Supporting Vulnerable Children in the Face of a Pandemic

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Executive summary

This paper particularly focuses on factors that will impede access to quality education, of the effects on the more vulnerable groups, and it outlines models of support and recovery that evidence suggests are useful. This brief synthesis draws parallels from literature on natural disasters and school interruptions such as school holidays, teacher strikes, economic downturn, and natural disasters such as earthquakes and hurricanes.

According to the Productivity Commission, disadvantage in Australia needs to be assessed against three metrics: relative income poverty, material deprivation (inability to afford life’s essentials), and social exclusion. Children experiencing these metrics can include those living in very low SES contexts, jobless households, children with special needs either physical or psychological, children with language other than English backgrounds and refugee populations, rural and remote contexts, and Indigenous Australians and Torres Strait Islanders. Recently, low digital inclusion has been considered an additional category particularly when this interacts with the other categories.

It is useful to consider the impact of the current pandemic from a Population Life Course perspective which illustrates the determinants of education and its efforts in reducing vulnerability. The figure below illustrates the trajectory for those in the existing vulnerable, the potential vulnerable and the protected categories within the population along with those determinants of education that drive the curve up or down.

![Figure 1. Population education life course model](image)

Australians and Torres Strait Islanders are a vulnerable group. EUHMRM HGHMERMLHHEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.ETUHMRMHEWHITHEWHOH.WTETM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.EHRMRMLHMRMLHIEWHO.THEM.
these students will experience an interactive effect of COVID19 and any prior disadvantage. Specifically, as a consequence of the pandemic, students are likely to experience:

1. Increased stress, social and emotional concerns with possible behavioural issues arising.
2. Low self-regulation to maintain learning progression, that has been highly dependent on the teacher
3. No access to quality learning strategies and guidance necessary to promote development
4. Less educational resources and activities relative to peers, in particular in relation to limited digital engagement
5. Continued and reaffirming experience of past lack of progress in school
6. Minimal concept of themselves as a learner at school, and likely the same at home. Hence impacting on future engagement in schooling such as absenteeism and dropouts
7. Lack of facility in critical reading and numeracy skills to move to the next level, and more likely to become part of the ‘low Matthew effect’ (the rich get rich, the poor stay poor)
8. Living in homes which are not safe havens (for many of these students, school is the safe haven), there will be an exacerbation of physical and emotional health issues
9. Parents who have low capacity or desire to engage them in the schoolwork at home and who ignore or permit no engagement with schoolwork.
10. A loss in opportunity to engage, particularly for upper high school students preparing for high stakes exams.

The Table below attempts to summarise the depth of ‘risk exacerbation’ as a consequence of the pandemic by indicating with Green for a minimum effect, Orange for a medium effect, and Red, for the greatest level of exacerbation. The table demonstrates the relationship between existing risk categories and like area of impact.

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**Table 1. The exacerbated risks related the current pandemic for vulnerable children**
Many of these students are likely to be already ‘at risk.’ The absence from regular class, and support, suggests that the level of risk and the number of comorbidities is likely to be exacerbated. Hence the recovery will be much more difficult. It must also be acknowledged that within these categories there are subsets of students who are successful despite the categorisation of some level risk, and in fact some will do better as a consequence of the current crisis.

**Recovery and Support: what does the evidence suggest?**

There are many ideas and much rhetoric about recovery, however there is little consolidated evidence on the support needs for vulnerable children and families in times of crisis. The following present a brief overview of a number of recommendations gleaned from multiple sources.

**Recovery takes time**

There are many national and international frameworks that provide a foundation for recovery after a disaster. The UN Disaster Risk Reduction model (UN, 2015) for example, conceptualises disaster risk relief as a “Build Back Better” system. This model argues that resilience emerges from a continual, interplaying dynamic cycle between response (immediate) recovery (short-term) and preparedness (medium-term). The domains of action include teaching and learning; capacity and capability; engagement, coordination, and communications; infrastructure; assessment, policy, and planning. Recovery measures must redress damage and develop resilience-building measures (Shah, 2015).

Disaster response and management has several phases and it is worth drawing on these phases to consider education’s response to the current COVID-19 crisis and beyond. In many recovery programs, the government-assisted stage can be separated into distinct but overlapping phases that delineate an early recovery phase. This is important as it stresses the transition from the immediate response to recovery efforts over time, as in the figure below (The Community Recovery Handbook, 2018, p. 32). While the framework below is based on a community response model, it provides a valuable template for the school sector’s phased response to the current crisis and particularly for vulnerable students.

![Disaster response phases of support diagram adapted from The Community Recovery Handbook](image)

It is feasible that these ‘new normal’ services may be different in type and level to the services that were in place before the disaster. There needs to be a concerted effort to derive the positives from the distance learning from home, any
improvements to the tasks and success, and bring them into the new normal. This work on recovery nationally is also based on seven endorsed principles.

Understand the context: Successful recovery is based on an understanding of the community context.

