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Raija Pirttimaa & Christine Välivaara

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DISCUSSION PAPER

Educational intervention planning for children in foster care in Finland: A case study

Raija Pirttimaa and Christine Välivaara

aDepartment of Education, University of Jyvaskyla, Finland; bNational Child Welfare Association Pesäpuu (registered), Ilmarisenkatu, Jyväskylän, Finland

ABSTRACT

Children in foster care may face difficulties during their school years. When it comes to academic achievement, there is reported low school performance and lower grades. However, school may be strong protective factor in difficulties if supports are individual. School-based interventions represent a possibility for supporting children whose home life may make them vulnerable. This discussion paper presents Finnish initiative, which is based on Skolfam® model used in several Nordic countries.

KEYWORDS

Foster care; individual education planning; intervention; Finland; special education

Introduction

Children in foster care are vulnerable in many ways – not just emotionally, but also when it comes to school achievements. Teachers estimate (Zetlin, 2012) that most children in foster care encounter difficulties during their school years more often than other children. However, it is important to note that not all children living apart from their birth parents have difficulties (Bernedo et al., 2012, Iversen et al., 2010). There are obvious risks of educational under-achievement if a child has spent time in foster care, but it is clear that placement in a stable home may do much to help and support a child. It is estimated (Zima et al., 2000) that 69% of children in foster care have behavioural problems and experience delays in academic achievement, or are not successful at school.

When it comes to academic achievement and grades, Berlin, Vinnerljung, and Hjern (2011) reported low school performance and lower grades among children in foster care, and it is of particular concern that grades in so-called academic subjects are poor. This also has been observed in several other surveys (Evans, 2001, McCrae et al., 2010; Rosenfeld & Richman, 2003; Iversen et al., 2010, Trout et. al. 2007). Vinnerljung and Hjern (2011) found that foster children’s cognitive competence at the age of 18 was lower than that of adopted or other children.

Learning difficulties are common among foster children (Iversen et al., 2010), along with problems with reading and math (Trout et al., 2007). Mitic and Rimer (2002) calculated that about 40% of all children in continuing foster care in British Columbia showed weaker reading and writing skills than their peers, and half of them encountered...
frequent problems with numerical literacy. Zima et al. (2000) said 23% of the children in foster care (n=302) had serious problems with reading and math. However, children in foster care have access to special education (Geenen & Powers, 2006; Iversen et al., 2010). The results of a large-scale meta-analysis (Scherr, 2007) indicated that 27% to 35% of children placed outside of their biological parents’ homes get or need special education.

Research shows that foster care is also linked to poor school adjustment (Fantuzzo, 2007), which limits school achievement and increases dropout risks. Kestilä et al. (2012) verified in their study that young foster adults are five times more likely to have only basic education compared with other young adults. It is clear that a poor educational background may cause problems in attaining further education or finding employment.

Evans (2004) said the academic development of students at risk could be improved through their school experience. Font et al. (2013) argue that foster children are more emotionally attached to school than their mistreated peers. Thus, there is evidence that foster children’s attitudes to school are more positive following placement in homes than they were before it (Hedin, 2010; Harker et al., 2003). Although children may have difficulties with learning, school provides routines and predictability, which help them cope. Support from both foster parents and a school is a motivating factor for children as well (Harker, 2003). Johansson and Höjer (2012) noticed that if a person with a care background has a stable educational identity, in addition to cultural and social capital, he or she can benefit from effective protection against low-income and other factors, which, in turn, will help with engagement in studies. Forsman and Vinnerljung (2012) said interventions usually improve foster children’s poor academic achievements. School and education can be powerful protective factors in supporting children in spite of the situation at home.

