

Young People from a Public Care Background: establishing a Baseline of Attainment and Progression beyond Compulsory Schooling in Five EU countries¹

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For more detail, the individual country reports on Work Packages 3 and 4 can be found on the YiPPEE website: <http://tcru.ioe.ac.uk/yippee>

A note on terminology

In Denmark and Sweden, children in out of home care are the responsibility of social services; in Spain and Hungary this is called the child protection service; in England they are 'looked after' by local authority children's services. To avoid tedious repetition we have used the term current in the country in question throughout this report.

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Executive Summary

Introduction

This consolidated report forms part of a study of the educational pathways of young people who have been in public care during all or part of their childhoods. The general objectives of the YIPPEE project are to investigate access to post-compulsory education among young men and women from a public care background in five EU countries and to use the research findings to consider how more of these young people can be retained in education after the end of obligatory schooling. The first Consolidated Report was a state of the art review of the literature (available at <http://tcru.ioe.ac.uk/yippee>). This second report is focused on available data in each partner country, compiled from national reports, with the aim of establishing a baseline to provide a possibility of cross-national comparisons and assessment of progress.

The partner countries represented in the YIPPEE project are: Denmark, Hungary, Spain, Sweden and the UK (England). When the project was designed, the team anticipated that official statistical data would probably be very limited, even non-existent in some of the partner countries. Therefore, we planned to supplement the best available statistics with data from other sources, both quantitative and qualitative, with the managers of post-care services seen as key informants.

Chapter 1 - Goals and method

The goal of identifying a baseline of educational participation among children in care in each partner country was difficult to achieve. Each country has a national system of statistics accounting, on the one hand, for how many children and young people are in educational programmes and, on the other, how many are in the care system (the welfare system or child protection system, depending on the terminology in each country). However, a crosstab of these two kinds of information is not possible. Of the five partner countries, only the UK routinely collects data on the educational participation of children in care and even here there are limitations.

Child protection and welfare systems differ significantly between countries and therefore cross-country comparisons can only be made with caution. That is also the case for educational systems. While Hungary and Spain retain more 15-19 year olds in education, proportionally above the EU mean, Denmark and Spain do so in the range of 20-29 year olds. On the other hand, the Scandinavian countries clearly include a higher proportion of young

people in the care system, while the Spanish and the English systems are more residual systems which only admit the most serious cases. The investment of resources in the Scandinavian countries is higher and therefore their systems have more 'capacity' to reach cases - however that does not mean that 'collapsed' or residual systems really have fewer young people in need of care and protection; many are simply not included in the system (Casas, 1993; 1999).

Because there are important national variations in the way care systems and educational systems are organised in the partner countries, different research procedures were necessary to obtain the best data possible about the educational pathways and achievements of young people in and after care. Sources of information and procedures needed to obtain data have proved to be country specific and rather different. Little information is strictly comparable between countries. This means that, in practice, we have five different approaches to the object of our study - the national context determines both the available data and the available sources of information.

Chapter 2 - National level data

Quantitative information related to the topic of our research is extremely limited. Only two of the countries (UK and Denmark) routinely collect such data. In a third country (Sweden) important and relevant accessible databases have been identified. However, in all three countries it has been difficult to secure permission for secondary analysis of available data and this has involved protracted negotiations. After working with data obtained from these sources, very different outcomes have been reached in each country.

Only two countries (UK and DK) have been able to obtain some data sets. The UK data gives grounds for modest optimism. The existence of leaving care teams and policy direction in relation to participation in education has raised the educational attainment of young people in care quite significantly after only eight years. However, their qualifications still fall far below overall population means.

We have identified a few apparently simple figures that may be easy to obtain in all countries, and could constitute a powerful information base. However, in practice, to make them comparable across countries would be very challenging. It would be possible if we had figures that would allow us to compare the educational progress of the overall child population in each country with its own in-care population, starting with 16 year olds and following on, year by year. This could be considered a first step towards obtaining

equivalent data from different countries.

Compulsory education ends at 16 in four of the five partner countries, the exception being Hungary where the school-leaving age is 18. At present, available data for the population in care refers to different samples, at different ages, and is obtained following different procedures. However, on the basis of the best available data we estimate that only around half of children in care finish compulsory education at the expected age in the partner countries. Thus, at the age of 16, a high proportion of looked after children are already in a highly disadvantaged situation compared to the overall population.

Moreover, as soon as they leave care they will have other major priorities in life - to find a job, to get money for subsistence and to pay for accommodation - which will mean many new obstacles to continuing education, even for those who showed some educational promise at the age of 16.

Chapter 3 - What happens after age 18: sources of information

Although the official age of leaving care is in principle 18 years old in all five partner countries studied in this project, after-care procedures and services are different in each of the countries, linked to the different social agents involved, and resulting in differences in accessibility for the researchers.

In Hungary the post-care services are joined together with the child protection agencies. Services are in contact with young adults (19-24/25 years of age) who still remain in care (about 4,000 in all), and with those who have left the system but requested after care services (about 800). In two countries (Denmark and Sweden) these services are absorbed into general social services for the overall population. According to Danish research, in 2006, just 14% of the young people in care were provided with further support after leaving care at the age of 18 (Ankestyrelsen, 2008) and therefore this is the only accessible research sample. In Catalonia (Spain) a specialised and centralised agency gives support to a proportion of young people, estimated to be between 40 and 50% of the population previously in care. In the UK all local authorities have leaving care teams which are supposed to be in contact with all of the young people who were in care up to the age of 19, but there are wide differences between local areas in the extent to which this aim is achieved.

In order to obtain complementary quantitative data, and also additional qualitative information, we interviewed, or collected data from, a sample of key managers in social

services agencies, about policies and practices relating to educational achievements and pathways of young people. The research procedure followed country-specific routes and, as a result, we have managers whose remits differ, and who follow national legislation and procedures that vary. Moreover, the possibility of accessing young people leaving care was limited to those who received some kind of support and were therefore still in contact with services. It should be noted that this probably results in a biased sample but was the only way that research participants could be identified.

Chapter 4 - Information provided by managers on participation rates and pathways

In Denmark, five interviews with group leaders responsible for children and young people in care from five municipalities revealed that few, if any, young people had gone to university.

In Hungary, data was collected from all 20 child protection agencies. Agencies are not required to collect information about the educational careers of children and young people and so data was not always available but they tended to keep records from school. Estimates are that six percent of young people from public care go on to higher education and about 75 percent of this group attend some form of education or training. Studying or working is a condition attached to post-care accommodation and we were told that some care leavers may enrol on courses for that purpose without really being committed to study.

