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Making a home, finding a job: investigating early housing and employment outcomes for young people leaving care

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Abstract
This paper presents findings from a new study of outcomes for young people leaving care funded by the Department for Education and Skills. It reports findings for a sample of 106 young people in relation to progress made in housing and employment some 12-15 months after leaving care. The generally poor employment outcomes of care leavers are acknowledged, but ingredients that make for success are also highlighted, including the value of settled care and post care careers, sound career planning and, significantly, the value of delaying young people’s transitions from care. Early career paths also inter-connect with how young people fare in housing, in developing life skills and with other problems in their lives after leaving care. Housing outcomes were more encouraging, were pre-dominantly shaped by events after leaving care and faring well in housing was the factor most closely associated with positive mental well-being in young people. Some groups are identified that are at risk of faring badly, including young people with mental health problems, young people with persistent offending or substance misuse problems and, in some respects, young disabled people. The implications of these findings for leaving care services are considered.
The journey to adulthood for young people leaving public care is shaped by a number of factors that include the legacy of past parenting, their experiences of being looked after, the range of practical, educational and interpersonal skills they accumulate and the effects of broader social forces that serve to structure transitions for young people more generally. The purpose of this paper is to present findings from a recent study of early outcomes for young people leaving care in relation to two critical dimensions of transition, housing and employment. Making a home base and establishing a foothold in education, training or employment are important (though not exclusive) ingredients for a successful transition to adulthood. As this paper will show, they are also closely inter-related. Although housing is an understandable first priority for young people on leaving care, faring well in housing and employment are, in combination, not only mutually reinforcing but also relate positively to other aspects of young people’s health and well-being. However, the converse is also true. Many care leavers have faced problems of homelessness, unemployment and poverty on leaving care. Some groups of young people are especially vulnerable to poor outcomes in these domains and, as we shall see, are likely to need intensive remedial support from leaving care services to assist them back on to the housing and employment ladder.

Youth transitions and leaving care

Pathways to adulthood for most young people have tended to become more differentiated and challenging over recent decades. The decline in the youth labour market, the rapid growth of education and training, the shortage of affordable housing for young people and the development of welfare policies designed to deter young people from leaving home have created a more protracted context for the transition to adulthood and extended young people’s reliance on family support. Transitions have therefore tended to become more extended, less linear in shape, and the relationship between the different elements of transition - leaving home, acquiring
financial independence, gaining adult citizenship and family formation - have become less closely associated (Jones & Wallace 1992; Coles 1995; Furlong & Cartmel 1997). Modern transitions have therefore come to be viewed as involving greater discontinuity and risk and movement back and forth along the continuum towards greater adult independence (Furlong et al. 2003).

There is also evidence, however, of an increasing polarisation between the ‘extended’ transitions made by many young people and the ‘accelerated’ and riskier transitions made by those who leave school early (often lacking qualifications) to seek work, who leave the parental home or become parents while in their teens. These pathways to adulthood continue to be shaped by social class, gender, ethnicity and locality. However, given the restructuring of youth employment and housing markets, those making accelerated transitions are vulnerable to unemployment and homelessness. This transition pathway has come to be seen as problematic and has been the focus of much government attention in recent years (Bynner et al. 2002; Jones 2002).

Amongst those making an accelerated transition to adulthood are young people leaving the care of local authorities. Young people leave care at an earlier age than young people in the wider population tend to leave home, the vast majority at or before reaching 18 (Garnett 1992; Biehal et al. 1995). In addition to leaving early, studies have shown the degree to which the main elements of transition overlap. Learning to manage a new home, finding a place in the labour market and starting a family have tended to be compressed into the period soon after leaving care (Biehal et al. 1995; Stein 2004; Dixon & Stein 2005). In these respects, young people leaving care have been expected to shoulder a broader range of responsibilities at an earlier age than is common for their peers.
While some young people have gone on to do quite well after leaving care, others have struggled. Studies have consistently highlighted the economic disadvantages faced by care leavers. Only a minority have gained qualifications at school, most have failed to establish a stable pattern of education, training or work in the early years after care and, in consequence, the majority have continued to be financially dependent for some time after leaving (Cheung & Heath 1994; Biehal et al. 1995; Broad 1998; Courtney et al. 2005). Studies have also shown that young people face a heightened risk of homelessness relatively soon after leaving care (Biehal & Wade 1999; Dixon & Stein 2005). Given these transition patterns, the presence of a network of formal and informal support is likely to be important for young people. However, evidence has suggested that consistent support from families was often lacking (Biehal & Wade 1996) and that, while around one third of foster carers continued to provide help (Fry 1992; Wade 1997), professional support from social workers tended to decline in the period after leaving care (Garnett 1992; Biehal et al. 1995).