School-based intervention to support success in school

Skolfam® based intervention SISUKAS in Finland

School-based interventions represent a promising possibility for supporting children whose home life may make them very vulnerable. Swedish Skolfam® programme is an intervention-based effort to support children (Skolprojekt inom familjehemsvårde, 2014). The programme is also put into practice and evaluated also in Norway (Havik 2013) and Denmark (Skolen rolle i. . ., n.d.). The aim of Skolfam® is to support the achievements of school-age children who are in foster care. Skolfam® intervention takes at least two years, and is based on large and multi-faceted psychological and educational assessments, follow-up, and support that cater to the individual needs of each child (Skolfam® 2016). Special-needs education teachers, class teachers, psychologists, and social-service workers organise the assessments/testing. Following the assessments, children’s strengths and weaknesses are analysed by the Skolfam® team so that the best possible intervention can be established. The team consists of parents, pedagogical and psychology staff, staff from social services, and foster care personnel. After the intervention, a new assessment period takes place, and a follow-up is planned (Om Skolfam®, 2014). Poor educational performance by foster children is expected to be improved through systematic work by foster care specialists and schools. The reported positive outcomes in other Nordic countries also have attracted interest in Finland, and the first intervention programme based on the Skolfam® model has been launched.
The initial assessments in the Finnish project have been completed (Räty et al., 2014), and preliminary findings showed some progress (Oraluoma & Välivaara, 2016). Influenced by the Skolfam® model, the Finnish ‘Foster Child at School Intervention’ programme (SISUKAS) aimed to improve school achievement and the well-being of children in foster care. During the project (2012-2016), a two-year intervention period was organised. The child’s social worker, psychologist, and special-education teacher formed a cooperative –project team that tested 20 foster children. In the cooperative, there were 16 schools and six kindergartens with 15 girls and five boys (ages 6-10) included in the project.

The procedure
The SISUKAS intervention started when a child’s social worker contacted the child, family, foster family, and school, then organised the first meeting with the foster family and child. Soon afterward, the entire network (SISUKAS project team, parents, child and school professionals) met at the school. The meeting was followed by the first surveys/tests, given by the special-education teacher and psychologist, as well as the social worker. The findings were shared with all intervention parties, who planned the individual support efforts in close cooperation with parents, the child himself/herself, and the school. The progress of each child was followed intensively. The network had two to three meetings monthly. Follow-up was done after the two-year intervention period, and the findings were shared and discussed within the network meeting (Liukkonen, Oraluoma, Saksola & Välivaara 2015). Figure 1 shows the whole procedure.

Baseline assessments
The intervention started with the assessment of the children’s baseline situation, and the same tests and assessments were done after two years of intervention. Standardised psychological and pedagogical instruments were used for assessing the child’s potential, strengths, and difficulties. Assessed areas included cognitive skills (WISC-IV), psychological well-being (SDQ, Strengths and Difficulties Questionnaire), problem behaviour (CBCL, Child Behaviour Checklist) student-teacher relationship (STRS, Student-Teacher Relationship Scale), reading skills (ALLU), and math skills (MAKEKO). Writing skills and school readiness also were assessed. The ‘Me as a Learner’ questionnaire (Aro et al. 2014) assessed students’ thoughts about strengths and difficulties in learning. Classroom observations were made as well (Räty, Välivaara, Mäntymaa, Saksola & Pirttimaa 2014).

Figure 1. Working procedure in Finnish SISUKAS program (Oraluoma & Välivaara 2016, 19, permission from Pesäpuu).
**Intervention**

During two years’ time, the children were supported by all available methods at school and home, following an individualised education plan (IEP) based on the test results and observations. The role of the project team was to consult the adults who worked with the child and to monitor progress.

What did this individual plan consist of? In all cases, the selection of objectives was justified on the grounds that the tests involved in the SISUKAS programme also were used in the Skolfam* programme. Nevertheless, all participating children had objectives that were also justified by other observations. ‘The teachers had already noticed that there is need for support’, and ‘The foster parents raised concerns’, told the project team members. In addition, the observations made by project team in the classroom supported the information received from the tests. When these plans and objectives were screened, the most prominent division that emerged was between consolidating students’ performance in school subjects on the one hand, and supporting their psycho-social skills on the other. Not all children had both of these aspects noticed in their individual plans. The ways to reach the objectives varied.

What did schools actually do to support students’ emotional and social well-being and success in academic school subjects? Which methods were employed? According to the cognitive learning theory/activity theory of learning (Engeström 1987/2007), teaching methods can be observed by dividing them into external and internal methods. External teaching methods are used to control students’ perceptible behaviour and situation. Internal teaching methods focus on guiding students’ cognitive processing. In the objectives concerning school subjects, external methods were mentioned and written down in the plan, but this does not mean that teachers did not plan how to tutor students on cognitive processes. These methods were fully aligned with the principles, curriculum models, and structures in Finland’s educational system. In Finnish comprehensive schools, when the need arises, the supports include individual special supports/tutoring or small-group remedial special teaching, either on a full-time or part-time basis, provided by a special-needs education teacher. In support of psycho-social well-being, both individual supports and group supports were used. Both external and internal teaching methods were mentioned in individual plans.