1. Recognise complexity: Successful recovery is responsive to the complex and dynamic nature of both emergencies and communities.
2. Use community-led approaches: Successful recovery is community-centred, responsive and flexible, engaging with communities and supporting them to move forward.
3. Excellent diagnosis of every student comparing their expected growth prior to COVID-19, to detect where extra attention and programs are needed.
4. Coordinate all activities: Successful recovery requires a planned, coordinated and adaptive approach based on continuing assessment of impacts and needs.
5. Communicate effectively: Successful recovery is built on effective communication between the affected community and other partners.
6. Recognise and build capacity: Successful recovery recognises, supports and builds on individual and community strengths.

Ultimately, it is important that education recovery operations must draw attention to incorporating “children’s unique mental health, physical health, educational, childcare, and juvenile justice needs into all phases of the disaster life cycle”.

Recommendations

1. Recovery needs a collective response that builds long term relationships.
2. Success is dependent on teachers and schools.
3. Shift the focus and build adaptive resilience through the provision of services to support socially and emotionally.
4. Ensure ongoing communication with vulnerable children and families.
5. Support and professional learning for teachers is essential.
6. Provision of targeted content.
7. Consider the investment in multiple forms and modes of resources for all.
8. Increase digital inclusion.
Introduction

By mid-March 2020, an estimated 862 million children were out of school. Importantly, vulnerable children are significantly more likely to experience negative impacts upon their health and wellbeing from the suspension of school-based food programs. The provision of Internet and digital inclusion measures i.e. mobile phones for certain population groups may assist in mitigating heightened risks associated with domestic environment and digital equity of access. (United Nations Office for the Coordination of Humanitarian Affairs (2020).

School closure can affect every child differently depending on their age, dispositions, and past experiences. Closure can disrupt the relationships a child has with their family and school staff, as well as slow down the development of a child’s language, physical skills, and their social and emotional wellbeing. The impact for those already living with great stress or disadvantage can also be magnified.

Access to resources, quality information, medical care and effective education are precious at the moment. Unfortunately for vulnerable communities, Hart’s (1971) inverse care law often applies, which shows that the availability of care tends to have an inverse association with the need of the population. This situation maybe be multiplied in this current pandemic environment when basic communication tools such as digital access is necessary but scarce for some.

This paper focuses on factors that will impede access to quality education during and in recovery phases, particularly for the more vulnerable groups, and outline models of support and evidence-based recovery processes. This brief synthesis draws parallels from literature on natural disasters and school interruptions such as school holidays, teacher strikes, economic downturn, and natural disasters such as earthquakes and hurricanes.

Vulnerability

According to the Productivity Commission, disadvantage in Australia needs to be assessed against three metrics: relative income poverty, material deprivation (inability to afford life’s essentials), and social exclusion. Children experiencing these metrics can include those living in very low SES contexts, jobless households, children with special needs either physical or psychological, children with language other than English backgrounds and refugee populations, rural and remote contexts, and Indigenous Australians and Torres Strait Islanders. More recently low digital inclusion has been considered an additional category particularly when this interacts with the other categories. ‘Nearly one in two children in very remote communities are vulnerable compared to one in five in metropolitan cities. Overall, one in five children start school behind their peers, and half of these do not finish their education or go on to employment’ (Lamb et al., 2015). Given the factors that make up this list, the exact figure of vulnerability varies; the typical estimate is that 1 in 5 children in Australia have at least one risk factor.

Vulnerability and population perspective

The COVID-19 crisis backs on to a watershed summer for many Australian families and communities, with continuing drought and extreme bushfires, that has led to marked economic downturn. In terms of educating our children, this must not be viewed as a ‘time limited school disruption’ but an event that may continue in some form for several months. It can also exacerbate any existing levels of vulnerability, adding new students to the vulnerable group, and a possible increased resistance from students to attend or engage back in school in a timely manner. A population Life Course perspective as seen in the figure overleaf illustrates the trajectory for those in the existing vulnerable categories, and how the effects can increase if there is not early detection and successful interventions.

In the current circumstance, what is essential for our vulnerable children, is weighing up the potential short and long-term impact and recognising the future economic burden of an increased equity gap against the need for investment. If we consider that vulnerable children are already facing a negative impact as a consequence of their life circumstance, then understanding the depth and reach of impact exacerbation by the pandemic is now critical.
While the research is quite vague, there is some meta-analyses and systematic reviews in relation to the impact of disasters on vulnerable groups. As with traumatic life events more generally, it is the combination or additive total of risk and resilience factors that informs disaster outcomes (Bonanno et al., 2010).

The Impact
This section of the paper outlines impact risks for various cohorts, which is then followed by suggestions for reform.

