

# Inquiry into the State Education System in Victoria

## Legislative Council Legal and Social Issues Committee

### Parliament of Victoria

13 October 2023

*Berry Street acknowledges Aboriginal peoples as the Traditional Custodians of the lands, skies, and waterways across Victoria. We pay our deepest respects to Elders resting in the dreaming, to the Elders of today, and to the Elders to come, who will continue to care, protect, and nurture Traditional Lands. Berry Street acknowledges Elders as the holders, educators and protectors of cultural knowledge and wisdom. We recognise that Aboriginal culture dates back 60,000 years and that sovereignty was never ceded.*

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## Executive Summary

Berry Street welcomes the Legislative Council's investigation into the Victorian education system across government schools. This submission addresses the following items from the Inquiry's Terms of Reference: (1) trends in student learning outcomes; (2) the state of the teaching profession; and (3) the state of student wellbeing in Victoria. Due to our depth and breadth of experience in working with, caring for, and teaching children and young people who have experienced significant trauma and other adverse experiences, this is the focus of our submission as they pertain to the state education system.

The following key points are central to our submission:

***(1) The growing rate of adversity impacting children requires more from the government and non-government education system.***

Children and young people with adverse childhood experiences are at significantly increased risk of falling behind in their education and the number of students in the state education system affected by the resulting barriers to learning is increasing. The state education system is a universal platform that must be accessible and responsive for students and families with diverse experiences including childhood trauma, neglect, and other adversity. The system however has not been designed with these students' needs at the core. An increase in adversity exposure is a likely contributor to the decline of student learning outcomes (and equality of those outcomes). For children and young people affected by trauma, access to quality education in a safe learning environment is integral to their overall development and wellbeing and this includes access to fee-free non-government schools designed for this cohort.

***(2) Teachers, who are crucial for students with adverse experiences, are at risk of burnout due to role creep.***

Teachers are at high risk of burnout and attrition. Teachers play a vital role in students' lives, which is particularly the case for students with adverse childhood experiences. But the pressure felt by teachers to go beyond the reasonable or sustainable boundaries of their roles is a form of 'role creep' which exacerbates the problem. To reduce the risk of teacher attrition, initial teacher education (ITE) should be expanded to include trauma-informed educational practice and youth mental health first aid; and specialist therapeutic and support services should be integrated into schools wherever possible. Schools should also be urged to take a whole-school approach to behaviour management by adopting field-tested approaches like the Berry Street Education Model (BSEM)

***(3) A more systematic approach to wellbeing will be more effective than isolated interventions.***

In particular, the notion of a whole-school approach to behaviour management can improve the state of student wellbeing in Victoria as well as the state of the teaching profession. From our delivery of BSEM training to hundreds of schools and thousands of educators we can attest that a whole-school approach, which focuses on creating healthy systems rather than 'fixing' individuals, has more effective and sustainable benefits to students, teachers, and schools.

Levels of student wellbeing in the overall state education system will also benefit from: earlier interventions for students, because young people with adverse childhood experiences are often 'behind' before starting school; better information sharing between government departments and agencies (both Commonwealth and Victorian); and leveraging the capabilities of specialist independent schools like the Berry Street School as potential partners to government in challenging areas.

## Recommendations:

1. The state education system should integrate specialist trauma-informed wellbeing services into schools to limit role confusion and remove access barriers for students with the highest need.
2. The government should include trauma-informed practice education (including programs such as BSEM) and Youth Mental Health First Aid training as part of Initial Teacher Education (ITE) for all Victorian schools.
3. The government's Schools Vic Policy and Advisory Library (PAL) should advise all government schools to adopt and explore more advanced and practical trauma-informed and whole-school approaches to behaviour management in school such as the Berry Street Education Model (BSEM), in addition to the current school-wide positive behaviour support (SWPBS) framework.
4. The government should review the effectiveness of information sharing schemes for schools to support vulnerable cohorts of students like those at risk of or involved with Child Protection and Out of Home Care.
5. The government should consider assisting and incentivising experienced non-government specialist schools which are fee-free, not-for-profit, and not faith-based, to open campuses in geographic areas with the highest concentrations of students with complex learning and wellbeing needs.

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## About Berry Street

Berry Street has supported children, young people, and families for over 140 years to address the effects of violence, abuse, and neglect. We are one of Victoria's largest providers of child and family services. In 2022, we worked with over 33,700 families, children, and young people, including over 1,100 through residential and foster care arrangements.

Berry Street has a significant portfolio of education services focused on helping some of Australia's most vulnerable and disadvantaged young people connect, engage and thrive at school. Our services tackle different points on the continuum from early intervention and prevention to intensive, targeted and wrap-around support. In 2022 alone, we:

- trained over 10,200 Australian educators in the **Berry Street Education Model (BSEM)** – a set of strategies to increase engagement with students who struggle in the classroom and improve all students' self-regulation and academic achievement.
- supported over 300 young people to connect or re-establish their education and pathways through the **Navigator program** and the Educational Support for Children in Care (previously known as **Children in Residential Care (CIRC)**) program.
- worked in a close partnership with 9 Victorian government primary schools to deliver an intensive 12-month support program to students at risk of disengagement with school through our **Side by Side** program, which is also a partnership with Victorian Aboriginal Child Care Agency (VACCA).
- worked with 233 **Berry Street School** students who attended our independent specialist secondary school – designed for young people affected by trauma whose needs are not met by the mainstream system.
- delivered the **Education First Youth Foyer** program in the Goulburn region for 40 young people aged 16–24 years at risk of homelessness to overcome barriers to education and attainment by providing them with up to two years of safe, stable accommodation.
- Delivered therapeutic trauma-specialist services to children and young people in schools including our own school through our **Take Two: Trauma-informed CaRE program** (Communication and Regulating Emotions), which is a Tier 2 intervention available to schools in the [School Mental Health Menu](#).