Trust was an important aspect when the project team described the methods of support for social well-being. This was important during discussions between students and teachers. Humour was another element that was mentioned as a useful tool in interactions. Individual plans also included activities that were carried out with entire classes. Social-drama exercises, as well as programmes to help children recognise their emotions, were used. While inspecting so-called external methods of supporting psycho-social well-being, implementation most often consisted of personal care by psychiatrists, psychologists, physical therapists, or social workers outside of school hours. In more demanding situations, personal assistance in classrooms was provided. Sometimes, discussions on the use of medications were planned and later held. Special equipment and physical arrangements had to be made in some cases, such as a special chair or an isolated working space to aid in concentration. **Table 1** shows the details of the supports planned in IEPs.
<table>
<thead>
<tr>
<th>Academic skills</th>
<th>Examples of support methods and contents mentioned in IEPs</th>
</tr>
</thead>
<tbody>
<tr>
<td>(practiced at school and at home)</td>
<td></td>
</tr>
<tr>
<td>Reading</td>
<td>Fluency, GrafoGame, vocabulary, reading comprehension, writing, games, stories, poems, rhymes, play</td>
</tr>
<tr>
<td>Mathematics</td>
<td>Multiplication, basic mathematical skills, GrafoGameMath,</td>
</tr>
<tr>
<td>Others</td>
<td>Executive functions, concept of time</td>
</tr>
<tr>
<td>Additional supports org. at home</td>
<td>Doing in homework with parents</td>
</tr>
<tr>
<td>Organizing supports at school</td>
<td></td>
</tr>
<tr>
<td>Changes in certain academic subjects and teaching methods</td>
<td>Adaptations and differentiations in subjects, assessments and materials, rewards, interval supports of special ed. teacher</td>
</tr>
<tr>
<td>Tutoring in groups</td>
<td>Part-time special education in small or/and flexible groups, transfer into full-time special education, co-teaching, pedagogical interventions for the whole group (for example interventions against bullying)</td>
</tr>
<tr>
<td>Individual supports</td>
<td></td>
</tr>
<tr>
<td>Psycho-social wellbeing</td>
<td>Teacher-pupil individual interaction, school-home agreements, lightening the school day, personal assistant, organizing own peaceful space</td>
</tr>
<tr>
<td>Therapies and other psychological supports</td>
<td>Individual therapy sessions, family supports (via child psychiatry, social work etc) discussions with the school psychology, physiotherapy</td>
</tr>
<tr>
<td>Further assessment</td>
<td>Referrals to child neurology, child psychiatry</td>
</tr>
<tr>
<td>Medication</td>
<td>Plans</td>
</tr>
<tr>
<td>Extra curricular activities</td>
<td>Planning and supporting for new hobbies</td>
</tr>
</tbody>
</table>
Findings
After two years of intervention, re-testing was done. These test results were compared with pre-intervention for assessing outcomes. Results showed improvement in some of the academic skills at the group level and individual improvement in psychosocial well-being (detailed statistics in Oraluoma & Välivaara 2016). The follow-up research (Oraluoma & Välivaara, 2016, 50–53) add up the detailed findings and said most of the children who raised concerns in the beginning reached two or more goals during the intervention. Most often, successes were revealed in the Strengths and Difficulties survey, in math, and in writing skills. Findings connected to the psycho-social well-being on the group level showed that some of the children achieved the goals well by the end of the intervention period. Those with more severe difficulties continue to receive more intensive support at school and outside of their school (Oraluoma & Välivaara 2016). On the group level, statistics showed no significant differences before or after testing/assessment. It must be argued that although the statistical value might be weak in this relatively small case study, on the individual level, intensive work was experienced to be successful (see also Durbeej & Hellner 2016). This Finnish experience strengthens the earlier findings of Eronen (2013, 49) that the situations and needs of children in foster care are very specific to each child and change over time. Aid is not possible to plan on a general level (Oraluoma & Välivaara 2016).

General comparisons between the Swedish Skolfam® and Finnish SISUKAS programmes were possible, although the assessment tools were partly different, and the statistical tests used were not in the same manner. It was found that children developed their learning abilities and academic skills in both programmes. However, in the Finnish research, no changes in general intelligence were found. The findings concerning psychosocial well-being under Skolfam® and SISUKAS found similar positive changes. Also, SISUKAS results showed that parents and teachers’ worries declined. (Oraluoma & Välivaara 2016).