Poverty and families at risk
Children of low socioeconomic status (SES) background may encounter additional difficulties in accessing quality education (Heck & Parker, 2002). Friedman, et al. (2002) showed that in 13 of the 14 studies, lower SES was consistently associated with greater postdisaster distress; with elevated symptoms more common in the first few months following a high-impact disaster. Out of the six youth samples, the ethnic majority groups fared better in four cases (Garrison et al. 1995; La Greca, Silverman, & Wasserstein 1998; March et al. 1997; Shannon et al. 1994), whereas minority groups fared better in the other two cases (Garrison et al. 1993; Jones, Frary, Cunningham, Weddle, and Kaiser 2001). From this, is clear is that physical health and wellbeing, and especially mental health is impacted in the short term and longer-term disasters. The recovery rate and specific longer-term impacts are unclear. This suggests that care is needed in generalising from disasters for lower SES children, as those disasters which led to loss of life or major socioeconomic losses may have different effects from those where children are not exposed to major stresses, any more than usual, in the home during the crisis.
Aboriginal and Torres Strait Islander students

We have a serious problem with young people detaching from schools in Australia. Conservative estimates are that at least 50,000 children and young people of school age have detached from any educational program or institution, across the country at any given time. A multitude of factors lead to school disengagement and then detachment. According to the latest Australian Bureau of Statistics Census (2016), there were 3,460,766 children aged between 5 and 16 years living in Australia in 2016. In the same census, there were 206,486 children for whom there was no information provided on the Census form about their student status or the type of educational institution that they were attending. Prevention of detachment needs to start with identification and intervention in quality early childhood education settings.

(Watterston & O’Connell, 2019)

Children with additional physical, cognitive, emotional or behaviour needs

According to the Australian Institute of Health and Welfare (AIHW), an estimated 168,500 Australian children had a severe disability in 2009, with the proportion of children with severe disabilities being highest amongst low-income households (29 per cent) and lowest amongst high-income households (7 per cent). Some of the common challenges faced by children with disability included exacerbated dependence on caregivers; limited mobilities; and heightened sensory stimulation associated with emergencies and disasters (Balbus & Malina, 2009). O’Connor and Spreen (1988) demonstrated that students with special education needs, learning difficulties and emotional disorders were severely impacted by trauma as a consequence of the lack of access to mainstream education (and hence access to teachers).

“At school, they get individualized attention from professionals who are trained in, and deeply familiar with, their unique ways of thinking, perceiving, and processing. But no amount of love and care at home can turn the average parent into a special education teacher overnight. Nor can it enable them to practice occupational, speech, or physical therapy—services that are provided in many schools.” (The Atlantic, 2020)

Early years development

Early childhood education and development is a key way to break the cycle of disadvantage for children living in vulnerable circumstances in Australia. Early intervention is key to any successful long term initiative to reduce vulnerability. Investing in the first five years of a child’s life is universally recognised as crucial to healthy development, with experiences early in life having a ‘lasting impact on later learning, behaviour and health’. The early years for all children is a crucial to development and the establishment of engagement in learning. Intervention at this time also reduce levels of vulnerability in later years. The Matthew effect (the rich get rich, the poor stay poor) is well supported; that is if students do not attain sufficient competence (say Level II in NAPLAN, Level I in PISA) by age 8, then they are unlikely to ever catch up to their peers—again, placing much importance on success in the early years.

School disengagement, refusers and absenteeism

Some Australian children do not receive the full benefit of school education as a result of becoming disengaged in a classroom setting or not attending regularly. The current pandemic will inevitably create the opportunity for those already disengaged to drop out of school or resist returning from the pandemic closures. Further, from both an equity and lost opportunity perspective, about 40 per cent of young people with the lowest socioeconomic backgrounds do not complete Year 12 or its equivalent by age 19.
There can be high costs for the individual and society from early school leaving. An early leaver costs the individual $616,000 over a working lifetime, or across each cohort $23.2 billion over a working lifetime. School attendance rates across all Australian schools decrease from year 7 to year 10, dropping from 93.0 per cent of nominally enrolled students to 89.4 per cent (Lamb & Ho, 2017).

Attendance and engagement in schooling for our most vulnerable students is already a serious concern. For school absenteeism, significant and substantial effects were found for risks that refer to:

1. physical and mental problems of the child (e.g., having psychiatric symptoms or disorders)
2. substance abuse (e.g., drug abuse)
3. antisocial or risky behaviour (e.g., showing anti-social behaviour or having anti-social cognitions)
4. problems at or with school (e.g., having a negative school attitude)
5. characteristics of the school (e.g., low quality of the school or education)
6. parenting problems and difficulties (e.g., low parental expectations)
7. family problems (e.g., an ineffective family system).

For school dropout, a significant overall effect in a negative direction was found for 23 out of 42 risk domains. Large effects for school dropout were found for those having a history of grade retention ($r = 0.35$), having a low IQ or experiencing learning difficulties ($r = 0.33$), and showing low levels of academic achievement ($r = 0.32$). Watterston and O’Connell (2019) see school disengagement as a national emergency. Their report presents several recommendations relating to further investment in data sharing and accountability, early intervention, support for teachers and the removal of system barriers.