Growing awareness of these problems fostered the steady growth of specialist leaving care services and the leaving care provisions of the Children Act 1989 (s24), though largely permissive, provided a stimulus to these developments in the 1990s (Stein & Wade 2000). Evidence from research and inspections suggested that specialist services tended to make a helpful contribution to the co-ordination and development of leaving care policies and services, to the provision of direct and age appropriate support to young people and to the outcomes achieved by them, especially in relation to housing, life skills and financial support. However, these developments were uneven and were associated with considerable variation in the services provided to young people both within and between local authorities (Biehal et al. 1995; Department of Health 1997; Broad 1998).
The introduction of the Children (Leaving Care) Act 2000 (CLCA 2000) was designed to tackle this pattern of inconsistency. The objectives of the new legislation were to delay young people’s transitions, improve the preparation, planning and support for leaving care and to create more consistent arrangements for financial support. Local authorities acquired new duties to assess and meet the needs of ‘eligible’ young people, including the financial needs of those aged 16 or 17, and to provide each young person with a pathway plan and a personal adviser to co-ordinate a support package through to the age of 21 - or beyond if continuing in education (Department of Health 2001). The legislation is intended to bring about major changes to the landscape of leaving care and, in so doing, to ameliorate the worst risks associated with an accelerated transition to adulthood for this group of young people.

The study design

It was in this context that we undertook a study exploring patterns of outcome and service costs for a sample of 106 young people who left the care of seven local authorities in England.¹ The study aimed to trace young people’s early experiences of transition, identify factors in young people’s past or present experiences that tended to be protective or create risks for successful transition, assess the ways in which support from professionals, families or friends helped young people to achieve more positive outcomes and to identify the cost of leaving care services and factors that related to high or low costs of care. At a broader level, we were also interested in understanding how leaving care work was changing in response to these new legislative challenges and with what effects.

¹ The authors would like to acknowledge the important contribution made by other members of the research team: Sarah Byford (Institute of Psychiatry, University of London), Helen Weatherly (Centre for Health Economics, University of York) and Jenny Lee (SWRDU, University of York). Sarah and Helen had primary responsibility for the design, analysis and write up of the economic study, the findings from which are not reported here.
Baseline interviews were conducted with young people on average two to three months after leaving care and were repeated nine to ten months later. Parallel information was collected from their personal advisers. Complete information was available on 101 young people at follow-up. At baseline, information was gathered on young people’s care careers, preparation, transitional support arrangements and initial post-care outcomes. Follow-up interviews centred on subsequent progress in key life areas (housing, education and training, health and well-being, offending and substance use), the support available from family, friends and carers and the use made of professional support services. Young people completed two standardised assessments at baseline and follow-up. The General Health Questionnaire (GHQ-12) was used to assess changes in mental well-being over the follow-up period (Goldberg & Williams 1988) and, as a measure of subjective well-being or quality of life, sections of the Lancashire Quality of Life Profile were used, incorporating Cantril’s Ladder and the Life Satisfaction Scale (Oliver et al. 1996; Huxley et al. 2001).

With the exception of one young person aged 20, all others were aged 16-18 when recruited to the research. Just over one half of the young people (53%) were female, one quarter were from minority ethnic backgrounds (25%), more than two fifths of the sample (44%) were considered by practitioners to have some form of mental health, emotional or behavioural difficulty (44%) and 17% were considered to have a sensory, physical or learning impairment. The majority of young people (69%) had last entered care as teenagers, although more than two fifths (43%) had been looked after for five or more years. Placement movement was a common experience for many young people. While 27% of young people had made no moves during their last period of care, more than one third (37%) had moved four or more times. Finally, and irrespective of whether young people were still formally looked after, three quarters (75%) had moved on from their final care placement before reaching 18.
Some features of the study design create limitations that should be made explicit. First, the seven local authorities selected for the study all had well established leaving care services. This suited the purpose of the study – to understand more about the kinds of services that could make a positive difference to young people’s lives. However, it does mean that the findings should not be viewed as representative of the state of leaving care services across England as a whole, throughout which there is considerable variation (Broad 2003). Second, the study provides a sharp focus on the early stages of transition. A longer follow-up might lead to a different perspective on young people’s lives and, as such, the findings on intermediate outcomes should be viewed as indicative of the initial progress being made by young people on their journey to adulthood.