Conclusions
In Finnish schools, an IEP is a legally regulated document, and intervention practices for foster children did not differ from general school work. IEPs are written documents produced by a multi-professional team. Thus it is quite easy to fit the earlier described intervention program into the school system. In Finnish schools, the supports are organised by three-tiered systems. Immediate and flexible support for everyone is called general support, the first tier. If general support is not sufficient, a new plan is made, and intensified support, the second tier, is utilised. The third tier is special support, which is the most intensive and ongoing support system. The level of intensity of needed supports varied from child to child (Table 2). However, the children in the SISUKAS programme more often received support, compared with other

| Table 2. The supports used in the beginning of the intervention for pupils in foster care (Oraluoma & Välivaara 2016, 28). |
|-----------------|-------------|--------------|-------------|
| General supports | Intensified supports | Special supports |
| Pupils attending the intervention | 50% | 30% | 20% |
schoolchildren in Finland (Statistics Finland, 2015). In the case of three children, the intensity of support changed during the two-year period: Two students moved from the intensified to the special support tier, while one child moved from general to intensified support. The problems among those moving to a more intense tier of support mostly concerned psycho-social well-being (Oraluoma & Välivaara 2016).

What overall issues are important in planning, goal setting, and choosing individual support methods that are aimed at helping children in foster care achieve success in school? After two years under SISUKAS intervention, a discussion with project team members (special education teacher, psychologist, social worker and project manager) was held. They cited three factors that are integral to success: 1) cooperation, 2) teaching and 3) the child’s growth and development.

Those closest cooperation partners to each case are schoolteachers, the family and, obviously, the child. School and project team members were the active partners to initiate the cooperative efforts. Children were involved in the planning discussions, as well as the assessments. Project team organised the cooperative efforts with different partners, including the foster families, school staff, local social workers, and other significant local actors. Meetings occurred in homes, at school, or at the offices of out-of-school professionals (psychiatrists, social workers, etc.). Face-to-face contacts were preferred, but information was exchanged via other ways as well, always in a manner that was deemed constructive and effective. Huge network meetings were avoided. Cooperation within the class meetings (parental meetings) often was not very strong because of the intimate nature of the issues that needed to be planned and implemented. Project team estimated that good preparation for scheduled meetings and collaborative efforts provided solid ground for collaboration. Cooperation and collaboration were estimated to be some of the most important ways to fulfill the goals of each individual programme. If it failed, the planning may have been successful, but the implementation was estimated to be slow or problematic. There is a clear need for mutual trust and understanding, especially open communication back and forth between programme workers and the foster families. Trust encourages collaboration and vice versa. As Daniels (2006) says, ‘(If) well-being and trust are built in collaborative working cultures, then individuals feel more tolerant of the demands of work and more prepared to engage with problematic areas of work’.

There is no doubt that teaching and teachers’ work are meaningful. They are the main agents for directing schoolwork. It was stressed that successful teaching is possible if objectives are suitable for the student. Differentiation of materials and methods is useful. It is also good when teachers have immediate access to a range of services (special education, assistants, etc.) and are supported by school principals.

In addition, it is obvious that educators should trust in the normal development and growth of the child. Children mature at their own individual pace, and as they grow, they will better understand their situation and set their own goals, when the time is right for them. While growing, children face various changes. Puberty is one period when challenges may emerge not only at home, but also at school. ‘Learning needs time’, as project workers say. However, the ethos of the SISUKAS programme does not encourage waiting and discovering. Waiting does not support the growth of the child most effectively in challenging situations.
It is hoped that the intervention phase for foster children will generate no additional workload for teachers and is easily accepted as part of general school work. This is possible because schools have systems involving IEPs for special situations, and these have proven to be useful in practice. This available planning arrangement was fully in use in the programme, and it can be argued that the Skolfam*-based intervention system as SISUKAS is generic enough that it can be carried out in different school systems. Although schools might lack various professionals (such as school psychologists), and contact with the social-service sector is not yet common in Finnish schools, it has been estimated that the SISUKAS intervention model is suitable in the existing support system of Finnish schools, as well as special-education environments.

**Notes on contributors**

*Raija Pirttimaa* PhD is a senior lecture in the University of Jyväskylä and an adjunct professor of special education in the University of Helsinki.

*Christine Välivaara* MA (Psych) is a development manager in the Finnish National Child Welfare Association Pesäpuu (registered).

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