**Learning and achievement**

Specifically, as a nation over the next 3-5 years, we may not see any significant differences in achievement scores on measures such as NAPLAN or PISA. The impact of a prolonged absence (say 10+ weeks), from school will probably not manifest in a significant disruption to learning outcomes over time for most students. This means, the focus needs to be on those already at disadvantage and identifying others who, because of the experiences during the school closure, are likely to join these disadvantaged groups. After Hurricane Katrina, those who had prior history of problems were more likely to show symptoms of traumatic stress, depression, sadness, anger, anxiety, and loneliness—for both students and teachers (Osofsky, Osofsky, & Harris, 2007). Peek and Richardson (2010) reported that more than 75% of students reported studying “much less” in the first year following the crisis. For the majority of students, however, the effects on student achievement were not as great as many expected. Students were out of school between three and seven weeks and many had no school work in this time: There was a drop of -0.17 from Katrina, but “what is more surprising is how quickly the Parish evacuees recovered from the experience and actually began to see gains in test scores” (Sacerdote, 2012, p. 131; see also Payne, McCaffrey, Kalra, & Zhou, 2008, who showed a drop of only -0.06 in state-wide test scores from the outage). The increases for most students was because they did not return to their previous schools but were assigned to more successful schools.
Education in the home

Parental engagement is defined as activity that supports children’s learning at home, at school and in the community. Most research tends to support the idea that parental engagement in their child’s schooling is a ‘good thing’, but it depends on the way they manifest their engagement. The more it becomes ‘surveillance’ of schoolwork then more the effects become negative. When schools help teach parents to understand the “language of learning”, then the positive effects increase. The Flaxmere project (Clinton, Dixon & Hattie, 2007) showed that in lower socioeconomic areas, parents were more inclined to meet with teachers and support their children when they had greater understanding about how students learn, how they could help their children to seek help from teachers, and how to see errors as opportunities, not evidence of failure.

Harris and Goodall (2008) also showed that ‘schools rather than parents are often hard to reach’. The traditional means of engagement of parents in their children’s education has been through homework or projects. There have been 8 meta-analyses on the effects of homework, based on 217 studies, and about 150,000 students, showing it had an overall effect size of 0.28, which ranks it 202 out of 250 influences on student achievement. The effects are much smaller (close to zero) in primary, and higher (about 0.4) in high school – which primarily relates to the nature of the homework. It has greater impact when the homework is an opportunity to practice already taught material than when it involves new work, involvement with parents, and is unrelated to what is currently happening in the classroom.

Digital inclusion

Digital inclusion is based on the premise that everyone should have access to and be able to make full use of digital technologies. With a growing range of education, information, government, and community services moving online, internet access is increasingly regarded as an essential service. In general, Australians with low levels of income, education, and employment are significantly less digitally included. There is consequently a substantial digital divide between richer and poorer Australians. The ADII report (2018) suggested that some Australians are particularly digitally excluded, and affordability remains a key challenge. The digital inclusion gap between Australians with disability and other Australians is substantial and grew in 2018. It should be noted that many teachers feel unprepared for distance or blended learning. ClassTag, (2020) in the US surveyed 1200+ teachers in mid-March during the COVID-19 crisis and found that 43 per cent are making their own decisions about remote learning tools, and 57 per cent feel unprepared for online teaching. Not only are educators navigating online learning and feeling unprepared, they are dealing with cyberattacks that risk the safety of their learning environments, privacy, and potentially, student data (eSchool News).

“Teachers are doing their best in an unprecedented and constantly changing situation, but the varying amount of training districts are providing has created a patchwork of quality and gaps in accessibility. . . . Many teachers are improvising and counting on patience from parents and students as they transition to online learning on the fly.” The report goes on to question the impact of the digital divide: “e-learning districtwide raises thorny questions about digital equity and access, especially for students with disabilities, children living in poverty, and those who are homeless. This has forced school leaders to ask, ‘if we can’t teach every student equitably, should we be teaching any at all?’” (Hechinger Report, 2020)
Summary:

For most children, particularly those not already in a risk group, the effects on their achievement may not be significant enough to warrant special programs, a longer school year, or new programs. For at-risk students, particularly those lacking access to the internet and regular teaching are more likely to experience exacerbated risk as a consequence of the COVID-19 school interruption. This can lead to a greater equity gap, and reduce the chances of recovery for those already in these vulnerable contexts. It is predicted that students with the following characteristics are most likely to be affected by the current suspension of normal schooling – and the effects multiplied if they were already in one of the above risk categories. The most at risk from the current COVID-19 crisis include:

1. Increased stress and social and emotional concerns with possible behavioural issues arising.
2. Low self-regulation to maintain learning progression, that has been highly dependent on the teacher
3. No access to quality learning strategies and guidance necessary to promote development
4. Less educational resources and activities relative to peers in particular in relation to limited digital engagement
5. Continued and reaffirming experience of past lack of progress in school
6. Minimal concept of themselves as a learner at school, and likely the same at home. Hence impacting on future engagement in schooling such as absenteeism and dropouts
7. Lacks facility in critical reading and numeracy skills to move to the next level, and more likely to become part of the ‘low Matthew effect’ (the rich get rich, the poor stay poor)
8. Living in homes which are not safe havens (for many of these students, school is the safe haven), there will be an exacerbation of physical and emotional health issues
9. Parents who have low capacity or desire to engage them in the schoolwork at home and who ignore or permit no engagement with schoolwork.
10. A loss in opportunity to engage, particularly for upper high school students preparing for high stakes exams.