**Housing**

During the 1980s, concern about the incidence of homelessness amongst care leavers was a major factor contributing to the emergence of specialist leaving care services (Stein 2004). The development of accommodation options for care leavers, although uneven across the country, has been both an area of considerable success and of enduring frustration for service providers (Broad 1998; Stein & Wade 2000; Broad 2003). The findings for our participating local authorities were generally encouraging, even though young people’s early housing careers were often difficult and significant problems existed in relation to the supply, quality and location of accommodation.

**Housing patterns**

At the follow-up interview, some 12-15 months after leaving care, young people’s housing circumstances were varied. Almost one third (31%) were living in independent housing, mostly council tenancies, almost two fifths (38%) were living in
supported accommodation, 14% were living with family members, 6% were continuing to live with a foster carer after formal discharge from care and a further 12% were living in ‘other’ settings. These ‘other’ settings mainly comprised temporary and often unstable living situations, including stays with friends or acquaintances, in bed and breakfast accommodation, in custody or in privately rented flats.

Those living in supported accommodation were staying in a variety of settings, including supported lodgings, hostels and foyers, independent housing with floating support and trainer flats. Supported accommodation may provide young people with an opportunity to strengthen their skills for independent living and to make a stepped transition to greater independence. It was therefore encouraging to find that supported accommodation was more likely to have been used in this way for some potentially vulnerable groups of young people, including those leaving residential care (p<0.01; n=106), those with mental health, emotional or behavioural difficulties (p=0.03; n=106), those leaving at a younger age (p<0.001; n=106) and, to a lesser extent, those with weaker life and social skills (p=0.07; n=102). However there was no evidence of this being the case for young disabled people, some of whom subsequently struggled to cope with independent living, and the use of supported accommodation also appeared to vary considerably across the authorities, ranging from 22% to 83% of young people in different areas living in these forms of accommodation at follow-up (p<0.01; n=101).

Studies have pointed to the high housing mobility experienced by young people leaving care (Biehal et al. 1999; Pinkerton & McCrea 1999; Dixon & Stein 2005). Of course, some mobility in the early housing careers of young people is to be expected. Young people may move to study or to find a job, to be closer to their families or to set up home with a partner. Young people in the general population often move
upwards to better quality or more secure forms of accommodation during this phase of their lives. However, movement may also be for negative reasons and it is movement in these circumstances that carries a greater risk of homelessness (Jones 1995).

Almost two thirds of the young people (64%) had either stayed in the same accommodation or had just made one move since leaving care. The vast majority of these moves, which were to permanent tenancies or to various forms of supported accommodation, were for positive reasons. However, just over one third of the young people had made two or more moves, almost one in five (18%) had moved four or more times and over one third (35%) had experienced homelessness at some stage after leaving care.

The likelihood of young people experiencing movement and instability after leaving care was not greatly associated with the pattern of young people’s care careers, apart from a marginal association with placement movement (p=0.06; n=101). However, it was significantly higher for young people with mental health, emotional or behavioural difficulties (p<0.01; n=101) and for young people who had experienced a number of problems in their lives. From both the perspective of young people and workers, involvement in running away (p<0.01; n=106), offending (p<0.01; n=106) and substance misuse (p<0.001; n=106) were associated with higher levels of post-care movement. Furthermore, where this pattern of instability continued over the follow-up period, it was associated with young people having a poor housing outcome at the follow-up interview (p=0.01; n=101).

These findings link quite closely to research on young runaways. Going missing from substitute care, especially where this becomes a repeat pattern, tends to be associated with involvement in offending, substance misuse and with truancy and
exclusion from school (Wade et al. 1998). In a sense, it can lead to a gradual process of detachment that may leave young people less equipped to manage independently as young adults. Running away in the general population is also recognised as a precursor to adult homelessness (Simons & Whitbeck 1991; Craig et al. 1996). Taken together, these findings suggest that particular attention should be paid when these issues cluster together in a young people’s life since, not only is it likely to unsettle them at the time, it may also lead to greater adjustment problems on leaving care.

