in early childhood and placement disruption create additional challenges to forming meaningful relationships and support networks;
- Educational and learning approaches help young people develop relationship skills and help significant adults understand the difficulties care leavers have in making connections;
- Care leavers receive different types of support from various people through informal networks;
- Prosocial activities create opportunities for care leavers to develop informal network support.

Role of informal networks

Across the studies, there was recognition of the important role of informal networks that include various family members, peers, naturally occurring mentors, and community groups (Collins, Spencer & Ward, 2010; Dinisman, 2016; Dima & Pinkerton, 2016; Sala-Roca, Biarnés, García & Sabates, 2012). Across these studies, four main social support figures were mentioned: care system staff (foster parents, caseworkers, and home staff) representing formal networks; and family members (biological parent,



siblings, and extended family), mentors, and peers representing informal networks (Sala-Roca et al., 2012).

Frimpong-Manso (2017) found that those involved in formal networks and services, including foster carers and home staff, gradually take on an informal role such as significant adult or mentor after transition. However, this change from a formal to an informal role appeared to be limited, the exception, not the rule.

Both Dima and Pinkerton (2016) in Romania and Frimpong-Manso (2017) in Ghana examined outcomes for care leavers in countries where there is little or no formal support. In this regard, they are unlike the other eight studies, which were located in countries with formal aftercare services. Dima and Pinkerton's (2016) mixed-method study comprised three stages of data collection. The first phase involved semi-structured interviews with 34 young people who had left residential care two to four years earlier (between 2004 and 2006). This data was analysed qualitatively using Interpretative Phenomenological Analysis (IPA). Two further waves of data collection followed in 2016. The first of these involved interviews with two young people and file data. The second involved a focus group of six other care leavers who were involved in an aftercare programme.

Thematic analysis of both datasets was conducted.

The study provided a unique perspective on informal support that highlighted the important role played by peers in providing emotional and practical support to care leavers and identified the practice of discharging young people in small groups and setting them up in accommodation to live together in the community. Its findings suggest that informal networks, particularly care peer support networks, are very effective in



supporting care leavers through challenges such as accommodation, relationships and instability in the absence of formal networks. However, the study also highlighted the disadvantages of peer support. For example, peers can be fluid and perpetuate negative behaviour and a care identity. The authors conclude that special attention should be given to learning from countries where there is an absence of formal support and suggest that informal networks may be the 'richest resource available to those who have left care' (Dima & Pinkerton, 2016, p. 424).

Like Romania, Ghana is a country with little formal aftercare support. Frimpong- Manso's (2017) qualitative study sampled a group of 29 former residents of a care home in Ghana from which the young people experienced a graduated and extended transition to the age of twenty. In examining the sources and types of support as well as the barriers to social support in the absence of formal support the author found that the role of care staff changes from formal, professional SOS carer to informal mentoring. The findings suggest that the graduated transition process was a factor in maintaining these strong relationships well into adulthood.

The importance of family support was evident in a number of studies. Most young people named their biological mother in particular as an important influence, even if they found their foster parents supportive when they were in their care. In contrast, biological fathers were rarely mentioned in these studies (Nesmith & Christophersen, 2014; Collins et al., 2010; Jones, 2013).

Jones' (2013) qualitative longitudinal study examined the adjustment from foster care and the level of social support. The author conducted structured interviews with 97 young people over a two-year period at six



months, one year and two years. Highlighting the important role of biological and extended family in a care leaver's network, Jones (2013) suggested that the ties with family remained strong even when a young person spends a long period in care. Some contradictory findings regarding family support were reported, however. For example, the study found that while biological family can be a great source of support, young people who return home did more poorly than young people living independently because of previous family problems.

Furthermore, the prominence of family during transition reported by Jones (2013) contrasted with the findings from other studies that suggested family provided limited or no support to care leavers (Sala-Roca et al., 2012; Frimpong-Manso, 2017; Dima & Pinkerton, 2016). These studies suggest various reasons for this, including the family's belief that the residential home meets most of the young person's needs post-care or the presence of substantial relationship difficulties that led to the original family breakdown. Nevertheless, Jones' (2013) main finding was the need for professionals to engage much more proactively to reconnect young people with their family members.

The importance of family in supporting care leavers was highlighted also by Collins et al. (2010), whose mixed-methods study sought to examine care leavers' social support and outcomes and to identify types and characteristics of supportive relations. Qualitative and quantitative data was collected from 96 young people discharged from foster care, aged nineteen years and above, through in-person interviews using a combination of closed survey and open-ended questions. Descriptive



analysis was used to summarise young peoples' views of their social support.

The relationship between social support and self-reported youth outcomes was examined through bivariate analysis. Most young people (90%) in the study had contact with their birth family and identified the birth mother as the most significant person. The birth father, by contrast, did not feature as a significant person. Both these findings were echoed in other studies. Like Jones (2013), Collins et al. (2010) recommended further assistance for care leavers to facilitate reconnection with their birth family. These studies suggest that little is known about the benefits and problems that may stem from reconnection with family after care and that more attention on family is required in support plans prior to discharge.

The impact of early negative experiences and placement disruption

Daly (2012) used a mixed-method approach of survey and interview to collect data on 65 young people aged seventeen to eighteen currently involved with aftercare services in North Dublin. A survey questionnaire was used to retrieve data from participants' case files, including care history, education, accommodation and health.

A follow-up survey was distributed eight months later to the same participants. The survey data was complemented by semi-structured interviews with the caseworkers (n=8) who had provided the survey data and eight young people drawn from the original group of 65. These interviews aimed to provide an in- depth view of young people's experiences of leaving care and aftercare service, as well as practitioners' views of emerging issues working with the group of 65 care leavers.



The main method of the study was quantitative. Because the question posed by the title of the study, *What do Young People Need When They Leave Care?*, is very broad, numerous aspects of care leavers' general needs were addressed rather than a specific topic. Nevertheless, some of the findings were relevant to the topic of informal networks. In addition to highlighting the views of significant adults and identifying relationship characteristics from a care leaver's perspective, Daly (2012) suggested that instability and placement moves in a young person's care history increased the likelihood of frequent accommodation moves after care. This finding echoes established theory, which suggests that placement movements can re-traumatise young people and impact negatively on their future ability to develop relationships and make connections (Bowlby, 1980).

Daly's (2012) findings highlighted the negative impact of repeated network disruption on the wellbeing of young people, which compounds the challenge of creating supportive networks prior to leaving care. The study also recommended assessment and planning around emotional needs. Like those from other studies in this review, this finding is in line with the overwhelming view from young people regarding the importance of having someone they could turn to in times of need and an adult they could trust and rely on.

Educative and activity approaches for young people

A number of studies highlighted a growing recognition of the need to help young people strengthen their internal resources through educational approaches that increase their competence, coping skills, and



self-efficacy, thereby promoting social connection and creating supportive networks.

Nesmith and Christophersen (2014) assessed the benefits and effectiveness of an American foster model entitled CORE (Creating Ongoing Relationships Effectively), which was designed to improve care leavers' transition to adulthood. The model engaged others involved with the young people such as their foster carers.

Nesmith and Christophersen (2014) is a qualitative comparison study with a longitudinal element. The study sample comprised 88 young people who were currently in the care system and connected to one of two foster agencies. Both groups had similar demographic features and care histories. Participants ranged in age from fourteen to nineteen. One foster agency implemented the CORE model (n=58); the comparison group received traditional foster care (n=30).

The primary data source was in-person interviews with the foster youths, who were interviewed twice, nine to eleven months apart. Two assessment tools were developed specifically for this study. The first, relationship competency assessment, was used both pre- and post-interview. The second assessment tool, quality youth relationship assessment, included a scale addressing areas such as trust, encouragement, and willingness to devote time to the young person.