## The Berry Street Education Model (BSEM)

Our BSEM program is particularly relevant to this inquiry. This submission speaks to our experiences as a leading provider in Australia of trauma-informed positive education strategies for engaging children and young people at school and in the classroom. It is grounded in the last 25 years of trauma-informed practice, positive psychology, and the science of learning research. It is also informed by our on-the-ground experience working side by side with teachers, school leaders and education support staff toward building safer, calmer, child-safe, and trauma-informed school cultures. More information is provided on BSEM in *Box 1: Key information on the Berry Street Education Model (BSEM)*.

BSEM's implementation strategies are multifaceted and not limited to the classroom. They are designed to support an educator's professional learning, provide explicit teaching to students, support a teacher's awareness of relational teaching strategies, and provide guidance and support to leaders in implementation support. Evaluations point to the positive academic and wellbeing outcomes for schools implementing BSEM.<sup>1,2</sup>

*Box 1: Key information on the Berry Street Education Model (BSESM)*

### What is BSEM?

Developed by teachers for teachers, the BSEM foundational course provides educators with a toolkit of 100+ practical strategies for immediate use in the classroom and across their school. The strategies are relevant for both mainstream and specialist schools and help increase the engagement of all students, including those with complex, unmet learning needs. We show educators how to help students meet their own learning needs by:

- understanding the benefits of trauma-informed teaching on child development and ability to learn;
- creating a supportive and trauma-informed positive education classroom;
- bolstering student-teacher relationships;
- applying positive relational classroom behaviour management strategies; and
- instilling strengths-based practices across the school.

BSEM is informed by our on-the-ground experience working side by side with teachers, school leaders and education support staff towards building safer, calmer, child-safe, and trauma-informed school cultures. The model was created to bridge a clear knowledge gap regarding complex trauma and trauma-informed care across all types of education settings. The model comprises five domains:

- **Body:** how to help your students to regulate their stress response, de-escalate in school and classroom contexts, and provide strategies for increased focus;
- **Relationship:** positive relational classroom management strategies that promote on-task learning;
- **Stamina:** how to create a culture of academic persistence in your classroom by nurturing student resilience, emotional intelligence and a growth mindset;
- **Engagement:** motivating students with strategies that increase their willingness to learn;
- **Character:** how to harness our values and character strengths approach for effective learning and future pathways.

### The Impact of BSEM

Since 2014, BSEM has worked with over 48,000 Australian educators and staff across more than 2,000 schools, including 355 schools in Victoria who have engaged in our whole-school approach to BSEM since 2017. We work with numerous pre-service teaching programs including Teach for

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<sup>1</sup> Stokes, H., & Turnbull, M. (2016). Evaluation of the Berry Street Education Model: Trauma informed positive education enacted in mainstream schools. Melbourne: Youth Research Centre, Melbourne Graduate School of Education, the University of Melbourne.

<sup>2</sup> Turnbull, M. (2018). The Collingwood College BSEM Pilot: A Report for the City of Yarra. Melbourne: University of Melbourne Graduate School of Education, Youth Research Centre

Australia, various state governments and independent school systems. Implicit in the growth of BSEM's popularity among mainstream schools has been the recognition that:

- mainstream teaching approaches and pedagogies were failing to meet the needs of significant numbers of students;
- student populations were confronting diverse and complex challenges, and;
- teachers were facing significant professional and personal challenges in dealing with the diversity of student need.

Educators who participate in our BSEM training report having previously faced significant professional and personal challenges in dealing with adverse behaviour and disruption. While each school is unique in their motivation for whole-school implementation of BSEM, common characteristics of schools who seek to implement BSEM include:

- high levels of teacher absenteeism;
- high levels of teacher turnover;
- low staff morale and crisis-fatigued leadership;
- high incidence of student incidents;
- low student academic and wellbeing outcomes;
- chaotic and unpredictable learning environments; and
- many staff and students feeling unsafe.

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## Our Response to the Terms of Reference

*Berry Street's submission will focus on children with adverse childhood experiences (ACE) because of our organisation's experience and knowledge in this area.*

### (1) Trends in student learning outcomes from Prep to Year 12

*including but not limited to —*

- (a) the factors, if any, that have contributed to decline;*
- (b) disparities correlated with geography and socio-economic disadvantage;*

Children who have experienced complex trauma are at significantly increased risk of falling behind in their education – in fact, they are typically 'behind' from the moment they commence their schooling. For children in Out of Home Care (OoHC) this risk is intensified by the inherently destabilising effects of removal from the family home which, for some, occurs before they reach school-age. For this substantial cohort of students, evidence supports the need for practices focused on a combination of educational and social wellbeing outcomes.

It is well established that children within child welfare systems face significantly higher rates of developmental delay, with their emotional, cognitive, social, and physical development often disrupted and interfered with due to traumatic experiences.<sup>3, 4, 5, 6</sup> Almost half of all children in OoHC show problems in one or more developmental domains, with further issues emerging as children get older.<sup>7</sup> Children largely participate in learning environments that assume students are going home to a safe, calm, and supportive context that is stable and predictable from one day to the next. Instead, many of these children are neurobiologically primed to survive the next assault or other trauma and are learning to not trust that adults will be able to protect and support them in life let alone in learning. While trauma itself is not a disability, schools are confronted with the challenge of handling the manifestation of trauma on a child or young person's learning, development, and overall well-being.

#### *Box 2: Differences in educational outcomes for young people with adverse childhood experiences*

Outlines in more detail some of the ways that children with histories of trauma, abuse and neglect in Australia are, on average, displaying poor educational outcomes.

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<sup>3</sup> Costello, E. J., & Angold, A. (2016). Developmental Epidemiology. In *Developmental Psychopathology* (pp. 1-35).

<sup>4</sup> Laurens, K., Islam, F., Kariuki, M., Harris, F., Chilvers, M., Butler, M., Schofield, J., Essery, C., Brinkman, S., Carr, V., & Green, M. (2020) 'Reading and numeracy attainment of children reported to child protection services: a population record linkage study controlling for other adversities', *Child Abuse and Neglect*, vol. 101, 104326.