Many of these students are likely to be already “at risk.” The absence from regular classes and support suggests that the level of risk and the number of comorbidities is likely to be exacerbated. Hence, the recovery will be much more difficult. It must be acknowledged that within these categories there are subsets of students that are successful despite the categorisation of some level of risk.

The table below attempts to summarise the depth of risk exacerbation as a consequence of the pandemic by indicating with Green a minimum effect, Orange a medium effect, and Red the greatest level of exacerbation. Additionally, the table demonstrates the relationship between existing risk categories and like area of impact.
Table 2. The exacerbated risks related the current pandemic for vulnerable children

<table>
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<th>Context</th>
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<th>Language Development</th>
<th>Physical Health &amp; Well-being</th>
<th>Emotional Competency</th>
<th>Emotional Maturity</th>
<th>Cognitive</th>
<th>Numeracy &amp; Literacy Achievement</th>
<th>Communication</th>
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INTERACTIONS

| Low Digital engagement        |        |                       |                             |                      |                   |           |                                 |               |                     |                      |
| ECE                           |        |                       |                             |                      |                   |           |                                 |               |                     |                      |
| Primary                       |        |                       |                             |                      |                   |           |                                 |               |                     |                      |
| Secondary                     |        |                       |                             |                      |                   |           |                                 |               |                     |                      |

Recovery and Support: Evidence suggestions

The following presents a brief overview of a number of recommendation gleaned from multiple sources.

Recovery takes time

‘The restrictions like social distancing have also impacted education at all levels, and will continue to do so for at least several months, as learners and teachers are unable to physically meet in the schools and universities. These limitations in the ability to meet during a protracted pandemic will likely limit opportunities for students to learn during the period of social distancing. It is well known that time spent learning, or learning time, is one of the most reliable predictors of opportunity to learn.’ (OECD 2020)

There are many national and international frameworks that provide a foundation for recovery after a disaster. The UN Disaster Risk Reduction model (UN, 2015) for example, conceptualises disaster risk relief as a “Build Back Better” system. This model argues that resilience emerges from a continual, interplaying dynamic cycle between response (immediate) recovery (short-term) and preparedness (medium-term). The domains of action include teaching and learning; capacity and capability; engagement, coordination, and communications; infrastructure; assessment, policy and planning. Recovery measures must redress damage and develop resilience-building measures (Shah, 2015).

The United Nations International Strategy for Disaster Reduction (2017) suggests that recovery is defined as “the restoring or improving of livelihoods and health, as well as economic, physical, social, cultural and environmental assets, systems and activities, of a disaster-affected community or society, aligning with the principles of sustainable
development and ‘build back better’, to avoid or reduce future disaster risk.” (Downloaded from knowledge.aidr.org.au/collections/recovery/). Disaster response and management has several phases and it is worth drawing on these phases to consider education’s response to the current COVID-19 crisis and beyond. In many recovery programs, the government-assisted stage can be separated into distinct but overlapping phases that delineate an early recovery phase. This is important as it stresses the transition from the immediate response to recovery efforts over time, as in the figure below (The Community Recovery Handbook, 2018, p. 32). While the framework below is based on a community response model, it provides a valuable template for the school sector’s phased response to the current crisis and particularly for vulnerable students.

The current situation provides the impetus for greater support of our children living with risk. Early recovery can be seen as a part of a longer-term plan to ensure that not only the number of children in vulnerable circumstance does not increase, but also that the impact of those already living in these circumstances does not become more ingrained.

![Disaster response phases of support diagram adapted from The Community Recovery Handbook](image_url)

**Figure 4.** Disaster response phases of support diagram adapted from The Community Recovery Handbook
It is feasible that these ‘new normal’ services may be different in type and level to the services that were in place before the disaster. There needs to be a concerted effort to derive the positives from the distance learning from home, any improvements to the tasks and success, and bring them into the new normal. The work on recovery nationally is also based on seven endorsed principles:

1. Understand the context: Successful recovery is based on an understanding of the community context.
2. Recognise complexity: Successful recovery is responsive to the complex and dynamic nature of both emergencies and communities.
3. Use community-led approaches: Successful recovery is community-centred, responsive and flexible, engaging with communities and supporting them to move forward.
4. Excellent diagnosis of every student comparing their expected growth prior to COVID-19, to detect where extra attention and programs is needed.
5. Coordinate all activities: Successful recovery requires a planned, coordinated and adaptive approach based on continuing assessment of impacts and needs.
6. Communicate effectively: Successful recovery is built on effective communication between the affected community and other partners.
7. Recognise and build capacity: Successful recovery recognises, supports and builds on individual and community strengths.