An educational programme targeted at young people leaving foster care, the CORE model was designed to help them learn skills to develop supportive networks. The model focused on three areas: relationship skills to build supportive relationships, empowering young people to be involved in all aspects of the planning, and educating adults such as foster carers



about the impact of trauma and its effects on young people. The programme included a twelve-week “Emotional Effectiveness Education”-session, which brought foster carers and young people together. The primary recommendation of CORE is that nurturing relationship programmes should supplement daily living skill programmes.

Nesmith and Christophersen (2014) concluded that the CORE programme yielded positive results in terms of helping older foster youths develop relationship skills and develop relationships with adults post-care. They recommended that programmes to nurture relationships should be promoted and incorporated into the independent living programme for care leavers, which places foster youths at the centre of planning and decision-making processes.

They also recommended education programmes for adults working with young people regarding the impact of past trauma on present behaviour to help foster youths develop relationships. This is in line with other studies that have advocated an increased emphasis on an educative programme aimed at helping care leavers develop connections in the community with naturally occurring mentors or significant adults.

Sala-Roca et al.’s (2012) study involved 21 care leavers aged nineteen to 28 who had left residential homes in Catalonia, Spain. The study had a comparative dimension, as participants were selected based on the success or failure of their transition. Data was collected through qualitative, semi-structured, in-person interviews, conducted by two interviewers to minimise subjectivity, at a venue preferred by the young person. Topics included the young person’s involvement in education, social relationships with peers, current social network, and housing problems. The interview



content was analysed by means of an inductive classification process using analysis scales.

One finding from this study was that the group who experienced a successful transition had better social abilities, which was partly due to the socio-educative intervention by the homes. Most participants in this group reported enrolling in leisure activities and in extra-curricular activities which they felt helped them develop relationships. By contrast, the other group had problems with employment and society and appeared to have poorer social and emotional skills. They did not engage in activities and had a small social network. The authors therefore recommended that social and emotional education programmes be implemented to help young people in care develop abilities and create and maintain social relationships (Sala-Roca et al., 2012).

Both Sala-Roca et al. (2012) and Thompson and Greeson (2017) specifically suggested involving young people in extra-curricular activities to promote the acquisition and development of social skills. Furthermore, these studies highlighted the need to design programmes that will increase care leavers' opportunities in different areas of their lives.

Dinisman (2016) focused on 272 young people leaving care from a residential setting in Israel. Having identified a lack of emotional and tangible support in the participant group, the author recommended greater emphasis on relationship skills and emotional preparation for leaving care alongside practical skills development, designing programmes that strengthen internal resources through educative approaches to relationship skills building and emotional competency, and putting the young person at the centre at the planning process. The study



also identified a need for specific leaving care programmes that provide opportunities to participate in pro-social activities to help young people build social networks and promote an interdependent approach.

Types of support

The selected studies reference different types of support in which various people are involved. For example, informative support, which includes advice, guidance, and provision of services to help young people cope with future challenges, is likely to be provided by care system staff (that is formal networks). Jones (2013) suggests that care system staff also provide 'instrumental support' relating to material aid, finance, and housing. Although Dima and Pinkerton's (2016) findings suggest that peers, care peers, and friends were more prominent in providing an 'instrumental role', this could be due to there being limited, if any, formal support in Romania (Dima & Pinkerton, 2016). Despite these challenges, the young people quoted in these studies place a high value on trust.

Day-to-day emotional support was found to be provided on a primarily informal basis by peers, siblings, and significant adults in the community or naturally occurring mentors/significant adults (Collins et al., 2010; Dinisman, 2016; Nesmith & Christophersen, 2014). Young people themselves defined emotional support as someone who provides advice and comfort when they have a problem, as feeling valued and loved, and someone who they trust to share a problem and who believes in them (Dinisman, 2014; Frimpong-Manso, 2017; Jones, 2013). Interestingly, these definitions of emotional support seem to mirror the aspects of care young people may not receive in early childhood.



There was broad acknowledgement across the studies that young people recognise the importance of family support and the need for a feeling of closeness whether they are still in care, with family or living independently. Support from family is complex considering many young people enter care due to poor parenting and relationship breakdown at home. As Jones (2013) highlighted, some young people who returned to the family home after discharge did less well than peers who moved to independent living.

Collins et al. (2010) identified a need to think more creatively about how to tap into potential support from adults and to recognise that the composition of these networks and their effectiveness in helping care leavers in particular circumstances is not clear-cut.

Prosocial activities to develop relationships with others

Thompson and Greeson (2017) examined the extent to which involvement in prosocial activities is associated with naturally occurring mentoring, which they defined as 'supportive non-parent adults such as teachers, coaches, neighbours, and religious leaders' whom young people self-select. Questionnaires were administered through computer-assisted personal interviews to 720 foster children aged fourteen to seventeen prior to ageing out of care. The study suggests that environmental factors such as prosocial activities, community activities and clubs create opportunities for 'protective natural mentoring relationships' among foster youths who will be leaving care. However, the data collection method used in this study is a limitation, however, as computer- assisted interviewing may attract only computer savvy respondents.



Additionally, the data in this study is self-reported and not verified through any other source of data.

Thompson and Greeson (2017) suggest that foster children who participated in prosocial activities (e.g. organisations, hobbies, clubs, church) were less likely to have no natural mentor. Their study attests to the importance of ensuring that this type of (naturally occurring) mentoring is self-selected by the young person and develops gradually without pressure or expectation. The authors suggest that this form of mentoring may be less prone to trust difficulties and more likely to be long term in contrast to formal mentoring, which can be time-limited and not self-selective.

Collins et al. (2010), Daly (2012) and Thompson and Greeson (2017) observed that the settings where relationships and networks can be developed encompass a wide variety of systems and people, including employment settings, schools, and community and religious organisations. Similarly, Sala-Roca et al. (2012) highlighted the importance of leisure and extra-curricular activities as opportunities for young people to learn and develop values, skills, and behaviours that promote relationships. Their data also suggests a link between getting involved in prosocial activities and developing supportive aftercare relationships, such as those with natural mentors.

Dinisman's (2016) findings suggest that a young person's readiness to leave care will mediate the effectiveness of network supports post-care. This finding is important, as readiness to leave will be determined by the quality of planning and leaving care programmes. Furthermore, Dinisman (2016) suggests that planning should include assessment of young people's



emotional needs and abilities and extent of social support prior to leaving care so that any concerns can be addressed in a timely manner. Likewise, both Sala-Roca et al. (2012) and Thompson and Greeson (2017) recommend placing more emphasis on care planning for prosocial activities through community organisations/clubs to help the young person develop supportive relationships.

Discussion

Most young people growing up are likely to have well-established supportive networks of family members, peers, and other adults. However, this experience contrasts starkly with that of young people leaving care, who may have been separated from their families, communities, and school peers (Perry, 2006).

Almost a quarter of care leavers in the UK, for example, will have experienced more than eight placements, disrupting relationships and leading to dislocation (Department for Education, 2012) and instability that may be further compounded by staff turnover (Stein, 2005). Various studies in this review suggest placement disruption re-traumatises young people and instils and compounds a deep sense of distrust in others, further limiting their ability to develop the important relationships they need to support and enrich their lives.

Dima and Pinkerton (2016) suggested that care leavers might have difficulty asking for help due to past negative experiences. Fewer than half the interviewees in their study mentioned the need for help to 'overcome tough times', and one interviewee explained 'that even if the majority of care leavers needed emotional support, they would not admit it' (Dima &



Pinkerton, 2016 p. 420). In fact, one of the findings from the focus group in this study was that care leavers are more willing to offer emotional support than to ask for it.

Similarly, various scholars, including Frimpong-Manso (2017), have observed that young people leaving care have difficulty trusting others. Both Sala-Roca et al. (2012) and Collins et al. (2010) suggest that the issue of trust is compounded by lack of stability and staff turnover, which can re-traumatise those who have already experienced loss and who harbour a deep sense of rejection. The vulnerability of this group informs Nesmith and Christophersen's (2014) contention that foster carers and other professionals need to be educated about the attachment challenges and other factors that hinder the ability of young people to connect with others.