<sup>5</sup> Zimmer, M. & Panko, L. (2006). Developmental Status and Service Use Among Children in the Child Welfare System: A National Survey. *Archives of Pediatrics & Adolescent Medicine*, 160(2), pp 183-188.

<sup>6</sup> Moore, T., Arefadib, N., & Deery, A. (2017). The first thousand days: an evidence paper [Report]. Centre for Community Child Health.

<sup>7</sup> Australian Institute of Family Studies, Chapin Hall Centre for Children University of Chicago, NSW Department of Family and Community Services. (2015). Wave 1 Baseline Statistical Report: Summary Pathways of Care Longitudinal Study: Outcomes of Children and Young People in Out-of-Home Care in NSW - Brief. Sydney: NSW Government.

## Educational disadvantage for young people with adverse childhood experiences

Exposure to adverse childhood experiences has been associated with a broad range of unfavourable academic outcomes.<sup>8</sup> A review conducted by Perfect and colleagues between 1990 and 2015 explored the impact of trauma on students' cognitive, academic, and behavioural outcomes.<sup>9</sup> The findings revealed that trauma-exposed students exhibited significantly lower IQ scores and memory capabilities and compromised attention compared to neural-typical peers. Academic achievement in subjects like English and Maths also suffered, as did social-emotional-behavioural functioning, with various internalised and externalised symptoms observed. It was also noted that students who have experienced trauma have poorer outcomes in relation to discipline, suspensions, and repeating grade levels.

**School absenteeism** is one of the strongest predictors of poor educational outcomes. Children with substantiated maltreatment in South Australia were found to have four times more unexplained and problem absences at school than their peers.<sup>10</sup> Research indicates that students in all forms of OoHC have higher rates of school absenteeism compared to their peers and lower academic achievement and reduced Year 12 completion rates.<sup>11,12</sup>

**Literacy and numeracy** are other clear antecedents to long-term educational and life success. A study of children with histories of child protection involvement in Western Australia showed they were at three-fold increased risk of low reading scores compared to their peers.<sup>13</sup> Significant gaps in outcomes are evident between children in OoHC and the general population in national literacy and numeracy testing (NAPLAN) data, with 23 per cent fewer children in OoHC meeting aggregate national minimum standards. This performance gap increases as children get older.<sup>14</sup> There is an even greater disparity in performance for children in residential care – the largest OoHC cohort – compared to children not living in OoHC.<sup>15</sup> An important caveat to note is that the NAPLAN data only counts young people who are attending school. In our experience, too many young people who have experienced the trauma of abuse and neglect, such as those in OoHC, are not attending school sufficiently to participate in the NAPLAN assessments, making it impossible to draw accurate conclusions about literacy and numeracy levels of these students from these data.

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<sup>8</sup> National Children's Advocacy Center; The Relationship Between Child Maltreatment and Academic Achievement <https://calio.org/wp-content/uploads/2022/01/child-maltreatment-academic-achievement.pdf>

<sup>9</sup> Perfect, M., Turley, M., Carlson, J., Yohanna, J. & Pfenninger Saint Gilles, M. (2016). School related outcomes of traumatic event exposure and traumatic stress symptoms in students: a systematic review of research from 1990 to 2015. *School Mental Health*, 8, 7-43.

<sup>10</sup> Armfield, J. M., Gnanamanickam, E., Nguyen, H. T., Doidge, J. C., Brown, D. S., Preen, D. B., & Segal, L. (2020). *School Absenteeism Associated With Child Protection System Involvement, Maltreatment Type, and Time in Out-of-Home Care*. *Child Maltreatment*, 25(4), 433–445. <https://doi.org/10.1177/1077559520907682>

<sup>11</sup> Australian Institute of Health and Welfare (2015). Educational outcomes for children in care: linking 2013 child protection and NAPLAN data. Cat. no. CWS 54. Canberra: AIHW.

<sup>12</sup> Graham et al., (2020). Inquiry into Suspension, Exclusion and Expulsion Processes in South Australian government schools: Final Report. The Centre for Inclusive Education, QUT: Brisbane, QLD.

<sup>13</sup> Maclean MJ, Taylor CL, O'Donnell M. Pre-existing adversity, level of child protection involvement, and school attendance predict educational outcomes in a longitudinal study. *Child Abuse Negl.* 2016 Jan; 51:120-31. doi: 10.1016/j.chiabu.2015.10.026. Epub 2015 Nov 25. PMID: 26626345. Note: this study included unsubstantiated maltreatment reports, substantiations or out-of-home care placement.

<sup>14</sup> AIHW 2015.

<sup>15</sup> AIHW 2015.

**Early school leaving** is another limiting factor on the performance of the education system. Childhood trauma is identified as a significant risk factor in this, with students who have experienced trauma being 2.5 times more likely to leave school prematurely.<sup>16</sup> Studies across different Australian jurisdictions show that children with substantiated maltreatment and a history of child protection involvement have higher rates of unexplained school absences and lower reading scores.<sup>17,18</sup> Recent research in New South Wales indicated that children reported to child protection services, regardless of whether the threshold for further investigation was met, were more likely to experience poor academic achievement and an increased risk of suspension from primary school.<sup>19</sup> And in Victoria, 2021 Expulsion Data for Victorian Government Schools shows that OoHC students, alongside other existing priority equity cohorts such as students with disabilities and Aboriginal and Torres Strait Islander students, are disproportionately represented in school exclusions through suspensions and expulsions.<sup>20</sup>

**Unfortunately, the number of children in Victoria needing trauma-informed educational services is increasing and, as the full effects of the Covid-19 pandemic unfold in the years to come, this trend may accelerate.** In 2021-22, there were approximately 47,600 children involved with child protection services in Victoria (see *Table 1: Children receiving child protection services over time.*)<sup>21</sup> Over the past six years, the rate of children subject to child protection notifications increased from 29.5 to 33.5 per 1,000.<sup>22</sup> In addition to a likely long tail of Covid-19, raising the age of criminal responsibility in Victoria to 12 years in 2024 and to 14 years in 2027 will likely lead to an increased demand for preventative and diversionary services.