A key argument here is that these principles build a strong foundation for creating educational support for our more vulnerable communities. A clear focus needs to be children with a high level of comorbidities. Reliably identifying them and any interaction effects from the COVID-19 situation and providing support for these students is essential.

More specifically, relating education factors necessary for recovery in a recent rapid assessment related to COVID-19, the OECD (2020) reported that educational leaders identified five domains in which educational responses were the most challenging and should be specifically targeted:

1. Availability of technological infrastructure,
2. Addressing student emotional health,
3. Addressing the right balance between digital and screen free activities,
4. Lack of availability of parents/guardians to support learning at home, and finally;

Recovery needs a collective response that builds long term relationships

Utilising a multipronged and collective impact approach to support recovery will be essential in the coming months of the recovery phase for vulnerable children and communities. This collective needs to include schools, communities, families, students, multiple sectors and industries. This collective impact approach needs to focus on ‘strengths-based solutions’ that build strong relationships and practice that fosters communication, resource building and ongoing support structures and monitoring systems. The notion that schools should have stronger relationships with their communities has been promoted for decades by educators, health service providers, community developers and governments in Australia, Europe and North America (Bryk, Hill & Shipps, 1999; Hands, 2010; Muijs, 2007). Schools as community hubs provide a successful model to consider (Cleveland, Clinton McShane and Newton, 2019).
Success is dependent on teachers and schools

Schools bear a central role as repositories and creators of educational human capital. They create positive externalities for society inculcating skills, attitudes and values that will be valuable for people during normal times, but also to overcome hardship sometimes (as education is a portable asset). In fact, the centrality of schools to society goes beyond the formation of human capital. When schools are destroyed by a disaster, their reconstruction and the return of children can be one of the most effective ways to demonstrate a return to normalcy to the local population and to help the government rebuild the social contract (UNDP, 2008).

Recognising their power and esteeming schools and teachers is essential for recovery. Society and the health and education systems that sit within society have been changed by the pandemic, and this is also observed in other natural disaster scenarios. Children and young peoples’ education is affected by the availability of resources, and the policy decisions that are made. In the presence of scarcity and a desperate focus on healthcare and restoration of normal routines, it is plausible that fewer resources will be devoted to the improvement of education for a substantial period of time. Broader decisions affecting society as a whole can have a domino effect from affecting the education system, schools, staff, parents, and ultimately to children’s education. Education is a social determinant of health, and it is the most modifiable of all social determinants (Marmot et al., 2010).

Approximately 175 million children have their schooling interrupted by a disaster annually (Nicolai, Hine and Wales, 2016), while the impacts are variable it is essential that we understand that schools and teachers will play a pivotal role in this recovery. Hattie (2009) demonstrated that teachers are the key variable in education for all children. Quality teaching for any student in any condition is essential; this is more so for children at risk of poor educational outcomes. Based on synthesis of over 90,000 studies with 300 million students, Hattie (2009, 2019) estimates the variance for the major contributors to student learning. The largest source of variance we have control over relates to the teachers. It is teachers that most can make the difference to student learning. This is particularly important for those children living in vulnerable contexts. Under normal circumstances, schools and teachers play a crucial role in students’ daily life. Nonetheless, at these critical times the role of schools may have changed, but it is just as vital in mediating the students’ recovery from their physical and emotional trauma. This idea is portrayed through the recovery of students from natural disasters. Many studies suggested that school-based interventions had positive effects on students’ psychological well-being.

A first priority is to provide “safe spaces” for children so they do not suffer more and can begin to recover (Burde, Guven, Kelcey, Lahmann, and Al-Abbadi, 2015). The immediate aim is to assist children and teachers alike with a sense of normalcy amidst high levels of change during crises (Davies & Talbot, 2008), provide psychosocial support through curriculum and pedagogy to improve social and emotional resilience (Winthrop & Kirk, 2008), and provide entry points to services (Aguilar & Retamal, 2009). Burde et al. (2017) noted interventions that most effectively improved students’ educational outcomes and improved mental health were those that prioritised access, encouraged school-community communication, and fostered parent-teacher relationships.

Peek et al., (2017) noted that in the aftermath of recovery, children identified their teachers, peers, and schools as playing the most significant role in their recovery. Their study described that teachers made a concerted effort to “welcome” students and establish normality and acceptance at the reopening of schools. They facilitated peer support systems; dedicated extra time and support to students most vulnerable and displaying symptoms of trauma, anxiety and stress; and facilitated opportunities for students to creatively describe and reflect upon their traumatic experiences in a safe, accepting and nurturing environment to improve social and emotional health. Peer support was also valued highly by students (i.e. hurricane evacuees) for their role in assisting in recovery, by providing voluntary tutoring, positive reinforcement and encouragement. Together processes to “reclaim” their class and school are important in the early recovery phase.
Shift the focus and build adaptive resilience through the provision of services to support social and emotional learning