A significant theme across a number of other studies (Sala-Roca et al., 2012; Daly, 2012; Thompson & Greeson, 2017) was that external resources such as relationships with adults, mentors and participation in the community are linked to increasing potential for better outcomes. Likewise, various studies suggested more planning is needed around young people's social and emotional needs prior to discharge (Dinisman, 2016; Daly, 2012; Sala-Roca et al., 2012). Many studies highlighted the importance of young people developing internal resources through role modelling, shared values, and relationship skills through relationships with other in their community (Thompson & Greeson, 2017; Sala- Roca et al., 2012).

The findings from this narrative review highlight a need for better support for care leavers. While informal networks can play an important role in helping young people transition from care and into adulthood, the



studies also highlighted that predisposing factors associated with young people in care amplify the challenges of developing relationships, making connections, and asking others for help. Various studies suggest introducing educational programmes and promoting socialisation opportunities to help young people develop emotional resilience and the ability to connect with others.

Implications for practice

The findings from this review suggest that awareness is growing of the importance of informal network support for care leavers. Traditionally, there has been a focus on independent living skills as opposed to interdependent social connections and skills to help build relationships and promote the value system of a 'collectivist culture' (Frimpong-Manso, 2017, p. 195). However, there has been little research on how informal support networks may promote wellbeing (Collins et al., 2010; Dima & Pinkerton, 2016).

The review identifies the need to promote a learning agenda that will help care leavers develop relationships and informal supportive networks and simultaneously educate key adults on the challenges specific to care leavers and how best to support them. This narrative synthesis suggests that a variety of approaches could promote learning among young people regarding how to develop social networks and build relationships with potential mentors/significant adults in their community.

The review has identified a need for education not only of the care leaver, but also of those helping them. Attachment theory is fundamental when considering how people connect with each other and there should



be more of a focus on the challenges young people with attachment issues face in developing a network of support. Some research has highlighted the need to ensure that the underpinning principles of the helping and enabling role of professional and significant adults includes an ability to 'believe in' (Dinisman, 2016) the young person. Arguably, there could be a tendency to have lower expectations of care leavers than of their non-care peers, which could be detrimental to the young person's confidence and sense of self-worth.

Approaches that help promote relationship building through education and socialisation are explored in these studies. Practice and policy must incorporate such approaches to ensure a more meaningful focus on the social and emotional needs of young people in care. Towards this end, foster carers, social workers and residential social workers must be educated about the importance of their specific role and undertake training in the skills required to help young people in care develop meaningful links to their community.

The studies all advocate further research to establish the flow of support and analyse network support. For example, Blakeslee (2012) examined the need to understand commonalities through more innovative research around network analysis with the aim of identifying the level of support to help inform policies and practice.

Dima and Pinkerton (2016) found that peer support was especially important in the absence of a formal support system. This approach is not without drawbacks, however. Some of the young people in this study eventually concluded that these same peers were holding them back by



perpetuating negative behaviour and therefore decided to separate from them.

Sala-Roca et al. (2012) and Dinisman (2016) advocated more focus on designing a preparation programme to educate young people specifically in the development of relationship skills and to promote socialisation. Dima and Pinkerton (2016) concluded that research is needed on the interface between formal and informal network to complement support for care leavers.

Conclusion

Various studies in this review acknowledged the importance of interdependent as opposed to independent living. Additionally, the traditional focus on attainment and tangible support is giving way to a recognition of the role of relationships in promoting health and wellbeing. Indeed, some emerging research suggests that it is their relationships with others, not the accruing of individual attainment, that determines the quality of young people's lives after care (Winter, 2015).

Practice needs to develop ways to support an agenda that promotes peer support, peer educators, mentoring, and network group conferencing. The important role of existing formal networks such as organisational services and foster carers cannot be overlooked, as they can provide much needed stability for young people. However, this recognition should be developed alongside a better understanding of informal networks. Learning from other countries where there is an absence of formal support should continue. Informal networks may not be the panacea, but this



literature review suggests they represent a rich resource that should be developed.

Relationships and network support should have more prominence in pathway planning. In the assessment and planning process, emotional and social support are to some extent overlooked as professionals tend to focus on the practical needs of care leavers (Munro et al., 2011). Based on my professional experience, I would concur with this view.

References

- Blakeslee, J. (2012). Expanding the scope of research with transition-age foster youth: Applications of the social network perspective. *Child and Family Social Work, 17*(3), 326-336.
- Bowlby, A. J. (1980). *Attachment and loss, Volume II: Separation, anxiety and anger*. London: Hogarth Press.
- Children (NI) Order 1995 (as amended by the Children (Leaving Care) Act (NI) 2002) <https://www.legislation.gov.uk/nia/2002/11/notes>
- Collins, M. E., Spencer, R. & Ward, R. (2010). Supporting youth in the transition from foster care: Formal and informal connections. *Child Welfare, 89*(1), 125- 143.
- Daly, F. (2012). What do young people need when they leave care? Views of care-leavers and aftercare workers in North Dublin. *Child Care in Practice, 18*(4), 309-324. DOI: 10.1080/13575279.2012.713852
- Department for Education. (2012). *Children looked after by local authorities in England (including adoption and care leavers): Year ending 31 March 2011*. Retrieved 10 November 2012. Retrieved from: <https://data.gov.uk/dataset/b023f61d-1277-4aa0-8932-6419f70a0219/children-looked-after-by-local-authorities-in-england>
- Department of Health (DOH). (2018). *NI Care Leavers 2017/2018*. Retrieved from: <http://www.health-ni.gov.uk/topics/dhssps-statistics-and-research-social-services/social-care-statistics>
- Department of Health, Social Services and Public Safety (DHSSPS). (2007). *Care matters in Northern Ireland: A bridge to a better future*. Retrieved from: <https://www.health-ni.gov.uk/sites/default/files/publications/dhssps-care-matters.pdf>



- Dima, G. & Pinkerton, J. (2016). The role of informal leaving care support networks in Romania. In P. Mendes & P. Snow (Eds.), *Young people transitioning from out-of-home care* (pp. 409-426). London: Palgrave Macmillan.
- Dinisman, T. (2016). Life satisfaction in the transition from care to adulthood: The contribution of readiness to leave care and social support. *Child & Family Social Work, 21*(4), 401-411.
- Frimpong-Manso, K. (2017). The social support networks of care leavers from a children's village in Ghana: Formal and informal supports. *Child & Family Social Work, 22*(1),195-202.
- Jones, L. (2013). The family and social networks of recently discharged foster youth. *Journal of Family Social Work, 16*(3), 225-242.
- Munro, E., Lushey, C., Ward, H. & National Care Advisory Service. (2011). *Evaluation of the Right2BCared4 Pilots: Final report*. London: Department for Education.
- National Audit Office (NAO). (2015). *Care leavers' transition to adulthood*. Retrieved from: <https://www.nao.org.uk/upload/2015/07/Care-leavers-transition-to-adulthood>
- Nesmith, A. & Christophersen, K. (2014). Smoothing the transition to adulthood: creating ongoing supportive relationships among foster youth. *Children and Youth Services Review, 37*, 1-8.
- Nickerson, R. S. (1998). Confirmation bias: A ubiquitous phenomenon in many guises. *Review of General Psychology, 2*(2), 175-220.
- Perry, B. L. (2006). Understanding social network disruption: The case of youth in foster care. *Social Problems, 53*(3), 371-391.
- Sala-Roca, J., Biarnés, V. A., García, M. J. & Sabates, L. A. (2012). Socialization process and social support networks of out-of-care youngsters. *Children and Youth Services Review, 34*(5), 1015-1023.
- Smith, W. B. (2011). *Youth leaving foster care: A developmental relationship- based approach to practice*. New York: Oxford University Press.
- Stein, M. (2005). *Resilience and young people leaving care: Overcoming the odds*. York: Joseph Roundtree Foundation.
- Stein, M. (2012). *Young people leaving care: Supporting pathways to adulthood*. London: Jessica Kingsley Publishers.
- Thompson, A. E. & Greeson, J. K. P. (2017). Prosocial activities and natural mentoring among youth at risk of aging out of foster care. *Journal of the Society for Social Work and Research, 8*(3), 421-440.