**Housing outcomes**

Housing outcome at baseline and follow-up was assessed using a measure that combined the views of young people and workers about a) the suitability of a young person’s accommodation and b) their ability to manage in their homes at that time. Where both assessments were positive, this was rated a ‘good’ outcome. Where one was rated positive and the other negative, this constituted a ‘fair’ outcome. Where both were rated negatively, this was considered a ‘poor’ outcome.

In overall terms, the findings were encouraging. At the follow-up interviews, over one half of the young people (56%) were considered to have a ‘good’ housing outcome and almost one third (31%) a ‘fair’ outcome. Furthermore, virtually all of the young people (93%) acknowledged having received support in this area since leaving care and, at follow-up, three quarters (74%) were living in accommodation that was considered suitable for their needs at that time. More than four in five young people (86%) reported that they had received help with finding somewhere to live and almost two thirds (64%) that they had been helped to look after their homes more effectively.

Housing emerged as a critical area for leaving care services, one in which positive post-care interventions could (and should) make a substantial difference to young
people’s early housing careers and to their overall sense of well-being. How young people fared in housing was not greatly associated with past events in their lives, such as the contours of their care careers, and was more closely linked to life events after leaving care. For example, housing outcomes at follow-up were not associated with length of time looked after, placement movement, age at leaving care or with troubles young people may have experienced while they were looked after (offending, substance misuse, running away or school non-attendance). Nor were they greatly associated with young people’s circumstances soon after leaving care at the baseline interview. Even where young people had experienced brief periods of homelessness after leaving care (and many did so), this was not directly associated with a poorer outcome (unless that pattern of instability continued). Previous research has found that leaving care services have tended to concentrate resources on young people with relatively unstable early housing careers (Biehal et al. 1995), and the lack of association between homelessness and outcome at follow-up is likely to reflect the availability of support systems to help young people back on to the housing ladder in these local authorities.

A positive housing outcome at follow-up was, however, much more closely linked to other facets of young people’s lives at that time. Where young people had not committed offences during the follow-up period (p=0.02; n=101) or had problems with substance misuse (p=0.02; n=101) and were not experiencing these difficulties at follow-up, where they were engaged in education, training or work (p<0.001; n=91) and, from a worker perspective, where they were considered to have strong life and social skills (p<0.001; n=99), they were also likely to be faring better in their homes. Where young people were managing well in their homes, this brought wider benefits, since a positive housing outcome was also connected to young people having a
more positive appreciation of their mental health (GHQ-12, p<0.001; \( \tau +.306, n=101 \))
and of their overall well-being (Cantril’s Ladder, p=0.03; \( \tau -.175; n=101 \)).

Taken as a whole, these findings point to the potential for a virtuous circle to be established and also point to the reciprocal relationship between different spheres of young people’s lives. Where young people have the skills to manage well in accommodation that is suitable to their needs at the time, are free of serious troubles and where they are positively engaged in education, training or work, they are also more likely to have a positive appreciation of their mental well-being. However, the converse is probably also true and it is likely that a major crisis in one sphere of a young person’s life may threaten their coping abilities in others. Providing young people with decent housing (a major challenge in itself) is therefore likely to be insufficient and support for housing needs to be situated in the context of a comprehensive package of leaving care support that addresses young people’s needs as a whole and strengthens their resilience to the adverse effects of difficulties that may arise in different life domains (Gilligan 2001; Stein 2005).

Housing emerged as the life area most closely associated with mental well-being, outstripping the contribution made by involvement in education and training. From the perspective of young people, therefore, making a home and a successful home life is an understandable first priority when making the journey from care to adulthood. However, some groups of young people were at risk of faring less well. In particular, young people with a broad range of mental health, emotional or behavioural difficulties (p<0.001; n=101), young disabled people making the transition to independence (p<0.01; n=101) and those who experienced a continuing pattern of housing instability after leaving care (p=0.01; n=101) were particularly vulnerable to poor housing outcomes at follow-up. The specific needs of these
groups of young people should therefore receive particular attention during the pathway planning process to reduce the risk of later homelessness.