*Table 1: Children receiving child protection services over time.*

Year	Victoria (headcount)	Victoria (per 1,000)	Australia (headcount)	Australia (per 1,000)
2016-17	40,415	29.5	168,344	30.7
2017-18	43,333	31.1	158,604	28.7
2019-20	47,271	33.5	170,151	30.5

<sup>16</sup> Porche, M.V. & Fortuna, L.R. (2011). Childhood Trauma and Psychiatric Disorders as Correlates of School Dropout in a National Sample of Adults. *Child Development*, 82(3), 982-998.

<sup>17</sup> Armfield, J., Gnanamanickam, E., Nguyen, H., Doidge, J., Brown, D., Preen, D. & Segal, L. (2020). School Absenteeism Associated With Child Protection System Involvement, Maltreatment Type, and Time in Out-of-Home Care. *Child Maltreatment*, 25(4), 433-445.

<sup>18</sup> Maclean M., Taylor C., O'Donnell, M. (2016) Pre-existing adversity, level of child protection involvement, and school attendance predict educational outcomes in a longitudinal study. *Child Abuse and Neglect*. 51:120-31.

<sup>19</sup> Laurens, K., Islam, F., Kariuki, M., Harris, F., Chilvers, M., Butler, M., Schofield, J., Essery, C., Brinkman, S., Carr, V., & Green, M. (2020) 'Reading and numeracy attainment of children reported to child protection services: a population record linkage study controlling for other adversities', *Child Abuse and Neglect*, vol. 101, 104326.

<sup>20</sup> Victorian Department of Education & Training (2021). Expulsion data for Victorian Government Schools in 2021. Retrieved from: [expulsion-data-snapshot-2021.pdf](https://www.education.vic.gov.au/expulsion-data-snapshot-2021.pdf) (education.vic.gov.au)

<sup>21</sup> AIHW *Child Welfare series. Cat no. CWS 92. Link.* Note: *child protections service categories are not mutually exclusive*

<sup>22</sup> Australian Institute of Health and Welfare. (2023). *Child protection Australia 2021-22.* Retrieved from <https://www.aihw.gov.au/reports/child-protection/child-protection-australia-2021-22>

2020-21	45,686	32.0	174,719	31.0
2021-22	47,441	33.5	177,556	31.3

Findings from the Australian Maltreatment Study reflect the scale of this challenge.<sup>23</sup> The study, based on a population-based survey supported by the Commonwealth Government, suggests rates of child maltreatment are much higher than what is captured by child protection reporting data. This has inevitable repercussions for Australia’s education systems. Child protection and OoHC data reflects a very sad reality for an increasing number of children which is that they are exposed to significant degrees of relational and developmental trauma.

**The increasing rates of abuse, neglect and other childhood adversity is placing demands on the education system for which it is not designed. This is a likely major contributing factor as to why student learning outcomes and equality of outcomes are in decline.**

Berry Street applauds several initiatives from the Department of Education and Training (DET) over the past few years to strengthen mental health and wellbeing supports in government schools. For instance, the *Framework for Improving Student Outcomes* which now places both learning and wellbeing outcomes at the centre; and the creation of the *Schools Mental Health Fund* which supports positive mental health promotion, early intervention, and targeted supports. Although these initiatives are important steps, we are concerned they will not be enough to overcome declining student learning outcomes and geographic and socio-economic disadvantage.

Access to quality education in a safe learning environment is integral to the overall development and wellbeing for young people affected by trauma. Young people affected by trauma are frequently disrupted by complex personal histories and ongoing challenges, which require specialist individualised support, often beyond what a mainstream schooling context can provide. These complex needs may include (but are not limited to) socio-emotional needs, difficulties with self-regulation, psychosocial disabilities, intellectual disabilities, chronic health conditions, as well as logistical challenges, such as frequent changes to residential location or needs to attend court.

It is important to note the role of low- or fee-free independent schools especially in delivering education for highly disadvantaged students including those who are excluded from government schools. See Box 3 for a description of how the Berry Street School delivers education to students who live with significant disadvantage. Students who attend schools such as run by Berry Street do not have access to many of the targeted supports available through state government schools, such as access to the School’s Mental Health Fund and Head Start.

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<sup>23</sup> Haslam, D.M., Lawrence, D.M., Mathews, B., Higgins, D.J., Hunt, A., Scott, J.G., Dunne, M.P., Erskine, H.E., Thomas, H.J., Finkelhor, D., Pacella, R., Meinck, F. & Malacova, E. (2023), *The Australian Child Maltreatment Study (ACMS), A national survey of the prevalence of child maltreatment and its correlates: Methodology*. *Med J Aust*, 218: S5-S12.

### The Berry Street School

The Berry Street School has been in operation since 2003. It now has four campuses across metropolitan and regional Victoria. It educates young people with a history of adverse childhood experiences who are at risk of disengaging from their education. The School occupies a unique pocket of the specialist schooling sector, supporting some of the most vulnerable young people in Victoria.

Most children enrolled at our School face multiple educational barriers related to their individual circumstances and background. A large number have also spent time in, or are currently in, OoHC. Its socio-economic profile is one of the most disadvantaged in Victoria (it is the 7th most disadvantaged secondary school in the state) and it accepts younger students than most specialist schools which primarily focus on years 11-12. Students at the Berry Street School require extensive adjustments for their socio-emotional needs, which is reflected in a high funding rate per student (as per the Nationally Consistent Collection of Data on School Students with Disability (NCCD) model), and the school delivers a modified Victorian Curriculum and Senior Secondary Certificates.