The Centre for Social Justice. (2013). *'I never left care, care left me': ensuring good corporate parenting into adulthood*. A briefing paper for peers on proposed amendments to the Children and Families Bill. Retrieved from:

<https://www.centreforsocialjustice.org.uk/core/wp-content/uploads/2016/08/IneverleftcareCSJ2013.pdf>

Winter, K. (2015). *Supporting positive relationships for children and young people who have experience of care*. Insights: Evidence summaries to support Social Services in Scotland, No. 28. Glasgow: Institute for Research and Innovation in Social Services.

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The main journal cover features a large, close-up photograph of a child's face with blue eyes and freckles. The top half is an orange banner with the journal title in white. The bottom left has a white logo and ISSN, and the bottom right has a logo for The CYC-Net Press and the website address.

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Real People

Carl Rogers saw, as a major goal of therapy, that persons should accept responsibility for their own values and recognise where they are living by the values of others. He looked for a client to move away from façades, “away from a self that he is not” while beginning to define, however negatively, what he is.

August Aichhorn believed that we should refuse even to respond to the tough exterior of aggressive kids, even if this caused them to suffer a crisis when they realised that their current *modus operandi* wasn’t working.

Fritz Redl was more tolerant in his acceptance of current “symptoms” and recognised that a child was at their most vulnerable when letting go their old ways of functioning before mastering new ways.

We know that children will construct a “front” behind which to hide their insecurity or doubt (whether the front is one of toughness or weakness); and we know that the only way children can change is when there is least *threat* to their sense of self and *maximum acceptance* of whoever they are right now.



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We adults often collude in the building of false fronts, for example, when we demand external compliance in children’s attitudes and behaviours, even when these are not built on the real foundations of their own skills and wills.

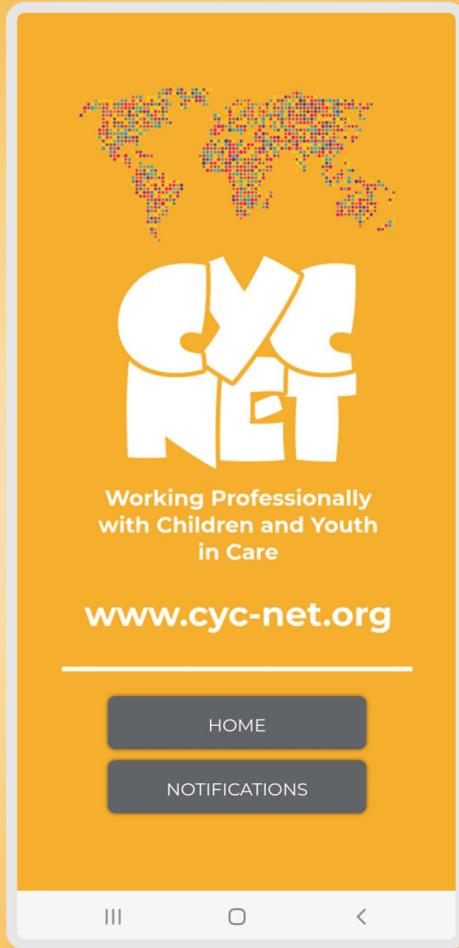
The message they really need to get from us is the same message we needed from our own parents: “No matter what, we love you.” In our practice today we give children new goals and beliefs when we convey this message. “You don’t need the façade or the pretence of being something you are not: you are worthwhile as you are.” Again: “Where you are right now is a good enough place to start with the rest of your life.”

From: *CYC Practice Hints III: A collection of practice pointers for work with children, youth and families* by Brian Gannon.

Practice Hints I, II and III are available from The CYC-Net Press store [here](#).



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And What About the Drugs?

Hans Skott-Myhre

I have been around drugs for well over 50 years. When I was in junior high and high school, my friends and I all used a variety of drugs from marijuana and psychedelics to cocaine, speed, and barbiturates. For my closest friends and myself, we smoked marijuana daily and used a mix of psychedelics, coke, uppers and downers on the weekends at shows and parties. Ironically, most of us didn't drink, because drinking was for jocks, not hippies and freaks like us. I followed that usage pattern for about five years, or until I was entering my senior year in high school. After a particularly intense weeklong binge, I suddenly was sick of it and I quit. I was fortunate that I wasn't predisposed to addiction or dependency, and I found it pretty easy to walk away. I had never done heroin or opiates, only because they didn't come on the menu during my intense period of using. So, that level of addiction wasn't an issue for me. I was sober for about two years and then started using psychedelics, marijuana and alcohol when I went off to college. Once again though, I quit after it became boring and tiresome. It didn't take much effort. I just quit. Since that time, my personal use of drugs have never played a significant role in my life. Outside of periodic heavy alcohol use and overeating, my addictive propensities have been minor. In other words, I dodged a bullet.

Others in my life have not been so lucky. I have several family members who have struggled with alcoholism and drug addiction for decades. I have



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had close friends die of overdoses and cirrhosis of the liver. Others have lived lives profoundly complicated by addiction and the cycle of use/treatment/use. Some have gotten sober, others haven't and probably won't. Addiction will very probably kill them directly or indirectly. That part makes me very sad and angry.

I find myself, like many of us who have people in our lives suffering from addiction, highly ambivalent about how I feel towards those still using in problematic and life-threatening ways. As people, I care for them deeply. As addicts, I find myself being very angry, judgmental, and paranoid towards them. I am very protective of myself and my circle of non-addicted loved ones in the face of possible or even probable scams or predations in the service of addiction. It is a profoundly uncomfortable positioning which I struggle with quite often.

All of this in the context of the fact that I have been an addictions counselor and have trained others and even written manuals on how to work with addiction. In my professional role, I am compassionate and caring towards those suffering from addiction. I have a strong sense of the powerful social forces at play in the lives of those addicted to life threatening substances. I am responsive to their pain and hunger. I want to work with them in ways that makes life more bearable, even if it means continuing to use. It is a very different position emotionally and relationally than when it all becomes personal.

This is not the column I was going to write this month. I had to put that one off when I read a piece in the *New York Times* this morning, the teaser for which was, "One Year with a Team Trying to Change America's 'Deep Hatred' for Those Who Use Drugs." The actual title was a bit less charged,



“One Year Inside a Radical New Approach to America’s Overdose Crisis.”

The article was a deep dive into the actual street outreach efforts of a harm reduction team in New York City and I found the arguments for harm reduction convincing and compelling. But, in a very real sense, they were preaching to the choir. For many years I have been an advocate for harm reduction and so that part wasn’t new for me. What caught my attention was the question of our “deep hatred” for those who are addicted to drugs.

Here was a painful exploration of my own ambivalence towards addicts. A very real exposition of what it means to care for those struggling with a life-threatening relation to substances. At the same time, an acknowledgement of how much we really hate our brothers and sisters who are addicts. For myself, I seem to fall back on dubious frameworks such as hating the addict, but not the person who is addicted. This is regrettably similar to hating the sin, but not the sinner. I am not at all sure such linguistic gymnastics really hold the kind of integrity, I would hope for in my love and caring for others. There is a part of me that finds it extremely difficult to unconditionally love someone close to me whose primary relationship is with drugs or alcohol. I want to love them, but sometimes that kind of love feels very abstract.

In talking with friends and family who have both addicts in their lives and similar inclinations towards unconditional care and love, I find that they also experience a radical aporia between their intention to love fully and their ability to so. Of course, a good deal of this has to do with the relational wreckage addiction seems to inevitably incur. When people steal from you, lie to you, psychologically and sometimes physically abuse you in the service of obtaining drugs, it is hard to remain open and loving.