Access to relevant health and wellbeing services in recovery is particularly important, as this will require schools to collaborate with appropriate services and importantly provide support for teachers to assist in the process. Mutch (2014) suggested that it is important to allow staff (and students) to discuss their feelings, share their experiences and look for warning signs that they might not be coping. She also describes this as ‘Keeping a pulse on students’ emotional health’. Interestingly, Van der Kolk, (2007) suggests that services for Aboriginal and Torres Strait Islander children which implement a trauma-informed approach drawing on ancient wisdom of Indigenous cultures are most successful in facilitating healing and recovery. One of the strengths of many Aboriginal and Torres Strait Islander communities is where there is a kinship care system. In these cases, Aboriginal and Torres Strait Islander children may seek nurturance from extended family members, and benefit from kinship care as the close relationships keep them connected to their family, community and culture, and support their healing from trauma. Children and youth represent valuable resources to nurture and mobilize for disaster preparedness, response, recovery, and resilience at the individual, family, and community level. Include children and youth in establishing medium-term resilience in recognition of their social competence (Pfefferbaum, Pfefferbaum & Van Horn, 2018). Cahill et.al. (2020), argues that there are a number of key protective factors that need to be nurtured, and these are true for our most vulnerable children. These factors are:

a. Sense of safety and security (I am safe)
b. Self-worth (I am respected and valued)
c. Social connection (I am wanted and needed, I can listen and be heard)
d. Self-efficacy (I can do things to look after myself and others)
e. Sense of purpose, hope, and meaning (Going to school is worthwhile).

Making school and schooling inviting for families

Parents, as well as many students, often view school as uninviting (Purkey, 1996). This is particularly so for vulnerable families. There is an opportunity to build and strengthen the relationship in the current environment; helping families learn the language of learning will support ongoing connections. The Educational Endowment Foundation (2019) present four evidence-based recommendations to schools to support parental engagement in schooling:

• Critically review how you work with parents;
• Provide practical strategies to support learning at home;
• Tailor school communications to encourage positive dialogue about learning; and,
• Offer more sustained and intentional support where needed.

Vaugh and Caldwell (2017) suggest activities such as shared reading is effective with younger children; routines and encouragement for homework for older children. The more parents take on a surveillance role, however, the greater the negative effects. Transitions across levels of schooling can be significant, for example into the middle years where they are ‘reading to learn’, into high school settings, and out of high school.

Caution is needed about homework that undermines a student’s motivation and that leads to the student internalising incorrect routines. For too many students, homework reinforces that they cannot learn by themselves, and that they cannot do the schoolwork. So, ensure that it is task-oriented homework not deep learning and problem solving homework; that it can be done without the need for other’s expertise (do not depend on the parents), that the task is very clear so this does not interfere with the opportunity to practice, and make sure it is assessed back at school to show the student it was critical as part of the ongoing school learning.

Ensure ongoing Communication

Personalised school communications can improve children’s learning and attendance (Clinton et al., 2007). School needs to still be part of life in the early phases of the pandemic so that the transition back occurs smoothly. Subsequently, there is a need to continue school-home engagement, establishing connections between home and school environments to monitor and mitigate psychosocial issues. This communication between home and school needs to establish strong relationships that can be nurtured during the phases of recovery.
Support and professional learning for teachers is essential

Student health and wellbeing were improved when teachers were trained in the delivery of trauma-informed care such as psychosocial interventions, and when caregiver health and wellbeing was recognised and supported (Dybdahl, 2001; Ager et al., 2011; Berger & Gelkopf, 2009; Kostelny & Wessells, 2008). Specific psychosocial-informed programs appear to improve educational outcomes (Betancourt et al., 2014; Layne et al., 2008).

‘It is important to embed social and emotional learning through everyday classroom teaching. These skills should complement traditional academic areas through the learning process. For teachers, this means having the confidence to identify social and emotional needs of all their students, and having the skills and knowledge to respond and support. However, it should be seen as a system-level approach, not just the role of teachers. This would require system-based structures (i.e. health services) that can support students with more complex needs but also ensure alignment and coherence with what teachers can do within classrooms’.

Dawson & Quach (2020).

Train in-service and pre-service teachers in methodologies to help children deal with trauma. Supporting professional development opportunities for teachers should be identified, funded, and incorporated into medium-term strategic planning at the national, regional, and local levels. It is also important to remember that professional development is redundant if teachers’ wellbeing and welfare have not also been addressed. School staff may experience similar pandemic consequences whether or not they are parents, as negative impacts on their physical and mental wellbeing will also affect their students. Their influence is likely to be as great, if not more so, than parents, on students’ academic outcomes.