In Catalonia (Spain) 13 face-to-face interviews were conducted with managers of various services responsible for young people.

In Sweden, telephone interviews with 111 managers in 75 local authorities found that, while nearly all managers thought education was important, there were very few specific programmes or initiatives in place to support young people's participation in post-compulsory education. Managers did not have information about the educational progress of their former clients.

In England, 150 local authority leaving care teams were contacted, but only 38 responded with sufficient information to be included in the survey, and some of this was partial coverage. Within these constraints, on average, around nine percent of young people who had been in public care were attending university, and about 45 percent were in some form of post compulsory education. This is a recent and striking improvement: in 2003 the official estimate was that just one care leaver in a hundred attended university degree programmes.

Chapter 5 - Facilitators and obstacles

A major theme of the research is to identify factors that help and hinder young people's educational participation and progress. Managers' responses to this question in Denmark underlined social problems and a lack of a tradition of going to higher education in the young people's birth families. They said that schooling was not a priority when social workers considered a placement, and that administrative divisions (such as between adult and youth departments) created a barrier to thinking about education within welfare departments. Improvement might be achieved by addressing the recognised barriers, encouraging close and on-going contact with the young people, and raising awareness of the significant role played by schools in showing a greater understanding of the position of young people in care and finding ways to support them.

In Hungary, two main barriers to participation in higher education were identified as the presence of multiple psycho-social difficulties in children's lives by the time they enter care at the age of 12 -14; and the fact that income from earnings were more highly valued than studying. Managers identified the following as potential facilitators: better emotional support during years spent in care and in school; and financial support to enable care leavers to access university.

In Spain (Catalonia), substantial improvements were thought to be needed to encourage continuing into further and higher education. In the educational system increased facilities were needed, as well as a more flexible approach and support given to looked after children. Managers emphasised the need to increase financial and social support given to young people in order to make it feasible for them to focus on their educational careers like a majority of other young people in the same society.

In Sweden, the managers' interviews produced rather limited knowledge of factors related to the educational system as such. They commented on schools in general, and their failure to support children with special needs and social problems. Exclusion of children with learning difficulties is perceived as a problem, which could result in children and young people becoming alienated and less interested in education. The need for early intervention in school is emphasised. There is also a general perception of a need for cooperation between school and social services.

More specifically, in Sweden, there is a so-called 'tug-of-war' between schools and social services which was identified as a tangible problem for children and young people in care.

There are disagreements as to whether schools or social services should be responsible for extra support to young people in care and this may prevent them from receiving adequate support, and diminish their potential educational achievements whilst in care.

In the UK, a range of factors appeared to be common among those who were successfully participating in education, including individual characteristics, strong support networks, community and cultural influences, institutional practices, public policies, professional practices and stability of placements.

The reports of managers in the five countries studied seem to address either similar or complementary challenges that need to be faced in order to improve action to increase participation in higher and further education among young people leaving care. Although the political, legal, historical and organizational context is different in each country, it is evident that many underlying social dynamics are sufficiently similar to share common goals. Action should be taken with an integrated approach, and with capability to impact all systemic levels at the same time: individual, family, school, child protection or welfare system and at the policy level.

Chapter 6 - Conclusions and next steps

In 2009 there was a steep rise in unemployment among young people in European countries and it is well known that low levels of educational achievements have increasingly damaging consequences for individuals and societies. It can consign people to low-paid jobs or long term unemployment and undermine social cohesion.

In the EU countries for which data is available, young men and women from a public care background are over-represented in virtually every indicator of disadvantage, including unemployment, poverty, homelessness, ill-health, drug and alcohol misuse, criminal activity and teenage pregnancy. That means that young people who have been placed by the child protection or welfare system in any European country are clearly at high risk of social exclusion.

The working hypothesis of the YIPPEE project is that such risk of social exclusion is grounded in a personal history which denies these young people the opportunity to follow an educational career similar to others of the same age in our societies. Evidence of this inequality of opportunity comes from the following facts:

- (a) Many children in care who showed educational promise at 16 have major difficulties participating in further and higher education. A good number of them are only able to do so several years later than their peers.
- (b) Over half of children in care do not finish compulsory studies at the same age as the majority of their peers. Repeating courses and delay in finishing compulsory education raises complex problems for their educational careers.
- (c) Many young people from public care backgrounds drop out before they are legally allowed to leave school.

Professionals of the child protection system and of social services in all European countries are generally aware of these facts. However, figures making them apparent and visible to the overall society and to politicians are scarce, and systematic data collection is almost nonexistent. For that reason one of the YIPPEE project goals, and the objective of this phase of the work, was initially defined as *establishing a baseline of post-compulsory educational participation among young people who have been in care*. However, we have found that such an apparently easy task as collecting some simple quantitative data that reflects the position of this population in a few countries is a major activity, extremely complex and consuming of time and resources.

At some point we had to take the pragmatic decision to collect “the best data possible” in each country, without any pre-requisite to make such data comparable across countries. In fact, the data that we have been able to collect in each country is rather different, and we had to use different sources and procedures to obtain informative figures. Therefore, a first conclusion is that we are still far from having a comparable baseline on the state of the art in different European countries. Nevertheless, we increasingly suspect that we are facing a similar situation in each partner country and very possibly in every country in Europe. The different social welfare regimes do not appear to give rise to very different achievements - the only relevant difference being the fact that data dissemination began sooner in one of the countries (UK), than in any of the other four. Therefore, probably, the five approaches we have used are rather complementary, and reflect a similar social problem in different ways.

Most available relevant information we now have is based on statistics. For example, in Denmark about 66% of young people that have been in care do not have post-compulsory qualifications and only 7% have the upper secondary school leaving qualification. In Spain estimates suggest that only 7% reach higher education, while the equivalent estimate for

Hungary is even lower: probably only about 6% reach that level. We also have preliminary data showing that in Catalonia only about 40% of children in care finish compulsory education on time, while 70% of the overall population does so. Figures of those not finishing on time seem to be rather similar in Denmark (34%). In comparison the percentage is 5% for the overall population. All of this is a strong indication of the gap in attainment and educational opportunity between young people in care and their peers in the overall population.