**Developing accommodation resources**

Although there were differing levels and types of accommodation resources in our participating local authorities, all had invested quite heavily in improving these resources. Specialist leaving care services have been shown to be successful in developing a broad range of supported and independent accommodation options for young people leaving care (Broad 1998; Biehal & Wade 1999; Stein and Wade 2000). This cumulative evidence suggests that strategies to improve housing outcomes for young people require a number of inter-related elements. First, planned investment over time is necessary to improve the range of accommodation resources to meet the differing needs and choices of young people. Second, this investment is likely to be enhanced through the development of formal protocols and partnerships with local housing providers to audit needs, plan developments and provide for joint assessments. Third, the provision of good quality accommodation, by itself, is unlikely to work unless there is a finance and support package in place that is sufficiently comprehensive to enable young people to manage their homes and their wider lives successfully.

The participating local authorities faced many difficulties. District housing policies were highly variable and affected young people’s ability to access social housing. Shortages in the overall supply and quality of housing meant that some young people had to be placed far from their networks of support, while others were placed in areas that were unsafe for them or in circumstances that ultimately threatened their tenancies. In addition, a major concern centred on the shortage of appropriate accommodation for young people with complex or higher support needs - including young people with mental health problems, young disabled people not meeting the
threshold for adult services, persistent offenders and young people with drug dependencies. As we have seen, these groups of young people are particularly vulnerable to poor housing outcomes. It is right that their needs should be a focus of concern and these may need to be addressed through further investment in housing partnerships aimed at developing an improved range of higher intensity or more specialist supported accommodation options.

**Employment careers**

The literature on leaving care has painted a consistent picture of the poor educational attainment and economic participation of formerly looked after young people (Stein & Carey 1986; Cheung & Heath 1994; Cook 1994; Biehal et al. 1995; Broad 1998; Courtney et al. 2005; Dixon & Stein 2005). Not only do young people entering the care system do so with considerable (and often long lasting) educational deficits, but also the experience of being looked after has too often failed to provide adequate compensation for these (Social Exclusion Unit 2003). Government statistics on care leavers do point to a very slow but steady improvement in the numbers attaining some qualifications at the point of leaving care. Data for the year 2002-2003, for example, suggest that 54% of care leavers aged 16 or over left care without any formal qualifications compared to 66% in 1999-2000. However, the contrast with patterns in the general population of young people remains striking since, for the relevant year, just 5% failed to obtain any qualifications (Department for Education and Skills 2003).

**Early career patterns**

The legacy of poor educational attainment is apparent in the high rates of unemployment amongst care leavers (Biehal et al. 1995; Broad 1998; Pinkerton & McCrea 1999; Dixon & Stein 2005). There is also evidence that this legacy from care may last long into adulthood (Cheung & Heath 1994). Research has also pointed to
the late teenage years as a critical period in which young people's career paths become more firmly fixed (Banks et al. 1992; Jones 2002). The failure of care leavers to participate fully in the expansion of further and higher education has made improvements in economic participation a significant priority for Government and the development of pathway planning under the CLCA 2000 is intended to be an important vehicle for delivering improved outcomes.

At the follow-up interview, 12-15 months after leaving care, it was not surprising to find that many young people were struggling to establish a foothold in education, training or employment. Over two fifths (44%) were unemployed, just under one quarter (23%) were engaged in full-time or part-time education, very few were involved in training schemes (6%) and opportunities for permanent or casual work were limited (13%). A further 8% of young people were caring for a child and the destinations of the remaining young people were unknown. Over the follow-up period, economic pathways were also marked by considerable fluidity, with more than two fifths (43%) changing career status as young people moved in and out of education, training or work.

The expansion of further education has encouraged greater involvement by young people leaving care and, at the baseline interview, some 35% of young people were in education placements. This is considerably higher than figures reported in past studies (Biehal et al. 1995; Broad 1998) and consistent with one recent survey of leaving care services that also recorded an increase in participation, rising from 19% of care leavers in 1994 to 31% in 2003 (Broad 2003). However, as the decline in numbers participating at follow-up (23%) suggest, sustaining young people’s involvement is a challenge. Young people dropped out of education and training placements through financial difficulties, through being placed on courses unsuited to their abilities or interests, through personal or emotional difficulties in their lives or
through lack of support and encouragement to maintain motivation. Their lack of qualifications was reflected in the limited range of courses and work experience placements they were often able to access. Only just over one in ten were studying for GCSE A levels and only one young person had entered university, a finding consistent with other research on access to higher education for care leavers (Jackson et al. 2003).