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I have known people who have been able to do that, but it is often at a tremendous cost financially, emotionally, and psychologically. That is why I have such admiration for the street outreach team in the article. Their compassion and caring for the addicts they encounter would appear to be unconditional. Of course, this also tends to be true of CYC workers who do street outreach. The conditions of life on the street seem to flatten any judgmental inclinations we might have towards those we encounter. Suffering and the immediacy of death or harm are so close as to be palpable in any given encounter. It is an ongoing and quite powerful lesson in simultaneously connecting deeply in someone's life and always being on the edge of a kind of necessary letting go. The connecting can be quite powerful and the letting go sometimes even more so. The relentless pattern of saving and losing life on the street requires a level of compassion and care that is a life art.

The treatment system for addiction we have failed to build here in the U.S. has brutal and profound consequences for those working in it and those addicts entangled in it. For many of us, the failed project of addiction care is a major disincentive for working with addicts, whether in treatment programs or on the street. To be driven to do this work, often requires a certain history of survivorship of both addiction and the system that surrounds it. As the article put it in relation to one of the members of the harm reduction outreach team,

Mr. Jones knew firsthand how mean the streets of East Harlem could be. He grew up in the neighborhood, at the tail end of the crack epidemic, and had spent rough years there, selling and using hard drugs. He had also spent the past two decades trying to rescue others from similar hardship.



The key, he said, was building trust. Almost all the people he and his colleagues encountered were, at one point or another, treated terribly by the very institutions charged with helping them. They were leery as a result, and progress took patience.

Trust is an old theme for those of us working with young people. What Mr. Jones says about the people he encounters is often said about the young people we serve as well. The system is seldom kind to young people and building trust with them also requires patience. It goes without saying that the young people we serve also often have addiction issues and that we find those young people particularly challenging, and they often fail in our programs, To be kicked out of care for usage is a fairly common occurrence. The very idea that we might use harm reduction strategies in our programs, with supervised injection sites, moderated usage, or staff training in reversing an overdose would send many if not most of agency administrators and boards into severe panic mode.

After all, young people who are considered difficult are a hard sell to start with and if you add addiction, you are really asking for the public to see your program in a negative light. The demand from the adult public is that programs exist to discipline and control young people so that they are acceptable members of the dominant society. The idea that a program would not demand socially acceptable behavior is an anathema to most funders and program administrators. Hence, the rules against vulgar language, gang attire, no public displays of affection or sexual behavior, and .no angry outbursts among others. And this is for sober young people. The young people we see as the future. Addicted kids are seen through an even less generous lens. As the article points out,



“There’s still deep hatred in this country for people who use drugs,” said Keith Humphreys, an addiction expert at Stanford University and a former senior adviser to President Barack Obama on drug policy. “But there’s also legitimate frustration and anger at the havoc that people with substance use disorders can wreak. And policymakers have to be very careful about pushing too far beyond what a majority of people are ready to accept.”

And not just policy makers, but program administrators and boards. Of course, this reticence to engage with harm reduction strategies is occurring at a moment when the war on drugs has demonstrably failed and we are in the midst of a third iteration of a opioid crisis that spans generations and rooted in failed regulation of the pharmaceutical industry. Our incarceration of addicts costs us five times what it would cost for treatment and rates of recidivism are ridiculously high. We have seen no reduction in drug use; in fact it is ever increasing and drug overdoses “[killing more than 100,000 people a year](#) — more than at any other point in modern history.”

And yet we persist in the continuance of failed policies and practices that refuse the distribution of clean needles, reversal medications such naloxone, access to housing and mental health care for those actively using. Across all the helping professions, we have been trained to meet people where they are at, but apparently not when it comes addicts. We are also trained to practice an ethics dedicated to not harming those we serve and yet we fail to advance practices that could save lives. Finally, we are trained to set aside our biases and judgments in the work we do, but do we do that when we encounter someone actively using? Or do we fall



back on the idea that all people should seek sobriety and those who do not are somehow flawed human beings. But is it the individual addict who should be held accountable for the social breakdown that is escalating drug use and the overdose crisis? In the work being done on the street the view can be a bit different,

Here, people struggled with homelessness, substance use disorders and mental health issues at the same time, and it was not always clear which had caused which. “The assumption outside is that they’ve ended up here due to their addictions,” Hilton Webb, a social worker, said. “But it’s often the opposite. People end up on the street because they lose their jobs or their rent goes up. Their mental health deteriorates, and they start taking drugs to cope.”

So, what has failed and what do we need to do about it. At one point in the article the street outreach worker Mr. Jones is reported as thinking,

Lately he had been seized by the feeling that for all their efforts — in the prevention room and on the street and in Albany — they had managed only to place a Band-Aid over a bullet wound. Clean needles, naloxone and a safe place to use were no-brainers. Of course, people should have those things. But what the people he saw every day really needed was housing, mental health care and help with job placement. They needed a pathway to stability and a touch of human decency. What they needed, he often



thought, was community. It was community that had saved him. Nature had made Mr. Jones an introvert, and traumas stretching back to childhood had made him a loner. He was not quick to trust or to let people in. But when he showed up at a Hunts Point warehouse one night some 20 years back to volunteer with the New York Harm Reduction Educators, the people he met welcomed him and treated him with respect — and in so doing, created a space for trust to grow. He opened up slowly from there, like a clenched fist finally able to unfold into an open palm.

Perhaps it is here we need to focus, Of course, good harm reduction practices can mitigate the suffering and death associated with how we manage addiction. But, maybe the explanation as to how we got into this ever-escalating cycle lies elsewhere. If we treated more people like they belonged and welcomed them with respect, it might be possible that the drive towards personal oblivion might be muted. If we hated those who we deem unworthy a little less and cared for each other with fewer conditions, then we might have fewer of us falling. A bit of human decency and less judgement or in another term a sense of community. This is foundational in CYC work as a theoretical framing. I wonder what would happen if we took it more seriously in practice, especially with those struggling with addiction.

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Children’s Rights To Education And Non- Discrimination In Schools: Young People With Disabilities In The School System & the role of Child and Youth Care

Samantha (Sam) Walsh and Tara M. Collins

Trigger warning: Examples of abuse are described below.

In grade 10 a teacher verbally abused me (Sam) for nearly an entire semester of school (that runs September to January). She’d hunt me down in other classes as well to say hurtful things to me, including pulling me out of my music classes. It was only in January when she finally stopped after reporting and fighting since the end of September. The reason for her harassment was just because I wanted to be able to leave the room if I was having a panic attack and go to a previously designated safe spot that had trained teachers who were able to support me. This was an accommodation that I had with no problems in all my other classes at the



March 2023
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time. I had other teachers on my side too who knew that she wasn't treating me right and they gave me extra support that semester. My days after school became full of panic attacks when I'd have to relive what happened every day so the abuse could be documented and then sent off to everyone possible. My resource teacher, who was designated in my school to work with students with extra learning needs and disabilities, tried engaging with her several times and nothing changed. There were many talks involving my parents and I with the school principal, vice-principal, and my resource teacher and then many attempts to try to file a formal complaint with the school district. The district refused to let my parents file a formal complaint as we "didn't have proof" because this teacher did not allow phones in her room and there was no other way possible for me to obtain proof of her verbal abuse. Then we had to get the provincial child and youth advocate's office as well our local federal Member of Parliament involved in order to finally get her to stop. I missed over 25 days of classes that semester because of the distress she caused me. The issue caused me such a significant amount of distress that I was still having panic attacks about it during my first year of university.

Tara's eldest child struggled in grade two (aged 7) because their needs weren't being met due to undiagnosed learning disabilities that were emerging. But the teacher was quick to blame and the school to penalize, rather than understand and support the child during this challenging time. How many times has this happened with this teacher in relation to other children before and afterwards this experience? How many times does this happen in our schools wherever they may be?