This situation is not immutable: policy initiatives adopted in the UK have already shown results within a few years. In some local authorities 46% of care leavers aged 18 and over are now in further education, including 9% at university. These UK figures show important recent improvements, but do not yet go far to match figures for all young people in the country.

The need for routine collection of data

The lack of a tradition of data collection on the educational achievements of this population and the lack of focus on the education of children in care, has resulted in an absence of factual evidence from official sources to tackle the inequalities of opportunity for this group of young people. Moreover, in all countries, our capacity to get good data, either quantitative or qualitative, from alternative sources is at present very limited, and comparisons are limited by the different routes adopted to acquire the sample. Except in the UK and DK, data from all countries are mostly limited to care leavers who are receiving some kind of support or services. The extent to which they are representative of the totality of young people who have been in care is unknown and varies depending on the country.

To sum up, a major conclusion of this report is that a **system of routine collection of relevant data is needed in Europe to monitor the situation of this population in relation to their educational itineraries.**

In other words, we need to agree to establish a **system of indicators** that are comparable among European countries and that can provide information on:

- (1) The different achievements of this population in relation to the overall population of the same age in each country.
- (2) The effectiveness of programmes and policy initiatives designed to improve the educational opportunities of young people who have been in care.

If all countries had a statistical system with detailed data of good quality, establishing a "baseline" would be a straightforward exercise; our experience has been that it is not. A basic challenge for this project, therefore, is to propose some steps towards specifying which data would be desirable in order to:

- Have a more detailed quantitative knowledge of the situation in each country.
- Make possible quantitative comparison between countries.
- Make possible quantitative evaluation of changes over time in each country and across countries.

Analysis of new data obtained in Catalonia from the cohort of children in care born in 1993 suggests that we should start to collect comparable indicators from all cohorts of children in care, year by year, which would then make it possible to identify trends and allow comparisons across countries (see Annex III for more detail).

Conclusion

An important part of this report has been devoted to analysing obstacles and facilitators that prevent or enable young people in and from care to continue in further and higher education after leaving the child protection/welfare system. **Efforts are needed at all systemic levels to change the situation and to improve the educational achievements of this population.**

In all countries managers say that education is a neglected issue both in school and in placements. More focus is needed on education together with a child-centred perspective among child welfare agencies and in schools. Child protection services usually have too low expectations related to education - their aim is for care leavers to achieve financial independence through work, not to access further education.

In Denmark and Sweden we conclude that our data poses a challenge to the principle of normalization in relation to this group. If access to higher education for young people leaving care is based on the idea that they are 'the same as everyone else' there is little chance of addressing the existing inequality of opportunity. It would appear, from data gathered to date, that foster and residential placements do not compensate for inadequate schooling. There is not enough support and its continuity is not guaranteed. Too often problems in secondary school mean there is no incentive to study further.

Even more problems in finishing compulsory education and continuing in education are observed among young people who have been placed in a residential context, compared with those that were in foster care. This may be partly explained by the fact that children with more complex situations are more likely to be placed in residential settings. However, regimes in the homes and expectations of staff are also relevant factors. More and earlier intervention is needed.

Last but not least, to create a better articulation between the education system and the child welfare/child protection system is pointed out as a major challenge by several of the managers interviewed in our sample.

Professionals within the child protection system and social services in all European countries also know a lot about obstacles and barriers, as well as facilitators and opportunities for young people in and from care to improve their educational achievements and to encourage them to continue an educational career. All of that knowledge should be taken into account and translated into proposals for new action.

Strong political will is necessary to change the situation. To improve educational pathways and achievements of this population becomes a major political challenge at European level. A first political step needed is a decision to collect new data relevant to this issue, particularly a number of key indicators. The list of desirable data and complementary qualitative information could be long. However, our conclusions point out that even a small amount of comparative data, as detailed in this report, would have the potential to start new discussions and to challenge the invisibility of the educational disadvantage of this most vulnerable group of young people.

Introduction

YiPPEE is the acronym of a three-year, five-nation research project funded under the EU Seventh Framework Programme Theme 8, Youth and Social Exclusion. It focuses on young people aged 19-21 who have spent all or part of their childhood in state care. The full title of the project is 'Young People from a Public Care Background: pathways to education in Europe'.

The general objectives of the YiPPEE project are to investigate educational pathways among young men and women from a public care background in five EU countries and to use the research findings to consider how more of these young people can be retained in education after the end of compulsory schooling. Specific objectives completed or in progress are:

1. Establish a baseline of post-compulsory educational participation among young people who have been in care and carry out a comparative analysis of national policies and procedures relating to them and other young people at risk.
2. Track and evaluate the educational plans and pathways of a sample of young people aged 19-21 who have spent at least a year in some form of out-of-home care. Parallel studies are being carried out in each of the five countries to enable cross-cultural comparisons which will be completed towards the end of the project.
3. Identify factors within the education and care systems in each country that facilitate or discourage entry and retention of young people who have been in care in post-compulsory education.
4. Explore care leavers' construction of educational identities and trajectories in terms of class, gender, race, ethnicity and care responsibilities, both from the perspective of the young men and women themselves and of carers and staff in education and care services.

A literature review has already been developed in the five partner countries and a consolidated report on this review can be found on the YIPPEE web page <http://tcru.ioe.ac.uk/yippee>.

Taking into account the material discussed in the literature review, in the current report, which is a synthesis of information presented in national reports from each partner team, we are focusing on the goals and results from research for Workpackages 3 and 4 in all five countries, as detailed in the original project proposal:

Workpackage 3: The aim of this work is to identify what is documented in national data sets on (a) the educational attainment of children in public care compared with those in the general population and (b) the extent to which they continue to participate in education beyond the age of compulsory schooling.

Workpackage 4: Survey of local agencies and authorities. The aim of the survey is to establish a baseline of further and higher education participation among young people from a public care background and also to identify factors within the education and care systems in each country that, according to managers of services, facilitate or discourage entry and retention of young people who have been in care in post-compulsory education. A questionnaire was circulated to key informants either by telephone, post or face-to-face administration with some variations depending on the structure of services and availability of data. The survey has been completed in all countries and national reports have been delivered.

Due to important national differences in the organization of responsibilities, access to data and types of data obtained, the project team decided to merge the findings of the two work packages into one consolidated report, in order to offer an overall view of all the information available on the core topic of our research.