Moreover, we believe it is essential to consider the distinction between “disadvantaged” and “disengaged” students when analysing poor student learning outcomes in the state. For instance, one of the challenges with using large population-level data sets like NAPLAN data is that it aggregates various groups of disadvantaged students who have different needs and would likely benefit from different types of interventions. Students who are *disengaged* from schooling altogether are unlikely to be described by NAPLAN data, as many would not have attended school when the assessments were administered.

Specialised schools like the Berry Street School, whose purpose is to engage students who have been, or are at high risk of, being disengaged from school entirely, can create environments and interventions which are more effective for these students. These schools are often intentional in not administering traditional assessments such as NAPLAN. In these schools, the goal is to create an alternative learning setting that does not resemble a traditional school, and they often seek exemptions from instruments like NAPLAN – especially because students with social-emotional disabilities tend to find assessments like these anxiety-provoking. The Berry Street School has been refining its capability in this field for 20 years and can attest to the benefits of specialisation.

Policies which treat students who are *disadvantaged and disengaged* the same as students who are *disadvantaged but still engaged* may unintentionally disadvantage the disengaged students further by making it too challenging to effectively re-engage with school after absences and other disturbances to their learning.

## (2) The state of the teaching profession in Victoria

*including but not limited to —*

- (a) the adequacy of existing measures to recruit and retain teachers;*
- (b) training, accreditation and professional development, particularly for students with special needs;*
- (c) the adequacy of the Department of Education’s measures to support teachers;*
- (d) the impact of school leadership on student wellbeing, learning outcomes and school culture;*

Teachers are the key in every school and education system for all students. Not least of which is because they play a vital role in their students’ lives. This can be especially vital for children in Out of Home Care (OoHC) who either have many professionals and adults assuming different roles in their lives or have a dearth of adults consistently available to them. The connection between a child/young person and their teacher is fundamental to ensuring consistent school attendance and academic performance. While it is not a teachers’ role to provide clinical treatment for students struggling with mental health, they have an inherent obligation and opportunity to notice changes, assess risk and connect students to appropriate supports. Similarly, it will often be the teachers who notice when students are struggling with family trauma and adversity as well as personal traumatic events or loss and grief.

The pressure felt by teachers arising from this sense of obligation – to support students with complex learning and wellbeing needs beyond they have been trained for – is a form of ‘role creep’ which raises the risk of burnout and attrition, which are a significant issue in the state education system.

In simple terms, reducing the risk of teacher burnout comes down to two high-level strategies:

1. reducing the demands of the job; and/or
2. increasing the resources teachers can draw upon to meet the demands of the job.

### **1. Reducing the demands of the job:**

#### **Roles and resources:**

The boundaries of ‘reasonable’ expectations of teachers will always be contested and evolving. However, research undertaken by Social Ventures Australia (SVA) found education professionals often do not have the specialist skills required to deal with the complex needs of a child who may have experienced trauma, such as the events which have led to being placed in OoHC. Educators need skills to deal with both the interpersonal and cognitive impact of trauma, including specialist expertise to support any developmental problems and learning difficulties.<sup>24</sup> Teachers in mainstream and specialist

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<sup>24</sup> Social Ventures Australia (2019). SVA Perspectives Education: Children in out of home care. Retrieved from: [https://www.socialventures.com.au/assets/SVA\\_Perspective\\_Education\\_children\\_OOHC\\_webres.pdf](https://www.socialventures.com.au/assets/SVA_Perspective_Education_children_OOHC_webres.pdf)

settings increasingly confront challenges in educating students who present with a range of trauma symptoms and behaviours that include Attention Deficit Hyperactivity Disorder (ADHD), peer bullying, school refusal, conduct and oppositional defiance disorders, distracted or aggressive behaviour, limited attentional capacities, poor emotional regulation, attachment difficulties, poor relationships with peers, suicidal ideation and self-harming. Schools that undertake BSEM training and implement its strategies report improved capacity among staff to manage these issues.

In their work, Berry Street staff from our teacher training and therapeutic services (the *Berry Street Education Model* and *Take Two* respectively) note that the lack of secondary and tertiary supports in education settings, particularly around mental health, is one of the biggest concerns flagged by teachers. Schools that are equipped to provide these supports are best placed to mitigate the impact of this demand on teachers. Not having such access to essential resources to build the confidence and capability of teachers in responding effectively to these needs adds to the known contributors to burnout and attrition.<sup>25</sup>

At the Berry Street School, all campuses have a Take Two psychologist to support assessments and provide reflective practice and psychoeducation for staff as well as a Take Two clinician who works therapeutically with students. In our experience, this model is successful because students would otherwise face long wait lists and significant barriers to accessing the services they need. Having these supports integrated into the school removes these barriers; and this level of integration minimises the risk of role confusion and educational staff (teachers and education support staff) being overwhelmed.

**Vicarious trauma:**

Compounding these concerns, teachers can be impacted by their students' trauma presentations through secondary and vicarious effects. Vicarious trauma is experienced by school staff who listen to and support students and families who have experienced trauma and carry the emotional pain and burden for their students. Our research and experience of working with school leaders show that principals and their leadership teams often feel crisis-fatigued. School leadership teams are leading and caring for teachers and education support staff who are adversely and continuously impacted by vicarious and secondary exposure to childhood trauma, compassion fatigue, and burnout.

***Recommendation:***

*The state education system should integrate specialist trauma-informed wellbeing services into schools to limit role confusion and remove access barriers for students with the highest need.*

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<sup>25</sup> Carroll, A., Forrest, K., Sanders-O'Connor, E. et al. (2022) Teacher stress and burnout in Australia: examining the role of intrapersonal and environmental factors. *Soc Psychol Educ* 25, 441–469.