These examples highlight the influential role and power of professionals in the education system. While the majority of children may be supported within a school or school district or jurisdiction, it is very likely that a minority could be lost or suffering. Most teachers generally do their best with limited resources however there can be gaps. The two of us have come together to co-produce this short piece to emphasize the critical role of children’s rights, Child and Youth Care (CYC), and CYC professionals to be aware of these issues and respond appropriately and advance accountability when actions cause harm to children and youth. Relying on the lens of children’s rights and personal experiences,¹ we explore the children’s rights to education and non-discrimination in schools as well as the associated question of accommodations and accessibility in the school system and the ways that they are implemented. Children’s rights are critical for understanding the requirements and accommodations of disabled students and young people.

Children’s rights and education: Which rights are relevant?

Children and youth have human rights to education, which are outlined in a range of domestic, regional, and global human rights instruments and documents. For example, the United Nations (UN) Convention on the Rights of the Child ([CRC], 1989) outlines the right to education in article 28. But it is not enough for schools to formally provide this right. What

¹ They met back in 2018 when Tara was doing child and youth participatory research in New Brunswick, Canada and have crossed paths many times since including a forthcoming co-authored book chapter with colleagues young and older (Almeida et al., in press).



happens (or doesn't happen) during the schooling process? As a result, CRC article 29 is important because it enunciates the aims of education to ensure that the process and results are meaningful for young people. As States parties to the CRC, all countries in the world (except the United States of America) are required to “promote, support and protect the core value of the Convention: the human dignity innate in every child and his or her equal and inalienable rights” (UN Committee on the Rights of the Child, 2001, p. 2).

In addition to education rights, respect of children with disabilities is included in numerous human rights instruments including the *African Charter On The Rights And Welfare Of The Child* where article 13(1) provides the requirement of “special measures of protection in keeping with his/[their] physical and moral needs and under conditions which ensure his/[their] dignity, promote his self-reliance and active participation in the community” (Organization of African Unity [predecessor of the African Union], 1990). CRC article 23 provides specific rights of children with disabilities, which as the UN Committee on the Rights of the Child (2007) explains, includes protection from all forms of abuse no matter what the setting, highlighting the issues of a lack of structures to receive complaints and school bullying. The UN Convention on the Rights of Persons with Disabilities (2006) has a specific provision on education (article 24) affirming an inclusive education system at all levels and lifelong learning.

Given the major obstacle of discrimination that manifests itself in education in various ways across contexts (UNESCO, 1960, article 1), inclusive education must be included within children's rights work. UNESCO's (2005) Guidelines for Inclusion outline that: “inclusion is



concerned with the identification and removal of barriers” and it must look at the diversity of “needs of all learners” (p. 13). Article 24 of the UN *Convention on the Rights of Persons with Disabilities* (CRPD, 2006) specifically recognizes the right to inclusive education. Exclusion not only affects people with disabilities but also others with additional identities as the UN Committee on the Rights of Persons of Disabilities (2016) recognizes. Discrimination particularly affects populations of people with disabilities including girls, Indigenous and Black populations, refugees, Two-Spirit, Lesbian, Gay, Bisexual, Transgender and Queer/Questioning+ (2SLGBTQ+) young people, and others (e.g. Peter, Campbell, & Taylor, 2021; UNESCO, 2020). As a result, inclusion demands attention and action not only to support people with disabilities but also “on account of gender, age, location, poverty, disability, ethnicity, indigeneity, language, religion, migration or displacement status, sexual orientation or gender identity expression, incarceration, beliefs and attitudes” (UNESCO, 2020, p. 11). These various identities affect one another to create different forms of discrimination reflecting interlocking oppressions that impact individuals and groups in different and unique ways.

Our understanding of these rights should not be restricted to those people who are of traditional school-going ages since the human rights of children and youth are relevant to all those under the age of 18 (except where majority is attained earlier) as per CRC article 1. The UN Committee on the Rights of the Child (2006) highlights that:

Early childhood is the period during which disabilities are usually identified and the impact on children’s well-being and



development recognized. Young children should never be institutionalized solely on the grounds of disability. It is a priority to ensure that they have equal opportunities to participate fully in education and community life, including by the removal of barriers that impede the realization of their rights. Young disabled children are entitled to appropriate specialist assistance, including support for their parents (or other caregivers). Disabled children should at all times be treated with dignity and in ways that encourage their self-reliance. (p. 17).

The Sustainable Development Goal #4 for education for all is also relevant (UNESCO, n.d.).

Greater implementation of children's rights including education is needed around the world because: "Identity, background and ability dictate education opportunities. In all but high-income countries in Europe and Northern America, only 18 of the poorest youth complete secondary school for every 100 of the richest youth. In at least 20 countries, mostly in sub-Saharan Africa, hardly any poor rural young women complete secondary school" (UNESCO, 2020, p. 10). Challenges exist in and across high-income countries as well (UNICEF Office of Research, 2018).

No matter where children and youth are in the world, there are issues with respecting them in the classroom or school. For example, research in five countries in Asia (Cambodia, Indonesia, Nepal, Pakistan and Vietnam) to assess the school-related gender-based violence in and around school involving more than 9,000 girls and boys found a high prevalence of violence in schools and at home so that students feel unsafe and are more



likely to perpetrate violence (Plan International and the International Centre for Research on Women, 2015). Violence, more commonly known as bullying, affecting other students was commonplace. UNESCO highlights the realities of this violence where: “One-third of 11- to 15-year-olds have been bullied” and even described how marginalized groups or “those perceived as differing from social norms or ideals are the most likely to be victimized, including sexual, ethnic and religious minorities, the poor and those with special needs” are more likely to experience it globally (2020, pp. 20-21). Queer students in New Zealand experience bullying three times more than their heterosexual/cisgender peers, and students with disabilities in Uganda experienced violence at a rate of 84% compared to 53% for their able-bodied peers (UNESCO, 2020, pp. 20-21). Sam was also affected in school as a queer, plus-sized, individual who is not shy about being a student with a disability.





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Keynote Speaker: Dr Sami Timimi

Reframing The Trauma Lens

Call for Papers

Closing Date: 30 April 2023

Professionals and carers have long understood that a particularly difficult experience or cumulative disadvantage in a child's life can leave a legacy that impacts their present-day functioning. It is also true that not all children who have experienced adversity seem to be overly affected by it. So, we should not necessarily assume a debilitating reaction to past experience. In the space of little more than a decade, this connection between past and present has come to be understood through a lens of trauma, yet the question of just what trauma is remains largely unexamined.

The adoption of a trauma lens requires further examination, particularly asking what might differentiate "trauma informed care" from any other form of care, when the principles of TIC are essentially principles of good care that are not specific to trauma.

Reframing the Trauma Lens will be a forum for conversation and discussion on the topic of Trauma Informed Care where we will deliberate on the various perspectives associated with this concept. We will seek to broaden the frame through which we understand trauma, and 'being trauma informed' while attempting to answer questions such as:

What is trauma ... really?

Is this the only or most helpful way of understanding the past?

What does the evidence tell us on trauma and trauma informed care?

What are the politics of trauma?

What are the implications of trauma approaches for professionals and carers?

Submit your Session/Workshop here



rights to good quality education, maximum development, and non-discrimination including children and youth with disabilities who should be supported through appropriate and equitable means. This means that CYCs should advocate with young people to get the supports that they need and support young people who are dealing with abuse from adults with power in the institutions that is not often shared with the young people.

The best way for inclusive education to be addressed can be through practicing strengths-based, rights-based, and needs-based approaches if you aren't doing so already. Attention to the needs of children should be included, which can complement morals and other concerns not included in a formal rights-based approach. CYCs can respond to these challenges through asking questions of children, getting to know them and their past, as well as learning about what they're interested in. For example, do you know if the young person or young people whom you are working with have enough food, school supplies, and/or clothing? Do they feel safe in the learning environment and comfortable with whom they are learning? If they do not have what they need, what can be done to address the situation? How can you help the young person or young people to navigate and improve their situation? These are issues that cannot wait.

Feedback is another key piece to consider as it's impossible to improve on the way that children and youth are included in discussions without asking questions like: What is working? What isn't working? CYCs need to be prepared to hear the answers to these questions no matter what the context to more aptly support young people with disabilities and create and support a space centred around young people. Through empathetic,



caring, and trusting relationships that can result, we can ensure that a young person is not overgeneralized or left out in any way.