From the literature review it has become evident that, although there is some information about the education of children in public care in European states, and in the UK in particular (Eurydice 2005; Borland et al. 1998; Jackson and Sachdev 2001; Social Exclusion Unit, 2003; Harker et al. 2004), very little is known at a European level about young people who have spent all or part of their childhood in care in terms of their participation in further and higher education (cf., Bourgeois and Frenay 2001; Walther and Pohl 2005). Data collection on this topic is not pan-European and we are reliant on studies from individual member states. Compared with partner countries, there is more information in the UK about the many practical disadvantages young people who have lived in public care encounter as adults (Wade and Dixon 2006; Simon forthcoming; Stein 2004; Broad 2005; Cameron 2007), but only one study focusing on participation in post-compulsory education (Jackson et al. 2003; 2005). This study found that personal motivation, self-efficacy and cultural capital played an important role in enabling a small minority of young women and men to access higher education from public care, but only if they also had strong financial and practical support from their responsible local authority and a relatively stable placement experience. Evidence to date suggests that despite the English policy agenda of initiatives to close the

gap in achievement between children in care and others, only modest progress has been made (Department of Health 1998; Jackson & McParlin 2006). In other partner countries, anecdotal evidence suggests that this pattern of extreme educational disadvantage, compounded by other difficulties, may be repeated, although there are likely to be differences of experience related to the type of welfare regime as well as individual heterogeneity.

In Sweden and Denmark, although there is a very high rate of participation in education post-16 (Skolverket 2006), the extent to which young people from a public care background are included in this is so far unknown. Swedish studies show that children who have been in long term foster care have an increased risk of not pursuing education after the end of compulsory schooling, particularly if they entered care later in adolescence (Vinnerljung et al. 2005). About 6 percent of young people from public care have any kind of post-secondary education (Vinnerljung et al. 2005). In Denmark 1.3 percent of all young people come from a public care background, and they are more likely than their peers to have had educational difficulties while at school (Bryderup, Madsen and Perthou 2001; 2002; Bryderup and Andsager 2006; Mortensøn & Neerbek 2008; Ottosen & Christensen 2008). This study shows that on December 31, 2006 only 3.4% of all young people in Denmark who had been in care or received leaving care support had completed an educational course after compulsory school by the age of 22 (see Danish report for more detail).

In Hungary and Spain there is no data on rates of participation in higher education among young people from public care, and no information on the experiences of those who do participate. In Hungary, one of the eligibility criteria for staying in after-care accommodation beyond age 18 is studying. Most young people in care choose this option and continue their studies. However, there are no statistics related to the level and type of their studies, although it is estimated that about six per cent study in higher education. In Spain, there is some indication that placement type while in care is important, with young people from foster care more often continuing to receive support for continuing education while those from residential care do not, and are more likely to seek employment early, though often without success (Del Valle, Alvarez & Bravo 2003).

It is known that these young men and women are among the most economically and socially excluded groups in European nations and that their life course achievements are generally very poor. There is clear evidence of the link between low levels of educational attainment

and social exclusion, but little existing research on the education of children in care, still less about their participation in further and higher education.

Chapter 1: Goals and method: Procedures to get the ‘best data possible’ in each country

In this chapter we report the details of the different routes to obtain the ‘best data possible’ in each partner country. It is important to note that data collection for this report was part of a larger study, which included not only a literature review and the information from the local authorities and agencies to establish a baseline of participation, but also a case study of young people’s views about and experiences of educational participation. In documenting the methods in this chapter there are references to this subsequent research step, that will be reported at the end of the study period.

Aim: The reformulated aim of Workpackages 3 and 4 combined was to identify existing statistical data sets and to obtain more detailed additional information as a step towards establishing a baseline of further and higher education participation among young people from a public care background in each country.

Goal: (a) To know how many young people from a public care background are in vocational or academic educational programmes or to identify ways to get such data and (b) to identify factors that facilitate or discourage entry and retention of young people who have been in care in post-compulsory education.

Method: In the original proposal it was planned to obtain the necessary data to establish that baseline by the means of a ‘survey of sample of local authorities or child protection agencies responsible’, although it was also clearly stated that ‘there are national differences in the organization of responsibilities which necessitate variations in the method used to obtain this information’.

The two original Workpackages were designed to obtain the most relevant data available in each country from:

- (a) Official statistics together with secondary analysis of available data sets, which could give an overall view of the state of the art in each country.
- (b) Interviews with managers of welfare services, which were presumed to have more detailed information, both quantitative and qualitative, about the topic of our research in each country.

However, after designing a plan for data collection for all countries, it became evident that it was impossible to have a similar process in each country, because of the heterogeneity of the systems and the extreme differences in the availability of relevant data. What made sense was to design a specific plan to obtain ‘the best data possible’ in each country, and, therefore, to merge the two Workpackages in an overall activity for each country. After an exploration of the most appropriate procedure for this purpose, the data collection activities planned can be summarized as follows:

- Re-exploitation of data from national agencies’ data sets (Dk, UK) or from other national sources (Sw).

- Administration of a questionnaire to key informants, by means of:
 - a telephone survey to a sample of public (local) authorities responsible (Sw; UK).
 - face-to-face administration to a sample of key informants from public services (child protection agencies, post-placement care services, community social services)(Dk, Sp, Sw, UK).
 - face-to-face interviews(N=4) and postal questionnaires (N=20) to all child protection agencies in the country (Hu).

- In Spain, completion of a file for each child in care born in 1993, by school (see below)

Data collection in each country

Denmark: In Denmark instead of doing the originally planned survey of a stratified random sample of 1 in 3 local authorities, the research team chose to do a national register analysis based on data sets from Statistics Denmark since they were able to provide the Danish team with unique statistics including young people in care and from a public care background and their educational pathways. Statistics Denmark provided the team with a remote access to de-identified datasets and micro data through the Internet. Therefore the Danish research team has been able to make new data sets from the original data sets and carry out various cross-tabulations.

By using a national register, the Danish team is also able to compare socio-economic factors with the young people’s qualifications, and connections between these will be explored in detail. It should be highlighted that the information already obtained from the analysis as well as future analysis of the statistics is quite unique and this is the first study in Denmark

that aims to connect the social area with the education area and to explain the educational pathways of young people in care in detail.

It was decided to include three different populations and a number of variables in the analysis:

1) To gain knowledge about the current situation the first population consisted of all children and young people in care aged 0 - 17 or receiving support at the age of 18 -22 on 31.12.2006.

2) The second population was designed to produce comparative data with those whose lives were studied in detail in the subsequent case study workpackage, namely young people who were never in care (all young people born from 1986-1989).