## 2. Giving teachers more resources to draw upon to meet the demands of the job:

Burnout and attrition do not automatically follow from demanding jobs. A key determinant of when it does is the extent to which the workforce can draw upon resources to cope with and meet the demands of the job over time. It's important to note that "resources" in this context is much broader than emotional support like employee assistance programs. It may include anything that helps a teacher or other school staff sustainably cope with the demands of their role, and therefore should encompass include training, appreciation, autonomy, salary, job security, participation in decision-making, and advancement opportunities.

Berry Street strongly advocates for strengthening resources available to teachers in the state education system. In particular, we believe that addressing the organisational climate teachers work within and teacher training are some of the most effective interventions because these both have large beneficial knock-on effects which last well beyond the initial intervention.

**We advocate strongly for the value of integrating trauma-informed principles into whole-school behaviour management approaches in Victorian schools.** The challenge is to help the student to better understand their own reactions and to learn new, more adaptive pathways to physical and emotional self-regulation. In this context, we see an effective trauma-informed approach to student behaviour as one that:

- *involves proactive strategies to promote positive student behaviour* – such as beginning the day with a check-in routine on students' readiness to learn, predictable classroom rhythms, and developing Ready-to-Learn plans with students which identify their strengths, triggers for dysregulation and strategies that assist them to regulate;
- *involves pre-emptive responses* – which recognise when students show early signs of escalation and prevent escalation; examples include enacting the Ready-to-Learn plans, and co-regulation of student behaviour through teachers' own reactions, voice, and body language;
- *is implemented at a whole-school level and relevant for all* – with consistent systems and shared language among staff, assisting schools to respond to all students – students engaging in risk-taking behaviour as part of typical adolescent development, students dealing with typical or overwhelming stress, and students who experienced trauma, abuse or neglect;
- *involves consistent expectations and predictable consequences* – providing clear expectations and consistently reminding students of them creates a sense of safety; this should be coupled with predictable and fair consequences appropriate to the given situation or student that support learning from experience;
- *preserves strong student-teacher relationships* – all students should feel they have an advocate in their school; responding to dysregulated student behaviour might rupture this relationship; subsequent restoration through respectful conversations is important.

There is a misconception that a trauma-informed approach to managing classroom behaviour excuses disruptive behaviours and allows students to act inappropriately because of their past experiences of trauma and unmet needs. This is incorrect. From our experience, students presenting with the most dysregulated behaviour are the ones who thrive in the most caring yet firm environments.

Understanding the unmet developmental needs of students helps educators develop empathy, treat students with unconditional positive regard, and decide on the most appropriate support strategy.

At the same time, the importance of consistency when it comes to behavioural management cannot be overstated. It is highly distressing for students if one day they are allowed to swear with no consequences and then the next day they are punished. The shifting ground can be destabilising for students. When students consistently meet firm but fair expectations, testing the teacher's resolve and pushing boundaries quickly becomes boring. The students develop respect for the teacher, feel a sense of safety and predictability, and settle into focusing on learning.

In our experience, implementing whole-school trauma-informed systems for behaviour support can have a powerful flow-on effect to improving staff safety, wellbeing, and retention. The case study in Box 4: Case study on benefits to staff from implementing BSEM below illustrates one example of the outcomes of implementing BSEM for teachers.

*Box 4: Case study on benefits to staff from implementing BSEM*

### **Case study: Unexpected positive impacts of a journey with BSEM on staffing (2021)**

When a new principal arrived at the Monterey Secondary College in 2019, only 15% of teachers agreed their classrooms were orderly and focused. He was the third principal appointed that year with the school's environment described by some as "dysfunctional" and "beyond repair". Berry Street has been proud to work side by side with the school on its BSEM implementation since 2019.

In 2021, 89% of teachers agreed their classrooms were orderly and focused.

*One of the unexpected benefits of BSEM, in combination with other school initiatives, is that we've had a significant drop in staff absenteeism. We think it's because staff can now expect and keep working towards calm classrooms most of the time and feel renewed to keep building on that.*

*We've also focussed on restorative practices and restoring the relationships with students when they've had a blow-up in the classroom. We have observed a significant drop in critical or extreme incidences (...). We are seeing observable and positive changes in teacher wellbeing across the campus as teachers enact BSEM strategies to maintain focus on student wellbeing – School Principal*

Further detail on this case study can be found here: <https://www.berrystreet.org.au/news/bsem-in-action-monterey-secondary-college> and here: <https://www.theage.com.au/national/victoria/former-struggle-school-stuns-with-two-year-turnaround-20211219-p59irm.html>

BSEM's approach is designed to be 'dual-purpose'. That is, with strategies that bolster student wellbeing must also bolster staff wellbeing. We are deliberate in our practice because we know that in time-poor professional learning schedules, schools do not commonly have enough time to focus on both student and staff wellbeing. BSEM strategies support staff to understand that when they deliberately teach a wellbeing strategy to students, they must also model and practice wellbeing strategies for themselves. We know that teachers who role-model well-being have enhanced opportunities to increase their personal wellbeing.<sup>26</sup>

### **Enhancing Initial Teacher Education (ITE)**

The state education system would benefit enormously from further targeted training in Initial Teacher Education (ITE) which better equips educators to recognise and meet the distinctive educational challenges and socio-emotional needs of students affected by adverse childhood experiences.

Educators with a deep understanding of these students' experiences – and their effects – will be in a stronger position to nurture a love of learning and facilitate the student's educational goals. It is imperative that systems are appropriately resourced to providing tailored, student-centred supports for children and young people in OoHC and other at-risk populations. Systems must cultivate, rather than constrain, expectations and aspirations of students.