**Career outcomes**

A measure of career outcome for use in baseline and follow-up interviews was constructed that combined a) the young person’s education, training or employment status with b) assessments by workers of the young person’s attendance and progress. Where the young person was economically active and the progress measure was rated as positive, this was considered a ‘good’ outcome. If either was rated negatively, this was considered to be a ‘poor’ outcome. On this basis, slightly less than one half of the young people (47%) were rated as having a ‘good’ outcome at follow-up. Parents whose main activity was caring for their child were excluded from this analysis.

Young people with mental health, emotional or behavioural difficulties were more than twice as likely as other young people to have a poor career outcome at follow-up (p<0.01; n=91). A positive outcome was associated with young people having experienced a relatively stable care career (p=0.04; n=91) and fewer moves after leaving care (p<0.01; n=91), with a good housing outcome at follow-up, strong life and social skills (p=0.03; n=88) and freedom from significant troubles, such as offending (p<0.01; n=91) and, to a lesser extent, substance misuse (p=0.05; n=91). Although a positive outcome was also associated with young people having a more positive sense of mental well-being, once account was taken of how young people were faring in housing this association ceased to have significance. This suggests
that the link between purposeful economic activity and mental well-being is probably mediated through housing and that housing may be a greater priority for many young people. It may also reflect a greater ambivalence amongst young people about the type of education and training options that were open to them and the immediate value of these for their lives.

Events after leaving care were therefore quite closely associated with the ability of young people to access and sustain involvement in education, training and work and, as such, provide considerable scope for interventions to help young people shape their early careers. In this context, there was some evidence that targeted careers support by professionals was associated with a better career outcome. The majority of young people (65%) who reported that they had received specific careers help (from whatever source) had either maintained good outcomes over the follow-up period or had made progress from relatively poor starting points ($p=0.01; n=85$).

However, the one care career factor most closely associated with career outcome at follow-up was age at leaving care ($p=0.01; n=91$). Almost three quarters (73%) of those who left care aged 18 or over were economically active at follow-up compared to around one third of those who left aged 16 (33%) or 17 (32%). This association held true even when account was taken of other care career factors associated with young people leaving at an earlier age – including placement movement, length of time looked after and significant challenging behaviours (offending, running away, substance misuse). Leaving care early was therefore associated with young people being at greater risk of unemployment some 12 to 15 months later.

It may be that those who left early were amongst those least equipped to negotiate entry into competitive youth labour markets, that less time and support was available to make up for past educational deficits associated with their history of maltreatment.
It is also likely that the challenges inherent in negotiating the transition to independence at such a young age and with limited support systems made a successful entry to the world of work and study more difficult to achieve. These findings are broadly consistent with earlier UK research that found that those who launched successful early careers were more likely to have done so from the shelter of supported accommodation – with foster carers or while living in supported lodgings or hostels (Biehal et al. 1995). They are also consistent with recent work from the USA that shows significantly better educational outcomes at age 19 for those who continued to live in stable foster care when compared to those who had left at an earlier age (Courtney et al. 2005).

The CLCA 2000 acknowledges the importance of delaying young people’s transitions from care. However, the opportunity for young people to stay on with foster carers beyond the age of majority has been rare. At baseline, around one quarter (24%) of young people with a last placement in foster care were continuing to live there after formal discharge from care on reaching 18. This is an improvement on data for earlier samples of care leavers (Fry 1992; Wade 1997). At follow-up, however, the proportion had reduced to six percent. Staying on, while it provided valuable breathing space to plan a more effective transition, therefore tended to be a relatively short term experience that did not provide an alternative home base for young people into adulthood, one that might enable them to stabilise their education and employment careers before moving on.