In Denmark, it is common for young people not to start their higher education until they are in their early twenties. Therefore a third population consisting of people born from 1976-1979 was included.

The variables are:

- a) Background information such as sex, ethnicity, age, level of education, number of children, marital status, socio-economic factors etc.
- b) Historical variables such as number of times placed in care, numbers of changes between different places of care, number of months in residential care centres or foster care, support after the age of 18 etc.

In regards to the survey of a sample of local authorities or child protection agencies responsible for young people in or leaving public care the Danish team selected five municipalities and carried out face-to-face interviews with five managers responsible for children and young people in care.

The five local authorities (municipalities) were selected according to the following criteria:

- *Size of the municipality and the number of children/young people in care*

In order to ensure a reasonable number of potential informants one of the criteria was the number of citizens and the number of young people placed in care in the authorities

concerned. Very small municipalities were therefore ruled out in advance, but otherwise we attempted to ensure that local authorities of different sizes are represented.

- *Socio-economic conditions*

A criteria has also been to include municipalities representing a range of socio-economic conditions. According to these criteria we have chosen municipalities, representing regions of Denmark with both few and various social problems.

- *Geographical distribution*

We have tried to spread the participating local authorities across the country.

Hungary: In order to be able to compare the educational attainment of children and young people in care with those in the general population, three national sources were used:

- 1) Education statistics on all students in public and higher education published by the education authorities, highlighting changes and trends by providing both longitudinal and cross-sectional data.
- 2) Statistics on children and young people in care published by the National Statistical Office.
- 3) The dataset of the National Competence Study, which assesses the mathematical knowledge and understanding and interpreting of texts of 6th, 8th, and 10th grade students in public education with tasks that aim to look at how well students can apply the knowledge gained in public education in situations taken from everyday life.

Education statistics do not include information about students' family background and the statistics on children and young people in care collected by the National Statistical Office include very limited information about their education, but the National Competence Study dataset has both kinds of information available. So the secondary analysis of the three sources provides us with the most comprehensive picture possible.

However, the rate of participation in further and higher education after the end of compulsory schooling by young people from a care background is not included in any of these data sources.

To complement the insufficient data of the national datasets, a survey of child protection agencies responsible for this group was carried out. In Hungary, it is the child protection agencies, not local authorities, that have responsibility for children in care and young adults in after care provision, and whose duties are - among others - to keep a register of children in care and young people in after care provision, and to support children under 18 in care,

and young people who stay in after care provision (19-24/25 year-olds) in their county. There are 20 such agencies: one in each of the 19 counties, and one in Budapest, which cover 100% of all those living in care, and about 90% of young people in after care provision.

In order to be able to identify what statistics are and are not collected about children and young people in care, the questionnaire designed by the international team was divided into two parts: a questionnaire related to statistics and an interview guide related to background information about the agencies. The questionnaire on statistics was sent to all County Child Protection Agencies ((TEGYESZ), which cover all children in care in Hungary. Out of the 20, four were selected to assist in the sample selection for the subsequent case study. An interview was conducted with a representative of those selected child protection agencies

Spain (Catalonia): No available data sets have been identified in Spain, neither about further and higher education participation among young people from public care background, nor about participation in secondary education among children in care. Nevertheless, overall statistics about the whole population have been obtained, as contextual information:

- a) Education statistics on all students in public and higher education published by the education authorities.
- b) Statistics on children and young people in care published by the competent Ministry.

In Catalonia we have also obtained several reports of the Catalan public post-care service (ASJTET) offering information about the number of youngsters and characteristics of the support received. Only one of these reports has been published (ASJTET, 2008). However, the information about the core topic of YIPPEE project was very limited.

In order to explore information known by managers of different services that may not have been transformed into statistics, interviews with managers responsible for young people who have left care or still in care from three types of services were organised:

- 1) The child protection interdisciplinary teams (EAIA).
- 2) The public post care service (ASJTET).
- 3) General social services.

Child protection interdisciplinary teams (EAIA) are in touch with young people in public care until the age of 18. When young people reach this age and are still in need of support, there is a public post care service (*ASJTET: Area of Support to Young People under Guardianship and Ex-guardianship*) which can give them several types of support (financial, housing, counselling and so on). ASJTET covers the whole of Catalonia and gives support to all youngsters from public care, so, there is no suspicion of bias by area.

If young people do not want to continue being in touch with ASJTET or general social services, no service follows them up, so contacting them becomes difficult because contact details are often not available.

The EAIAs and general social services (SSAP) selected for interviews with managers are from three districts of Barcelona city and from two counties, including urban, semi-urban and rural areas. The final sample of managers interviewed is composed of:

- One Coordinator of the Area of Support to Young People under guardianship and ex-guardianship (ASJTET)
- Four coordinators of child protection interdisciplinary teams (EAIA)
- Seven directors of social services areas
- One social services policy manager.

Contacts with social services have not been very fruitful. Managers there mainly reported that their files do not identify people who have been in care, and that young people who have been in care rarely approach their service.

Although the post-care service (ASJTET) is ready to give support to all youngsters from public care, in practice it is devoted to youngsters mainly from residential care with less family support. As a result, this service does not reach at least two groups of youngsters who have been in care: (a) those that have not asked for any kind of public support because they do not want it or think they do not need it (mostly young people who were in family foster care - both, kinship and non-kinship care, or in family reunification programmes); (b) those who do not accept the conditions to benefit from the services (mostly young people leaving residential care set on a very negative life course).

The selected EAIAs work in five different areas of Barcelona city and in one county of the Barcelona province. These teams are in touch with all type of placements; they don't work

with young people over 18, but they can identify youngsters who showed educational promise when they were 16 years old. Those teams whose managers were interviewed are the same that made it possible for us later on to interview youngsters from family foster care.

Because of the absence of statistical data about educational qualifications and achievements of children in and from public care, in 2008 the Catalan partner team proposed collaboration between the Department of Education, the Department of Social Policy from the regional Government of Catalonia and the University of Girona, in order to start producing new systematic data. An agreement was signed in November 2008.

As a first step, all children born in 1993 who were in public care - both residential and family foster care - were selected and a data collection of their attainment during the 2008-9 school year in which they became 16 years old, was developed by sending a file to be completed by each school. At this age most of the Spanish students end Secondary Compulsory Education (ESO) and get the Certificate of Compulsory Secondary Education (CEP).