Berry Street's experience in schools, coupled with research in the field, suggests teachers' capacity to recognise and respond to the impacts of complex trauma experienced by their students is at least partly dependent on the preparation they receive as part of ITE programs.<sup>27</sup> The increased prevalence of students affected by trauma, coupled with the impact of challenging student behaviours on teachers' decisions to leave the profession, highlight the importance of a systemic response that includes mandatory trauma-informed teaching and learning within pre-service education.<sup>28,29</sup>

### **Mental Health First Aid**

The need for Youth Mental Health First Aid (Youth MHFA) training is highlighted for all education staff, especially those working with vulnerable students. School staff have a unique opportunity to build positive relationships with students, making them likely recipients of disclosures regarding poor mental health, self-harm, suicidal thoughts, abuse, and neglect. School staff often express concern about their lack of confidence in responding to a young person in crisis. This is significant, given the way in which disclosures are handled is crucial in determining the subsequent help-seeking trajectory

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<sup>26</sup> Brunzell, T., Stokes, H., & Waters, L. (2018). Why do you work with struggling students? Teacher perceptions of meaningful work in trauma-impacted classrooms. *Australian Journal of Teacher Education*, 43(2), 116-142.

<sup>27</sup> Rodger, S., Bird, R., Hibbert, K., Johnson, A., Specht, J., and Wathen, C. (2020). Initial teacher education and trauma and violence informed care in the classroom: Preliminary results from an online teacher education course. *Psychol. Sch.* 57, 1798–1814.

<sup>28</sup> Harris, S. P., Davies, R. S., Christensen, S. S., Hanks, J., and Bowles, B. (2019). Teacher attrition: Differences in stakeholder perceptions of teacher work conditions. *Educ. Sci.* 9, 300–312.

<sup>29</sup> L-Estrange, L & Howard, J (2022). Trauma-informed initial teacher education training: A necessary step in a system-wide response to addressing childhood trauma. *Frontiers in Education*, 7, Article number: 929582.

for a student. It is not always possible to involve other professionals in the moment, therefore training and clear organisational guidelines are essential. This ensures that education staff can handle such situations appropriately without blurring their roles as educators and can maintain the psychological safety of their students and themselves.

***Recommendation:***

*Berry Street recommends the state include trauma-informed practice education (including programs such as BSEM) and Youth Mental Health First Aid training as part of Initial Teacher Education (ITE) for all Victorian schools.*

### (3) The current state of student wellbeing in Victoria

*including but not limited to the impact of State Government interventions, following the onset of the COVID-19 pandemic, to address poor mental health in students, school refusal, and broader student disengagement;*

#### Systematic approaches to wellbeing trump one-off interventions

Berry Street would like to echo the following key statements in the Productivity Commission's recent review of the National School Reform Agreement (NSRA), which are exceedingly relevant to this item:

- *wellbeing improvements require a focus on school practices and leadership, not just one-off wellbeing programs; and*
- *simply adding to the existing stock of wellbeing programs may fail to embed good practice into classrooms and schools on an ongoing basis.*<sup>30</sup>

We endorse the need for a multi-tiered, whole-school approach to supporting student mental health and wellbeing. Particularly when responding to the pervasiveness of adverse childhood experiences (ACEs) and therefore the assumed prevalence of students impacted by trauma in all classrooms in Victoria.<sup>31</sup> It is also worth highlighting that everyday stressors that do not reach the level of trauma can overwhelm a student or family depending on the surrounding circumstances and can impact on their ability to participate, attend, and learn in class. Although this may be for a shorter duration than a trauma response, if the response is not trauma-informed it can lead to unintended and unfavourable outcomes for the student. In other words, being trauma-informed can equip school staff and leadership in responding to all types of crises including but not limited to trauma. Our research and experience of working with schools show that principals, their leadership teams, and teachers often feel crisis fatigued. School leadership teams are leading and caring for teachers who are adversely and continuously impacted by vicarious and secondary exposure to childhood trauma. In our experience, implementing whole-school trauma-informed systems for behaviour support can have a powerful flow-on effect to improving staff safety, wellbeing, and retention.

**In our experience, implementing whole-school trauma-informed systems for behaviour support can have a powerful flow-on effect to improving staff safety, wellbeing, and retention.** *Box 5: The whole school approach to trauma-informed education* explains the whole school approach in more detail.

*Box 5: The whole school approach to trauma-informed education*

#### The Whole School Approach:

<sup>30</sup> Productivity Commission (2022). Review of the National School Reform Agreement, Study Report. Canberra. Retrieved from: <https://www.pc.gov.au/inquiries/completed/school-agreement/report>

<sup>31</sup> Plumb, J., Bush, Kelly, A., Kersevich, S. (2016). Trauma-Sensitive Schools: An Evidence-Based Approach." *School Social Work Journal* 40 (2016): 37-60.

### **How does a whole school approach work?**

A whole school approach shifts from a focus on ‘fixing’ individuals to creating healthy systems. These types of multifaceted approaches are more effective in achieving health and educational outcomes than classroom-only or single intervention approaches.<sup>32,33</sup>

Social-emotional factors are pivotal to the way a trauma-informed school operates and how schools achieve their education and health goals.<sup>34,35</sup> The whole-school approach, where there is coherence between the school’s policies and practices that promote social inclusion and commitment to education, facilitates improved learning outcomes, increases emotional wellbeing, and reduces health risk behaviours.<sup>36,37</sup>

Trauma-informed schools require total commitment at all levels and trauma-informed approaches should encompass an entire organisation rather than be applied to specific practices.<sup>38</sup> Trauma-informed schools should:

1. *have school wide understanding of safety and consistency;*
2. *promote positive interactions;*
3. *be culturally responsive; and*
4. *provide peer and targeted supports.*

Through the delivery of BSEM training to hundreds of schools and thousands of educators we can confirm the powerful flow-on effect of implementing whole-school systems for staff who face significant professional and personal challenges in dealing with the diversity of student need, adverse behaviours, and disruption. Teachers who choose to educate vulnerable and trauma-affected students often do so because positive social change gives their work meaning. However, when teachers struggle with effective strategies to manage disruptive and disengaged student behaviours, the challenges of working with trauma-affected students can lead to burnout and to exiting the profession.