Career planning

Strategies to improve the economic participation of care leavers have, in the past, tended to receive less priority from leaving care services than have service developments in housing, finance and life skills (Biehal et al. 1995; Department of Health 1997; Broad 1998; Stein & Wade 2000). This was also the case for the local
authorities that participated in this study. However, there were important developments taking place that offer greater promise for the future. There was evidence of an increase in joint working across agencies to seek solutions. In some areas these working relationships were informal while, in others, multi-agency steering groups had been established to stimulate change, to co-ordinate access to education and employment and to monitor local outcomes. Resources had also been utilised to recruit or second Connexions or in-house employment staff to provide a specialist input to the work of social work teams. Most of the local authorities had developed financial incentives schemes to encourage young people’s participation in education, training or work and ‘employability’ and mentoring projects were being developed to widen young people’s access to work experience placements and to support their endeavours.

Developments of this kind are important and are emerging on a larger scale (Broad 2003; Hai & Williams 2004). However, interventions at the time of leaving care are made more difficult if the foundations for career planning are not laid while young people are looked after. Many young people leave care lacking skills, confidence, qualifications and, in some instances, motivation. They need help to identify their strengths and weaknesses and to prepare them for the world of work. Getting young people onto a course or training scheme is unlikely to work if it is not consistent with what young people want for themselves and many engaged in a cycle of placements that they felt unable to complete. It is therefore important that, as part of pathway planning, each young person is able to develop a career plan that looks into the future and provides them with a positive sense of direction. Continuing financial and emotional support is necessary to help young people maintain direction (or to regain it if they are buffeted by periods of emotional turbulence) and the connections between economic participation, stable housing, life skills and troubles also highlight
the need for career planning to be envisaged as part of a comprehensive package of leaving care support.

**Conclusion**

At a time when normative patterns of transition have become extended, young people leaving care are amongst those groups who make an accelerated transition to adulthood. Furthermore, the risks associated with ‘fast track’ transitions may be accentuated by the limited degree to which care leavers can rely on consistent support from their families to help them negotiate these changes (Biehal & Wade 1996; Stein 2005). In this unfavourable context, the fact that many young people fare quite well reflects both their resilience and resourcefulness and improvements in the delivery of leaving care services to assist them.

Steady progress had been made in the participating authorities and this was reflected in generally positive housing outcomes at follow-up and in the gradual improvement in post-16 educational participation. However, this is unlikely to reflect the national state of leaving care work as a whole, throughout which there is likely to be considerable variation (Broad 2003). Local authorities that were well positioned to respond to the challenges of the CLCA 2000, as these authorities tended to be, are likely to continue developing faster than those who were starting from a low service base.

Some groups of young people appear vulnerable to difficulties on leaving care. In particular, young people with mental health, emotional or behavioural difficulties appear to fare badly and, in some important respects, this also applies to young disabled people and young people with persistent offending or substance misuse problems. In many respects, these young people were not ready to leave care when they did. These groups are likely to require support packages of higher intensity,
perhaps including access to more specialist supported accommodation options. Greater attention should be given to their needs at the pathway planning stage, involving much closer and more consistent collaboration between agencies to ensure that they do not miss out, and long-term support to enable them to manage their lives more successfully in the community.

What can be achieved at the leaving care stage is influenced by what has gone before. Cumulative research evidence has demonstrated the inter-connectedness between care and aftercare. How young people fare after they leave is, at least in part, shaped by previous experiences in placements, in schools and in their family and social lives. Improvements in these experiences while young people are looked after - especially by providing more stable environments in which young people can develop appropriate attachments to home, carers and school - are likely to make the adjustments necessary on leaving easier to achieve. Stability – both while in-care and after leaving – allied to sound support for career planning were factors that helped young people to launch successful early careers. In addition, delaying young people’s transitions from care beyond the age of majority may also offer them greater opportunity to make up for past educational deficits and to establish a foothold in education or employment before leaving.

However, our evidence also suggests that life after care is not pre-determined by these past events and there is considerable scope for positive intervention. Even where young people experience unsettled careers in the initial period after leaving, all is not lost. As we have seen, how young people fared in housing and how they felt about their mental health and well-being was, for many, influenced more by current rather than past events in their lives. Like all of us, young people experience life as inter-connected. What happens in one sphere of life has implications for others, whether for good or for ill. Where leaving care services take account of this inter-
connectedness by providing comprehensive packages of support that address young people’s needs as a whole, it is possible to make a substantive and positive difference to their lives.
References


Department of Health, (1997) *'When Leaving Home is also Leaving Care': An Inspection of Services for Young People Leaving Care*. Social Services Inspectorate, Department of Health, London.