Through these and other considerations, we must take into account that children may be experiencing or have experienced trauma. As described by Brunzell et al. (2016), trauma is “an overwhelming experience that undermines the individual’s belief that the world is good and safe” (p. 219). Trauma-informed approaches are critical since the trauma from violence has an impact that can be life long (e.g. Osofsky & Groves, 2018). While some teachers and parents are not supportive of trauma-informed schools, recent British research outlines that trauma-informed approaches involve attention to both school climate and culture as key to supporting young people’s emotional wellbeing and mental health (Billington et al., 2022). This necessitates attention to how and why a young person may be reacting to certain situations or triggers. Trauma can cause young people to have a compromised capacity for “making and creating healthy relational bonds” which can lead to ongoing issues (Brunzell et al., 2016, p. 219-220). In practice, this involves being mindful of the young person’s background or context and that you (or others in the young person’s life) may not know all the details.

We must consider how conflict is dealt with in the school context. “[T]hrough prioritizing relationships when solving conflict, [... as Zehr (2015) illuminates] we are also able to ensure a more positive outcome for everyone involved” (Walsh, 2023a, p. 1). For conflict resolution as the UN (2020) outlines, restorative justice offers victims the opportunity to “heal and process the trauma that occurred; using restorative justice’s focus on victims’ needs and helping them to process the wrongdoing” (Walsh,



2023b, p.1). Restorative practices and approaches are meant to “explore facts, feelings, and resolutions” in conflict (Zehr, 2015, p. 57). According to UNESCO, classroom management like restorative approaches are one way in which bullying and discrimination can be managed, but school policies should identify staff responsibility/action for how to address bullying (2020, pp. 20-21). Special attention is needed for students with disabilities as they can fall through the cracks, as Sam experienced since they had to fight for accommodations throughout their schooling. The relational approach in restorative justice also considers that people may need to be included beyond just the wrongdoer and victim as the conflict or crime may have impacted community members as well, and restorative justice is rooted in community care (Zehr, 2015, p. 37).

According to UNESCO, classroom management like restorative approaches are one way in which bullying and discrimination can be managed, but school policies should identify staff responsibility/action for how to address bullying (2020, pp. 20-21). Both Zehr (2015) and the UN (2020) guidelines instruct that: “Accountability is rooted in the way the restorative justice is enacted because the wrongdoer has to admit to the wrongdoing as a starting point, for ‘forgiveness or even reconciliation’ to potentially occur” (Walsh, 2023b, p. 1). Accountability of adults, whether teachers, CYCs, administrators or others, for their actions or inadequate actions to support children and youth is essential for supporting a relational environment committed to the safety and comfort of everyone involved. This means that young people trust their teachers and adults around them to hold other adults and young people accountable when needed and that the system is responsive to issues that develop. Special



attention is needed for students with disabilities as they can fall through the cracks, as Sam experienced since they had to fight for accommodations throughout their schooling. Accountability is what ensures an education that is rights-respecting, both non-discriminatory and supportive, rather than dismissive or inadequate. Both CYCs and educators of young people should consider the concept of two-eared listening, so that when we are listening to a child or young person “every part of us between those ears — bodies, hearts and souls — is engaged” (Evans & Vaandering, 2022, p. 17). This is important so that we are able “to understand justice” through hearing “the stories of injustice”; then young people can feel included and safe through trusting relationships in order to move forward (Evans & Vaandering, 2022, p. 17).

In conclusion, both the field and practitioners of CYC have significant roles to support young people in education, including those with disabilities to access the accommodations and support that they need to realize their rights to education and fulfill their potential. Inclusive education is the way to combat “discriminatory attitudes, [create] welcoming communities, [and build] an inclusive society [for] education for all” (DeBeco et al., 2019, p. 108). The human rights approach for people with disabilities in education “demands that exclusionary practices at all levels within the education system are challenged to become socially just and equitable” and involves CYCs, educators, and others who interact with young disabled people (DeBeco et al., 2019, p. 121). The considerations outlined above “[w]ould reduce the marginalisation and stigmatisation experienced by disabled pupils and their families [...] and [...] would contribute to the development of more tolerant societies capable of



responding appropriately to diversity” (DeBeco et al., 2019, p. 102). When moving forward in your role with young people, remember that “Education for All means ‘ALL, not all, BUT” and that disabled students cannot and should not be left behind or able to fall through the cracks (DeBeco et al., 2019, p. 118). As a 17 year-old expressed, in education: “We should be proud of our diversity” (Shaking the Movers, 2019, p. 15).

References and further resources

- Almeida, L., Collins, T., Heynes, D-J., Jamieson, L., Rizzini, I., Walsh, S. (In press). Affecting Change in Different Contexts: Children’s Participation in Social and Public Policy Dialogues in Brazil, Canada, and South Africa, In B. Percy-Smith, N. P. Thomas, C. O’Kane and A. Twum-Danso Imoh (Eds.). *A New Handbook of Children and Young People’s Participation*, Routledge. Publication scheduled for April 28, 2023.
- Billington, T., Gibson, S., Fogg, P., Lahmar, J., & Cameron, H. (2022). Conditions for mental health in education: Towards relational practice. *British Educational Research Journal*, 48(1), February, 95–119, DOI: 10.1002/berj.3755
- Brunzell, T, Stokes, H & Waters, L. (2016). Trauma-informed flexible learning: classrooms that strengthen regulatory abilities. *International Journal of Child, Youth and Family Studies*. 7(2), 218-239. DOI: 10.18357/ijcyfs72201615719
- De Beco, G, Quinlivan, S & Lord, J. E. (2019). *The Right to Inclusive Education in International Human Rights Law*. G. De Beco, S. Quinlivan, & J. E. Lord. (Eds.). Cambridge University Press.
- Evans, K. & Vaandering, D. (2022). *Little Book Of Restorative Justice In Education: Fostering Responsibility, Healing, And Hope In Schools*. Skyhorse Publishing, Inc.
- United Nations Office on Drugs and Crime (2020). “Handbook on Restorative Justice Programmes”. United Nations. https://www.unodc.org/documents/justice-and-prison-reform/20-01146_Handbook_on_Restorative_Justice_Programmes.pdf
- Organization of African Unity (1990). *African Charter On The Rights And Welfare Of The Child*. adopted 11 July 1990, entered into force 29 Oct. 1999, OAU Doc. CAB/LEG/TSG/Rev.1
- Osofsky, J. & Groves, B. M. (Eds.) (2018). *Violence and trauma in the lives of children*. Praeger.



- Peter, T., Campbell, C.P., & Taylor, C. (2021). *Still in every class in every school: Final report on the second climate survey on homophobia, biphobia, and transphobia in Canadian schools*. Egale Canada Human Rights Trust. https://indd.adobe.com/view/publication/3836f91b-2db1-405b-80cc-b683cc863907/2o98/publication-web-resources/pdf/Climate_Survey_-_Still_Every_Class_In_Every_School.pdf
- Plan Asia Regional Office and International Center for Research on Women (2015). Summary Report: Are Schools Safe And Equal Places For Girls And Boys In Asia? Research Findings on School-Related Gender-Based Violence. https://plan-international.org/uploads/2022/01/2015_are_schools_safe_and_equal_places_for_girls_and_boys_in_asia_en.pdf
- Shaking the Movers (2020). *East Coast Shaking the Movers: Education, Diversity and the Rights of Children*. Office of the Child and Youth Advocate, Province of New Brunswick, <https://carleton.ca/landonpearsoncentre/wp-content/uploads/East-Coast-STM-Report-1.pdf>
- United Nations (1989). *Convention on the Rights of the Child*, 20 November 1989, A/RES/44/25, entered into force 2 September 1990.
- United Nations (UN) (2006). *Convention on the Rights of Persons with Disabilities*, UN Doc. A/RES/61/106, 13 December 2006. <https://www.un.org/development/desa/disabilities/convention-on-the-rights-of-persons-with-disabilities/convention-on-the-rights-of-persons-with-disabilities-2.html>
- UN Committee on the Rights of the Child (2001). General Comment No. 1 (2001) Article 29 (1): The Aims Of Education. UN Doc. CRC/GC/2001/1, 17 April.
- UN Committee on the Rights of the Child (2006). General Comment No. 7 (2005) *Implementing child rights in early childhood*. UN Doc. CRC/C/GC/7/Rev.1, 20 September.
- UN Committee on the Rights of the Child (2007). General Comment No. 9 (2006) *The rights of children with disabilities*. UN Doc. CRC/C/GC/9, 27 February.
- UN Committee on the Rights of Persons with Disabilities (2016). General comment No. 4 on *Article 24 - the right to inclusive education*, 25 November, UN Doc. CRPD/C/GC/4
- UNESCO (2020). *Global Education Monitoring Report Summary 2020: Inclusion and education: All means all*. UNESCO. Retrieved from <https://unesdoc.unesco.org/ark:/48223/pf0000373721>
- UNESCO (1960). *Convention against Discrimination in Education*, Paris, 14 December 1960. http://portal.unesco.org/en/ev.php-URL_ID=12949&URL_DO=DO_TOPIC&URL_SECTION=201.html