Further, higher staff turnover is common in these situations, along with general reductions in staff as a result of any school budget cuts (Mudavanhu, 2014). In the face of a natural disaster or a school trauma, school leaders can also face overwhelming shock and helplessness. Early identification if this occurs can benefit the whole school (McManus, 2005). Leaders are often asked to make some critical yet challenging decisions within a tight timeframe to minimise damages to the schools, teachers, families, and students. Currently, many schools around the country are engaging in building Professional Learning Communities to support teaching and teachers more generally. These existing structures provide a valuable place for teachers to discuss, learn and communicate ideas and challenges. Adding a focus for online PLCs that support practises on social and emotional learning, e-learning and supporting vulnerable students can only add value.
Provision of targeted content

‘What we should be doing for our most vulnerable Kids now and in recovery is making sure they are safe and ready to learn. The equity gaps are yawning caverns at this time in terms of preparedness, support and the technology needed to learn remotely. If there was ever a time when teachers needed to know where every student is and what they need to learn next this is it. We need knowledgeable teachers who understand assessment, intervention, differentiation and evaluation (acronym is AIDE) of learning and lesson design. We need to focus on what is important content and important practice and, in recovery, we particularly need to support those vulnerable students making schooling.’

Graham (2020)

Consider the investment in multiple forms of resources and modes for all.

Education providers and publishers are currently providing many free tools and resources to support educators. Topics such as online teaching and learning, social and emotional learning, and instructional technology are popular (Good eReader, 2020). The Education Week Market Brief suggests that ‘Curriculum providers need to recognize that many districts have come to see the value in open educational resources—particularly when they’re used for supplemental lessons. They have an appetite for open supplemental materials across different subjects and grade levels’.

There has been some discussion about building professional learning resources around social emotional learning, both for educators and resources for students and family. The Yale Center for Emotional Intelligence and CASEL (The Collaborative for Academic, Social, and Emotional Learning) in the US, recently launched a survey via a webinar to take the pulse of educators’ emotional health. In just over three days, more than 5,000 educators responded, reporting being anxious, fearful, worried, overwhelmed and sad (NEA today, The National Education Association, 2020). Parents are also requesting support materials. Hence, we now have an opportunity to reach out to parents and families with support materials that encourage their ongoing engagement in education and builds capacity. For example, online training packages, mobile phone snapshots and quizzes are utilised in several industries to connect and educate.

Learning content needs to be targeted towards numeracy, and literacy and language development in the early years, and consolidation of already covered material in later years.

There also needs to be an emphasis on curricula that equips students with effective psychosocial practices and social and emotional learning (SEL). This may include supporting teachers to deliver a range of targeted child-friendly learning experiences that emphasise health and wellbeing, i.e. sports, art, drama, music, games, storytelling.
Increase Digital inclusion

Consider a response that supports the immediate early relief and recovery need, but utilise the opportunity to increase digital access for the future. To address education equity and the digital divide, Gorski, P. (2005), suggests that low digital inclusion, or "digital divide" has traditionally described inequalities in access to computers and the Internet between groups of people based on one or more dimensions of social or cultural identity. However, Gorski, et.al., (2019) argue for a critical reconceptualisation of the "digital divide" and its relationship within education, arguing "access" should be fundamentally based not on physical access, but equity of access.

Resta and Laferrière (2017) report five key dimensions of interventions aimed at addressing digital equity:

1. Hardware and software connectivity
2. Meaningful and culturally relevant content (i.e. broad-based curriculum support)
3. Creating, sharing, and exchanging of digital content (i.e. interactive e-learning fostering community)
4. Educators who know how to use digital tools and resources (i.e. targeted teacher professional development delivered in private-public partnerships)
5. High quality research on the application of digital technologies (i.e. all practices carefully monitored and evaluated to inform decision makers on areas requiring improvement and support).

To address low digital inclusion, Livingstone and Helper (2007) note that while providing home Internet access can help alleviate relative socioeconomic disadvantage, it cannot overcome the relative disadvantage in terms of breadth and sophistication of Internet use. They highlighted the "digital divide" in terms of such disparity in use, noting that basic internet is typically associated with narrow, unadventurous use of the internet, while more the sophisticated facilitate broad ranging uses that are more likely to enable access to new opportunities and the realisation of individual and social goals.

Next steps: Building an evidence base: Evaluation assessments, monitoring data linking

Disasters are characteristically unforeseen, causing many studies to be reactive, with planned pre-post studies rarely available (Parker et al. 2019). Overwhelmingly in this space access to quality data and information is sparse, and the current crisis provides an opportunity to consider data linking measures as a means of understanding the needs of our vulnerable communities. We know little about how our education systems fare in such conditions. Hence, it is important to evaluate and monitor an education system’s capacity to adapt and innovate including their level of readiness for change, and their structural integrity to carry the load. Beyond the analysis of self-reported immediate behaviours and perceived risks, advancing disaster research and attaining key insights into effective recovery and response will require well-designed monitoring and evaluation with longitudinal assessment of individuals, i.e. vulnerable children, and communities “across the life-cycle of a disaster and across multiple disasters” (Parker et al. 2019).

Learning from the current events is a must, in particular as resourcing becomes scarce, we need more evidence targeted for effective and efficient responses. Utilising evidence to build preventive models for vulnerable children and families will assist in the new normal.
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