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Graduate Employment And Postgraduate Study Outcomes For Care-Experienced Students

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Abstract: Educational outcomes for care-experienced people (i.e. those who spent time in the care of their local authority as a child, usually due to neglect or abuse) are known to be significantly lower than for the general population and most other disadvantaged groups. This is due, in large part, to educational disruption and ongoing mental health issues. Nevertheless, in England, around 12% participate in higher education by the age of 23 and a similar proportion do so later in life.

This paper will use the national Destinations of Leavers from Higher Education dataset to explore what happens to those care-experienced students who complete their studies, with particular reference to graduate employment and postgraduate study. It will compare this group with the general population to reveal patterns in onward career trajectories and to determine whether their educational disadvantage continues beyond their undergraduate degree or is ameliorated by it.

Paper: In common with other countries, the UK offers a safety net for children whose birth families are not a position to care for them safely. There are around 80,000 young people 'in care' at any one time across a mixture of foster care, kinship care and residential care homes, with their time in care potentially lasting from several days to many years. Most children in care have experienced abuse or neglect, as well as other forms of severe educational disadvantage. Around 45% of children in care are believed to have mental health issues, often related to childhood trauma, while other forms of special educational need are also common (Department for Education and Skills, 2007).

Educational outcomes for this group are significantly below those for the general population. For example, just 18% achieve five good GCSE passes including English and mathematics, which is the threshold for immediate progression to qualifications that provide access to higher education; the equivalent figure in the general population is 59% (Department for Education, 2018). The reasons for this are complex and multidimensional, but include educational disruption, disability and low expectations from adults (Flynn, Tessier and Coulombe, 2013; Sebba *et al.*, 2015). Similar patterns are common across Europe (Cameron *et al.*, 2012).

Nevertheless, many care-experienced young people do find routes into higher education, although these are sometimes delayed or punctuated. In England, around 12% participate by the age of 23 (Harrison, 2017) – figures have not yet been calculated for the rest of the UK. This translates to around 7,000 students at any one time, therefore comprising slightly less 1% of the total student body (Harrison, in press). It is also known that care-experienced students have a significantly higher non-completion rate than other students, with around one-in-five leaving their course and not returning (Harrison, 2017). Care-experienced students have distinct patterns in course choice, being significantly over-represented in social work, social sciences and creative arts, but under-represented in science, technology and humanities (Harrison, in press).

What is not currently known is what happens to those care-experienced students who successfully graduate from higher education. Data are available to explore this issue and can be linked to demographic and educational data about graduates, including a marker for those who have self-identified as care-experienced. This provides the opportunity to compare the experiences of care-experienced students after graduation with the general population of graduates.

All students graduating from UK universities are surveyed around six months after the end of their course to identify what activities they are currently engaged in – whether work, further study, unemployment or other activities. This is known as the Destinations of Leavers from Higher Education (DLHE) dataset and it is made available to researchers on an anonymised basis. Furthermore, the DLHE data can be linked to other data held about students by the Higher Education Statistics Agency, including gender, age, ethnicity, subject studied, degree classification, former university and so on, providing a rich opportunity for multivariate analysis.

The 2016/17 DLHE survey data – the most recent available and last as the methodology is changing – will be used to underpin this paper. The response rate for UK graduates was 79% and the data is generally considered to be robust and representative of the graduate population. The total sample size is just under 250,000 graduates, of whom just over 1,500 have self-identified as being care-experienced. This paper, which is drawn from of a wider study of higher education outcomes for care-experienced students, will address the following research questions:

1. Are care-experienced graduates disadvantaged in the graduate labour market relative to other graduates, in terms of whether they have employment, their occupational status, their satisfaction and their income level?
2. Do care-experienced graduates have distinct patterns of employment relative to other graduates, for example, in terms of whether it is full/part-time or the sectors in which they work?
3. Are care-experienced graduates more or less likely than other graduates to pursue postgraduate study?

The paper will be empirically-driven and primarily quantitative in nature. The principal analytical approach used will be logistic regression (Field, 2017). This enables outcomes for care-experienced graduates to be compared with other graduates while holding a range of potential predictor variables constant and thereby seeking to isolate the specific contribution of care experience to overall outcomes, all else being equal. This is important as it is already known that care-experienced students are more likely to enter higher education with lower qualifications than average and to enter lower status universities (Harrison, in press), which are likely to impact directly on their

graduate outcomes. The quantitative results will be informed and enlivened by qualitative data and analysis from the wider project, including the voices of care-experienced students and graduates.

At the time of writing, analysis is ongoing. Early findings suggest that care-experienced graduates have surprisingly positive graduate outcomes (as measured by the DLHE at least) given the educational disruption and other disadvantages that they have generally experienced. In particular, they are somewhat more likely to go into further study than other graduates. Unemployment rates for care-experienced graduates are marginally higher than average and they are less likely to find themselves in 'professional' roles, but this is largely due to them having slightly lower degree attainment overall. There is evidence, however, that care-experienced students from minority ethnic communities have significantly lower outcomes than their peers.

These findings will be contextualised within a wider discussion about what constitute positive graduate outcomes and considers whether the ostensibly positive findings for care-experienced graduates may reflect a 'survivor effect' due to withdrawal before graduation, which is significantly higher among this group (Harrison, 2017).

The results will be relevant outside of the UK context as the concept of 'care' is shared by most countries, even if the configurations and practices differ. The UK is perhaps uniquely fortunate in having large-scale datasets that enable students, including those who are care-experienced, to be tracked longitudinally through higher education. The results from this study are therefore likely to be useful beyond the UK in terms of prompting new areas of enquiry.

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