UNESCO (2005). *Guidelines for Inclusion: Ensuring Access to Education for All*.
<https://unesdoc.unesco.org/ark:/48223/pf0000140224>

UNESCO (n.d.). *Leading SDG 4 - Education 2030*. Retrieved from
<https://www.unesco.org/en/education/education2030-sdg4>

UNICEF Office of Research (2018). 'An Unfair Start: Inequality in Children's Education in Rich Countries', *Innocenti Report Card 15*, UNICEF Office of Research – Innocenti,
https://www.unicef-irc.org/publications/pdf/an-unfair-start-inequality-children-education_37049-RC15-EN-WEB.pdf

Walsh, S. (2023a). Assignment 2: Relational Approach. Submitted to SOCI 3791: Introduction to Restorative Justice in Sociology, winter semester. Mount Allison University. Unpublished. On file with first author.

Walsh, S. (2023b). Assignment 1: Understandings of Restorative Justice. Submitted to SOCI 3791L Introduction to Restorative Justice in Sociology, winter semester. Mount Allison University. Unpublished. On file with first author.

Zehr, H. (2015). *The little book of restorative justice*. Skyhorse Publishing, Inc.

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Postcard from Leon Fulcher

From New Zealand, reflecting on 2022/23 Climate Changes

Kia Ora
Koutou
Katoa
comrades. We
offer damp
greetings from
New Zealand
where Cyclone
Gabrielle has just
dumped torrential
rain and heavy
winds all along the



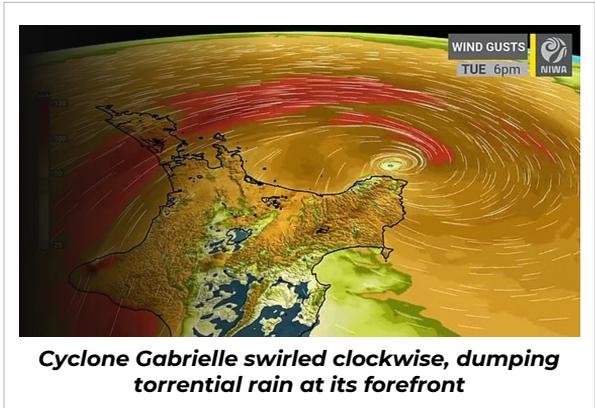
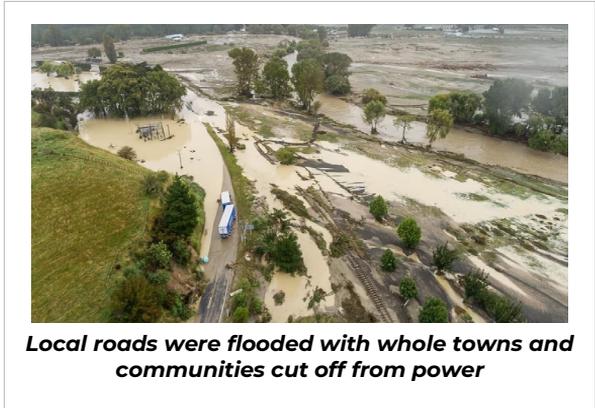
coastal areas of the country's North Island. Following on from Cyclone Hale that I wrote about last month, Cyclone Gabrielle was very different, moving slowly and dumping more than a half metre of rain all along our coasts. New Zealand has taken a major economic hit from this natural event.

Remember? Atlantic Ocean Hurricanes hammer Caribbean Islands and Southeast USA. Tropical Cyclones happen in the Pacific Ocean. Similar storm events measured in Category, with Cyclone Gabrielle hitting New Zealand as a Category 2 storm moving very slowly with heavy rain.



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As the cyclone hit our district, almost immediately, the village lost power and internet connectivity, followed shortly thereafter with no water. It was possible to get hourly national and regional news updates by listening on the car radio. With a camp stove, battery-powered lantern, and BBQ available, food items could be defrosted and prepared as required. Tribal representatives from the local Māori Iwi circulated essential groceries to local families, including us!



Economists say that the economic impact of Cyclone Gabrielle could run into tens of billions of dollars. The country is now reeling from the impact of the storm, which hit Northland and then moved down the North



Island over the course of the following week, causing significant damage to eastern regions including the East Cape, Gisborne and Hawkes Bay.

It is difficult to quantify the flow-on effect. There is the damage and the cost of fixing what has been destroyed. But the economic impact will include the loss of productivity for the country, the shops that aren't open, the apple orchards, garden vegetables and wine vineyards that no longer sell their products, young people faced with volunteer helping and new work options.

Our local town, situated about an hour's drive on New Zealand's last State Highway 38 with more than 150 km of unsealed road was almost immediately inaccessible because of



Bridges were taken out isolating small communities and towns



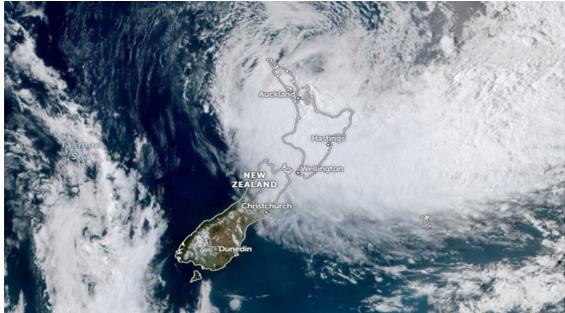
Our local town of Wairoa was completely cut off from power, gasoline and groceries



flooding and bridges being washed out. The same held for north-south travel on State Highway 2.

In our local village, neighbours went door to door in pairs, checking on the wellbeing of residents and finding out whether there were any special needs such as medicines and groceries. With reported looting in some parts of the region, road access was monitored by a roster of local family members, assisted by their young people with the road patrols.

Our Hawkes Bay friends had their new home flooded in a Papakainga Maori housing complex of 8-10 other new homes. Over the past half century, the *Tutaekuri* River (Dogshit Waters) was redirected to create a



Within hours, Cyclone Gabrielle covered the whole North Island!



The bridge we cross to visit a Hawkes Bay friend washed away, isolating families



golf course and make it easier to bridge the river. Flood waters have returned to the old river banks, taking out a bridge used to visit our friend, second turning on left!

I hear Henry

Maier saying, 'So what does this story have to do with child and youth care practice?' These are the lessons we share so far: (1) *Be prepared.* What do you and the young people with whom you work have ready in case of an emergency that impacts everyone? (2) *How will you communicate with family and friends without internet or SMS access?* (3) In planning activities, pay attention to weather reports when planning activities and how the weather will influence your activities? Have we conversations about emergency readiness while addressing any worries this prompts?



8 – 11 deaths registered by the end of Week 1 in the aftermath of Cyclone Gabrielle



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