An impressive number of the respective schools completed the file at the end of the course (June 2009) with data about each identified child in the care system: (i) qualifications (basically, whether she or he got access to the following level and had obtained the Certificate or not); (ii) attendance (iii) behaviour at school.

Sweden: In Sweden the aims of Workpackages 3 and 4 have been broken down into two sub-studies:

- a) The educational attainment of children in public care compared to all young people of the same age
- b) The rate of educational participation after the end of compulsory schooling by young people from a public care background in further and higher education compared to all young people. Where possible, the intention is to describe the characteristics of such young people.

For the Swedish team the secondary analysis of two existing data sets will form an important and central part of the project. Initial contacts have been established with a leading researcher responsible for the extensive data register UGU (Utvärdering Genom Uppföljning

= Longitudinal database *Evaluation Through Follow-up*), owned by the Department of Didactics and Pedagogy at Göteborg University. The data register contains extensive data and ranges over a long period, from 1961 to 2002. By running this register with data from the National Board on Health and Welfare (Children and young persons subjected to measures 2008) the Swedish team planned both a broad and detailed picture of the area. The national statistics agency (SCB) has been commissioned to provide the keys to the two data sets. An application for ethical approval and access to the registers was elaborated.

The database on education (UGU) contains data on nine cohorts of children of which eight have been used. A random sample was made and each cohort was constituted of 4,500 to 12 000 individuals. The database contained information of mainly two types:

- a) Administrative data such as school, class, size of class, choices made concerning courses etc, and grades. The two latter were of interest for the project.
- b) Questionnaire data where for example approach to education, leisure activities and plans for the future were used.

The UGU database is part of Gothenburg Educational Longitudinal Database (GOLD) where all individuals born 1972-1987 are registered (N=1 677 241). It contains, for example, data on parents' education, family structure and all information on the educational situation of the individual (all forms of schools, grades, programs at university, exams, study financing, etc).

The data from the National Board on Health and Welfare contains information on all young people placed in care since 1994 including legal framework, time in care, age at first placement, number of placements and placement form (foster home or institution). The team decided to include persons born 1973 and later in the sample. The UGU data has been useful to identify the children/young persons in public care and carefully study different variables in relation to educational matters.

By analysing these data it will be possible to identify numbers of young people from a public care background in education at the age of 19, and trends over time. In addition, it will be possible to identify their gender, ethnicity, whether they are asylum seekers or not, what kind of accommodation they are in, and which local authorities are doing more to facilitate access to further and higher education. This data will be included as an appendix to this report when analyses are complete.

Information about policies, procedures and general approach to the topic of post compulsory education for young people leaving care was gathered from two data sources in Sweden. First, a questionnaire, developed with the YIPPEE team, was the basis for interviews with eight key persons within the social services directed towards teenagers, families or equivalent. The key persons are the same as in the subsequent case study workpackage.

The eight managers were interviewed face-to-face. Six were responsible for the entire child-and-family social service unit in the chosen local authority. Two were managers of the foster care unit, thus they were in charge of all foster care placements in that local authority.

The second data source was from a larger group of 111 social services managers who were being interviewed by telephone for another study run by one of the Swedish research team. The sample consisted of managers from child welfare departments in all municipalities (and all local authorities in the larger cities - Gothenburg has 21) that are responsible for social work with young people in the region of Western Götaland and the county of Stockholm (Sjöblom and Höjer, in preparation). A structured questionnaire was used, with both closed and open questions. Telephone interviews have several advantages compared to postal questionnaires. Any misunderstandings of the questions can be immediately sorted out, and there is little risk of non-responses. Only one manager refused to participate in the study. However, one limitation is that the answers of the open questions were not recorded, and thus there is an evident risk of missing out on significant material. Although careful notes were taken during the interviews, notes cannot be compared to transcriptions from recorded interviews.

For this study, three questions from the YIPPEE managers' questionnaire were judged to be most important: *What priority does education hold in your service for young people in care?, What constraints and possibilities are there for young people who have left public care who wish to go on to further education? Are there any specific support programmes/methods for care leavers in their transition to adulthood after leaving care?* These were added to the Sjöblom and Höjer study data collection.

By using this sample and method the team has considerably facilitated the collection of data, and still obtained a good body of both qualitative and quantitative data that, together with the other empirical findings, provide new and useful information.

United Kingdom (England): In England, the responsible government department (DCSF = Department for Children, Schools and Families) publishes national statistics annually comparing the attainment of children in care (looked after children) with that of the whole population at three age points: 7, 11 and 16. This was one source of information for establishing a baseline. But it did not establish the rate of educational participation after the end of compulsory schooling by young people from a public care background compared to that of all young people. For this a survey of a sample of local authorities or agencies responsible for young people in or leaving public care was undertaken.

The design of the analysis and survey in England comprised the following elements:

- Consulting national statistics, published by local authority area
- Secondary analysis of statistics supplied by local authorities to the DCSF
- Survey of English local authority leaving care managers and of local statistical data collections

These steps were designed to take advantage of already published data, exploit further already collected data, and to complete the data set by interviewing local managers and requesting them to collect new data. This was a difficult process that took place over some ten months, between April 2008 and June 2009.

Consulting national statistics allowed the English¹ research team to establish the **proportion of young people in care who had been continuously placed for 12 months in respect of:**

- Levels attained in national tests (SATs) taken at ages 7, 11 and 14.
- School leaving qualifications (GCSEs) attained at the age of 16 years.
- Participation in education, training and employment with or without training at the age of 16 years.
- Participation in education, training, employment of those aged 19 who had been in care when aged 16.

Comparing attainment levels of looked after children at younger ages was designed to see if part of the explanation for low participation levels might lie in the failure to intervene early

¹ The fieldwork for the YIPPEE project was carried out in England only due to policy differences with the other countries of the UK

enough. GCSE results are very important in determining access to higher secondary education and also, because of the university entrance system based on predicted results, to degree-level courses.

For the local authority survey, the data source was statistical and interview data from leaving care teams. After permission from the Association of Directors of Children’s Services was obtained in spring 2008, work began by identifying relevant local authority leaving care teams. Fieldwork for the current study was completed in 2008-9, by which time leaving care teams had had seven or eight years to become established.

