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Title Routes into and through higher education for care leavers in England

Submitter Dr. Neil Harrison

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Abstract

The term 'care leavers' is generally used to denote those young people who are in the care of their local authority at the age of 16, most commonly due to a history of neglect or abuse within their birth family. This group has very low educational attainment, with official figures suggesting that just 6% progress to HE by the age of 21, compared to 42% for the general population of young people. This paper will use national administrative data on the whole cohort of young people reaching the age of 16 in 2007/08 to examine the extent to which the disadvantages derived from the childhood trauma of care leavers is manifest in their likelihood of entering and completing HE in the subsequent seven years, compared to the general population. It will also consider the contributory impact of other demographic factors such as gender, ethnicity and disability.

Paper

In common with other developed nations, England provides a formal safety net for children who suffer (or are at risk of) serious neglect or abuse. Such 'children-in-care' are legally placed into the care of social workers within the local authority; most commonly they are cared for by paid foster parents, in children's homes or with their extended family, for anything from a few days to many years. Some remain in care into adolescence, being deemed 'care leavers' after the age of 16.

The prior experience of childhood trauma for children-in-care is often later associated with long-term emotional and mental health issues. Furthermore, their education is often disrupted by absences and frequent moves between carers and schools (Sebba et al, 2015). These elements interact and lead to educational outcomes that are significantly lower than their peers. For example, in 2015, only 18% achieved five GCSE passes at A* to C at 16, compared to 64% for the general population (DFE, 2016a). Care leavers therefore comprise one of the most educationally disadvantaged and marginalised groups.

Nevertheless, many care leavers do achieve highly and gain qualifications that make HE a viable ambition. Official data about care leavers in HE are limited and beset with definitional challenges, but it is estimated that there are currently 1,760 between the ages of 18 and 21 (DFE, 2016b). This equates to a participation rate of 6%; the comparable figure for young people in general is 42% (UCAS, 2015), once again underlining the disparity in educational outcomes.

Since the late 2000s, there has been significant policy interest in improving the educational outcomes for children-in-care (DfES, 2007) and progression into HE for care leavers (BIS, 2014). As a result, local authorities have increased the financial support provided, while most universities now also offer bursaries, admissions advice and other dedicated services. However, very little is known about the pathways that care leavers take towards, into and through HE. Jackson et al. (2005) found that care leavers in HE experienced a wide-range of practical and personal barriers to success, although they often demonstrated high levels of resilience and completed their degrees at similar rates to other students.

This paper will report results from the HERACLES (“Higher Education: Researching Around Care Leavers’ Entry and Success”) project, which was commissioned by the National Network for the Education of Care Leavers. The research questions addressed in this paper will be:

1. What are the social and educational attributes of care leavers who do enter HE and how do these compare to other students?
2. What risk factors influence whether care leavers are retained within HE and whether they successfully complete their degree?

The data were procured from the National Pupil Database and linked to those data held by the Higher Education Statistics Agency. This covered 650,220 individuals, of whom 6,471 were care leavers, and comprised background demographic data (e.g. gender, ethnicity, disability) and qualifications attained at 16. These data were supplemented by data tracking whether they later entered HE (from 2009/10 onwards), whether they completed their degree (up to 2014/15) and the degree classification received. The analysis focused on comparing the care leavers with the general population, primarily through the use of binary logistic regression.

In brief, it was found that around 12% of care leavers entered HE by the age of 23 – considerably higher than the previous estimates – but that they tended to take longer to enter than other young people. GCSE attainment was found to exert the greatest influence on whether care leavers later entered HE, with progression rates being similar to the general population at the higher levels of attainment. However, care leavers were much less likely than their peers to enter HE if they had poorer results, suggesting that there were fewer ‘second chance’ options available. Once GCSE attainment and demographic variables were accounted for, care leavers were around 15% less likely to progress than other young people.

The headline rate of withdrawal for care leavers was 18%, compared to 10% for the general population. However, once qualifications were taken into account, the disparity nearly disappeared, with academic failure being the most common reason for withdrawal. A similar pattern was found for degree classification, with care leavers achieving at a similar level to other students, all else being equal.

In conclusion, GCSE attainment was found to be the major driver of pathways into HE for both care leavers and other young people. Because of the personal and educational challenges resulting

from their childhood trauma, care leavers had significantly lower qualifications, on average, at 16 and this strongly influenced their ability to access HE. However, once in HE, care leavers had similar outcomes to other students with similar entry qualifications – although, as their qualifications were generally lower, they were more likely overall to withdraw or to receive a lower classification of degree. No other particular risk factors for care leavers were identified – while men and students from minority ethnic communities had lower outcomes, this was echoed in the general population. This analysis reinforces the importance of prior attainment for HE outcomes, while the paper will problematise the difficulties in raising attainment for care leavers and discuss the importance of alternative pathways into HE.

References

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