### **Recommendation:**

*The government’s Schools Vic Policy and Advisory Library (PAL) should advise government schools to explore more advanced and practical trauma-informed and whole-school approaches to behaviour management in school such as the Berry Street Education Model (BSEM), in addition to the current school-wide positive behaviour support (SWPBS) framework.*

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<sup>32</sup> Whitman, C. & Aldinger, C. (Eds.). (2009). Case studies in global school health promotion: from research to practice. Springer Science & Business Media.

<sup>33</sup> Stewart-Brown, S. (2006). What is the evidence on school health promotion in improving school health or preventing disease and specifically what is the effectiveness of the health promoting schools’ approach? Copenhagen: World Health Organization.

<sup>34</sup> Langford, R., Bonell, C. P., Jones, H. E., Poulou, T., Murphy, S. M., Waters, E., Komro, K., Gibbs, L., Magnus, D., & Campbell, R. (2014). The WHO Health Promoting School framework for improving the health and well-being of students and their academic achievement. Cochrane database of systematic reviews, (4) CD008958.

<sup>35</sup> Greenburg, M., Weissberg, R., Zins, J., Fredericks, L., Resnik, Hand Elias, M. (2003). Enhancing school-based prevention and youth development through coordinated social, emotional and academic learning”. American Psychologist, 58(6), 466-474.

<sup>36</sup> Langford et al. 2014.

<sup>37</sup> Barry, M. M. (2013). Promoting positive mental health and well-being: Practice and policy. In Mental Well-Being (pp. 355-384). Springer, Dordrecht

<sup>38</sup> Wiest-Stevenson, C., and Lee, C. (2016). Trauma-Informed Schools. Journal of Evidence-Informed Social Work 13, pp 498 - 503.

## Early intervention opportunities are being missed

While systematic approaches are better than standalone interventions, it is possible for them to take effect too late in a child's education to neutralise the educational disadvantage arising from adverse childhood experiences. Children who have experienced early complex trauma are commonly 'behind' from the moment they commence their schooling and, consequently, it is essential that school-based interventions are as early as possible and as effective as possible.

**A significant challenge for schools occurs when early intervention opportunities are missed before a student starts school.** Vulnerable families may struggle to identify developmental delays or access support services, especially in rural and regional areas, and there is a flawed assumption that schools can address these gaps. But many schools, especially government schools, lack the resources required for effective intervention and there is limited capacity for specialist referrals. While having specialists such as occupational therapists, psychologists, speech pathologists, and other allied health professionals visit schools would be the most effective approach, severely limited resources in many areas force families to travel for such services – but this is not be feasible for all families.

Insufficient information sharing is a key factor holding back early intervention. For instance, where early specialist assessments have been undertaken with children, schools must be able to access all relevant information if they are to implement effective supports. This includes information in specialist assessments undertaken through the NDIS Early Childhood Early Intervention (ECEI) to identify developmental delays, and paediatric and multi-disciplinary assessments for children in OoHC as part of the Victorian government-funded Pathways to Good Health (which was piloted in three Victorian regions). It is critical that bodies such as NDIS and child protection share relevant information with education providers to enable the development of swift learning interventions to support students. Another factor which may be preventing early intervention is the effectiveness of well-intentioned information sharing schemes like the Child Information Sharing Scheme (CISS) and the Family Violence Information Sharing Scheme (FVISS). There is a perception that awareness of these schemes and the procedures for engaging with them could be holding back the level of information being used by schools in supporting vulnerable cohorts of students.

***Recommendation:***

*The government review the effectiveness of information sharing schemes for schools to support vulnerable cohorts of students like those at risk of or involved with Child Protection and Out of Home Care.*

## Recognising the role of specialist schools

Independent, specialised schools like the Berry Street School, who serve the most disadvantaged students in the state, play an important role in the Victorian education system by engaging students who are at risk of becoming, or have already become, altogether dis-engaged from education. They provide an important gateway to re-engage in education and, by extension, future employment and life opportunities. The prevalence and capability of these schools has been growing with the demand for flexible and trauma-informed education, however they are not large enough or growing fast enough to absorb this demand, which will place further strain on the state education system.

At the ground level in the teaching profession, the learning environments created by these specialist schools are understood to be a better fit for many students most severely affected by adverse childhood experiences when compared to mainstream schools. Teachers in specialised schools tend to have more resources, relevant training and fit for purpose supports to carry out their role well; and the school policies and facilities are tailored to the needs of teachers and this student cohort.

Unfortunately, independent specialist schools are often invited to play this role too late – usually only at the point when a student has been excluded from their local government school. Currently, while the Department of Education does not formally partner with specialist independent schools to provide referral to specialist schools *before* this point, it happens anyway. Departmental student support service staff working with vulnerable students who are disengaged from their education setting will refer students to schools like ours; and school-level staff in government schools who have some exposure to or familiarity with specialist providers like Berry Street are, on average, highly proactive in facilitating a transfer of the student, seeing this as acting in the student’s best interest. These relationships are reciprocal, with both organisations involved in the transfer working collaboratively to smooth the student’s transition.

We ask this Inquiry to appraise the importance of specialist independent schools and the role they play in the state education system. Moreover, we would like to voice our belief that the expertise of these providers could be better leveraged by the state education system through stronger partnerships.

### **Recommendations:**

*The government should consider assisting and incentivising experienced non-government specialist schools which are fee-free, not-for-profit, and not faith-based, to open campuses in geographic areas with the highest concentrations of students with complex learning and wellbeing needs.*



The Berry Street acknowledges Aboriginal and Torres Strait Islander peoples as the Traditional Custodians of the lands, skies, and waterways across Australia. We acknowledge that sovereignty was never ceded, and we recognise the impact colonisation has had and continues to have. We appreciate the knowledge, wisdom and learnings of the longest living cultures and we are guided by their strength and resilience. The Berry Street School pays our respect, and we acknowledge Elders as holders, protectors and educators of Aboriginal and Torres Strait Islander cultures.



Berry Street is committed to the principles of social justice. Berry Street supports the LGBTIQ+ community and celebrates diversity.