Table 1: Number of leaving care teams who participated in the Survey of Leaving Care Services in England

	Contacted	Consent to take part	Completed	Partially completed	Total
Three months after start date	50	34	17	8	22
Six months after start date	115	33	8	5	16
Final numbers 30 June 2009	150	67	25	13	38

The original plan was to conduct telephone interviews with one third of the 150 local authorities in England (n=50). Achieving this rate of participation, despite prolonged efforts, proved impossible. Eventually it was decided to invite all 150 English authorities to take part, and 38 agreed to do so.

Despite the problems encountered in contacting and arranging interviews with managers of leaving care teams, the final sample of 38 is representative of the four main types of local authorities in England: London boroughs, metropolitan boroughs outside London, unitary authorities and shire counties. However the data obtained from the telephone survey constitutes only a partial picture of the local policies and practices in respect of young people in and leaving care and their educational participation. In particular, the statistical picture must be regarded with caution. The experience of carrying out this survey appears to indicate that local authority managers responsible for young people in transition from care have very limited access to important statistical information which would seem essential for them to carry out their role effectively.

The data obtained from the national statistics describing young people's activity on their 19th birthday represents a more reliable picture as it pertains to data submitted from all 150 local authority areas.

Summary

The different routes taken in each country in order to get the best data possible have allowed us to identify different potential sources of information, both quantitative and qualitative, about the educational pathways and achievements of young people in and after care. Sources of information and procedures needed to obtain it have been shown to be country specific and rather different. Very little information is, strictly speaking, comparable among countries. So, in fact, we have five different approaches to the object of our study. In this case, the context determines both the available data and the available sources of information. However, we more and more suspect that we are facing a reality which is not dramatically different from one country to another. Our different social welfare regimes do not appear to give rise to very different achievements - the only relevant difference being the fact that data dissemination began sooner in one of the countries (UK), than in any of the other four. Therefore, probably, the five approaches we have used are rather complementary in some way, and reflect a similar social problem from different perspectives.

Quantitative information related to the topic of our research is very limited. In only two of the countries (UK and Dk) have routinely collected sources of data been identified. In a third country (Sw) important and relevant accessible databases have been located. However, in all three countries it has been difficult to secure permission for (re)exploitation of available data and there have been many delays in accessing it.

Table 2 summarises sources and outcomes obtained from routinely collected statistical data. As can be seen, these are very different in each country.

Table 2: Sources of data sets and outcomes in each partner country

	<i>Sources</i>	<i>Outcomes</i>
Denmark	Statistics Denmark	National register analysis of datasets from Statistics Denmark. Rate of educational participation after care is available.
Hungary	Education statistics National Statistical Office (children in care) National Competence Study Dataset	Not very relevant for YIPPEE project goals. Rate of educational participation after care not available.
Spain (Catalonia)	Education statistics Ministry of Health and Social Policy Statistics (children in care)	Not relevant for YIPPEE project goals. Rate of educational participation after care not available.
Sweden	UGU database on education National Board on Health & Welfare data set	Secondary analysis of 9 cohorts
United Kingdom (England)	National statistics by local authority area	Secondary analysis

When the YIPPEE project was designed, we suspected that official data available from statistical production would probably be very limited. Therefore we planned to collect complementary data from other sources, particularly quantitative and qualitative data from managers of social services - and we always had in our focus mainly the managers of post-care services.

That was the reason we planned the administration of a questionnaire to a sample of managers of services (see Appendix II for the questionnaire). The identification of the ‘key informant managers’ has needed to follow a different path in each country, as has the means of contacting them to get their answers. It was sometimes necessary to vary or omit some of the questions to take account of cultural differences and organisational factors. As a result we have managers whose remits differ and who follow national legislation and procedures that vary. Table 3 shows the number of managers contacted in each country, and in Annex III we can find the items that were omitted in each country from the common

questionnaire.

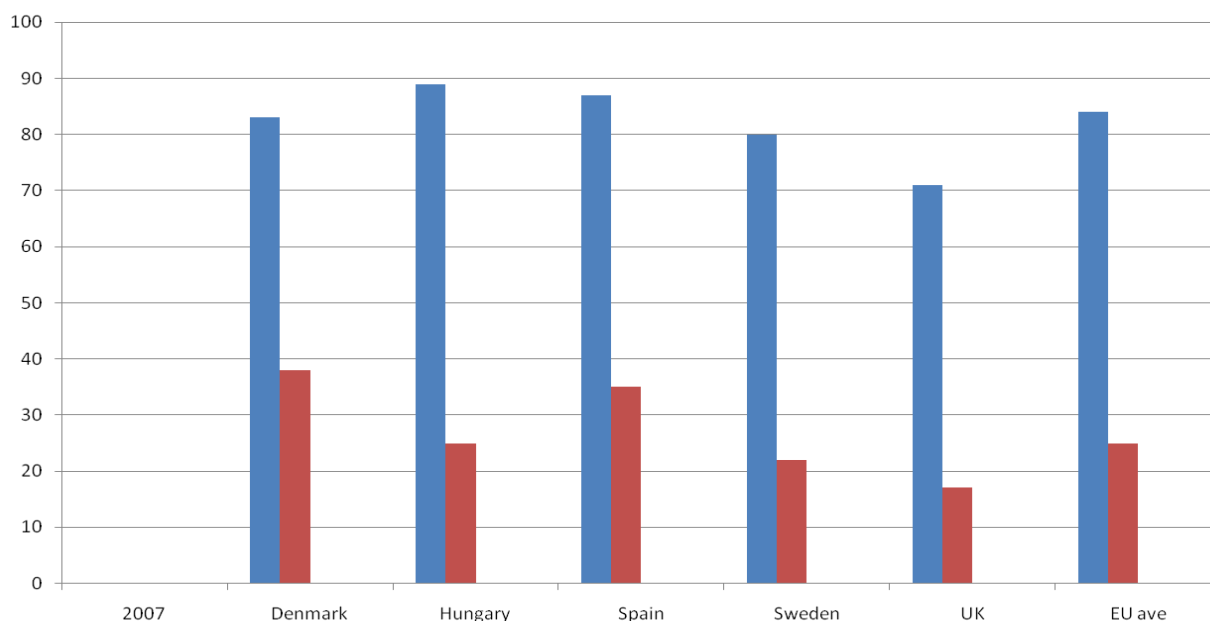
Table 3: Sample of managers of welfare services used for data collection

Denmark	5 face-to-face interviews
Hungary	4 face-to-face interviews + 20 mailed questionnaires
Spain (Catalonia)	13 face-to-face interviews
Sweden	8 face-to-face interviews + 111 telephone interviews (3 items)
United Kingdom (England)	5 face-to-face interviews + 33 telephone interviews

Chapter 2: A picture of national level quantitative data in the five countries.

In the official national statistics of each of the partner countries we can find the figures of the overall young population in education, at each age. Table 4 synthesises in a comparative way the distribution of the age groups 15-19 and 20-29 in the five countries.

Table 4: Percentage of young people in education by country



Blue: % 15-19 year olds in education

Red: % 20-29 year olds in education

Source: OECD, 2005

Similarly, each country has a national system of statistics accounting for how many children and young people are in care (in the welfare system or in the child protection system, depending on the terminology in each country). Table 5 synthesises in a comparative way the percentage of children in care in each country and their distribution in different kinds of accommodation.

Table 5: Children aged 0-17 in care, by country

	Residential care %	Foster care %	Other kinds of accommodation	Children 0-17 in care N=	Date of figures	Percentage of children in care
Denmark	41	47	12	12,346	31/12/08	1.3
Hungary	50	50	-	17,220	31/12/08	0.8
Spain* (Catalonia)	48 (24)	52 (43)	(33)	43,294 (7,524)	31/12/08 (31/12/08)	0.6 0.6
Sweden	25	75	-	15,800	101/11/08	1**
UK (England)	14	71	16	59,500	31/03/08	0.5

* The data are more disaggregated in the Catalan statistical system than at Spanish level. Foster care is mostly kinship care. Other kinds of accommodation include: supported flats, pre-adoption and living at home under legal supervision.

** The number of children in care and the percentage of children in care include 0-20 year olds for the Swedish statistics.

These two tables show differences among countries, which have to be taken into account to contextualize what happens with young people after care. While Hungary and Spain seem to retain more 15-19 year olds in education, more than the EU mean, Denmark and Spain do so in the range of 20-29 year olds. On the other hand, the Scandinavian countries clearly include many more children and young people in the care system, while the Spanish and the English systems are ‘collapsed systems’, only including the most serious cases which push the system to accept them. But the system is reluctant to include the less serious cases, because there is ‘no room’ for them. The investment of resources in the Scandinavian countries is higher and therefore their systems have more capacity to reach cases - however that does not mean that ‘collapsed systems’ really have fewer children who need protection - the fact is that many are simply not included in the system (Casas 1993; 1999).

When we analyse that information, the next step should be to crosstab the two kinds of data in order to know how many of the young people that are or have been in the care system are in education. However, crossing these two sources is not routinely done in four of the five countries, and it is only in United Kingdom that access to that kind of information is possible because, since 1999, it has been routinely collected from local authorities and therefore national statistics are produced.

In this chapter we describe steps taken in each country in order to re-exploit existing statistics or databases to produce quantitative information on the educational itineraries of young people in care or after care.

Denmark: Previous publications indicated that approximately 15% - 20% of all Danish young people never obtain a 'youth education'. A recent publication analysing a sample of 4.118 young people aged 23-25 who were placed outside their home when they were between 15-17 years old, shows that 66% did not hold qualifications beyond compulsory school. The study also shows that only 7 % of this group passed the Upper Secondary School Leaving Examination (AKF - Institute of Governmental Research, 2009).

The following sections describe the results of the analysis of statistics from Statistics Denmark regarding all young people in care or receiving support after the age of 18, on 31st December 2006. This includes young people aged 18-22 who get leaving care support. In Denmark leaving care support means maintaining the placement in foster care or residential care, appointing a personal adviser, appointing a regular support worker and establishing leaving care support

From a total of 2,735 young people in care on December 31, 2006, 2,153 completed compulsory school as the highest level of education achieved. More than two out of three of this group did not do so until they were between 19-22 years old. Table 6 below illustrates these figures.

Table 6: Young people in care/or receiving leaving care support in Denmark: highest completed level of education by age on 31-12-06

Age	18	19	20	21	22	Total
Not completed education	273	118	65	23	10	489
	17,7%	17,6%	17,1%	22,5%	25,6%	17,9%
Compulsory school	1259	534	268	66	26	2153
	81,6%	79,6%	70,3%	64,7%	66,7%	78,7%
Vocational training and education*	10	11	20	6	2	49
	,6%	1,6%	5,2%	5,9%	5,1%	1,8%
General upper secondary school and preparatory programmes**	0	7	23	5	1	36
	,0%	1,0%	6,0%	4,9%	2,6%	1,3%

Vocational upper secondary school	0	1	5	2	0	8
	,0%	,1%	1,3%	2,0%	,0%	,3%
Total	1542	671	381	102	39	2735
	100,0%	100,0%	100,0%	100,0%	100,0%	100,0%

* Vocational training and education include shipping, fishing and farming etc.

** Preparatory programmes include upper secondary shorter general education programme (a 2 year programme)

The table shows that 18% of young people in care have not completed compulsory school at the age of 22. By comparison, the proportion in the general population is 8.9%². It is also striking that out of 2,735 young people in care only 93 young people in the age group 18-22 have qualifications beyond compulsory school. That means that only 3,4% of all young people who were placed outside their home by 31.12.2006 have completed an educational course after compulsory school at the age of 22. The comparable figures for the general population are 38.1%. So this study shows a worse picture compared to the previously mentioned study where 66% did not hold qualifications after compulsory school. It should be stressed that the young people were 23-25 years old in that study and were in care when they were between 15-17 years old. The figures in our study are bound to look different if we look at young people when they are a bit older. In the other study they did not go into detail about the types of education. In this study we have only included courses of study that are fully completed and not, for example, young people who have completed second year of upper secondary school, since it is a three year programme.

Most young people in care chose vocational education and training followed by upper secondary school and preparatory programmes. Only five men completed upper secondary school and preparatory programmes compared to 31 women. With regard to vocational training and education, 36 men that chose this type of course compared to only 13 women and finally two men completed vocational commercial and technical school compared with six women. The most frequently chosen forms of vocational education and training for men included, in prioritised order - shipping, fishing, and farming. Most women completed upper secondary school and preparatory programmes.

252 young people out of 2,735 are immigrants and 93 are descendants of immigrants. Of this group of immigrants and descendants only 6 young people have completed an educational

² This figure does not take into account the number of young people who have emigrated or died.

course after compulsory school. That means that only 1.7% of immigrants and descendants have successfully completed a post-compulsory educational course at the age of 22.

The above figures show that young people in care are underachieving in comparison with the general population. At the age of 22 they have poorer educational qualifications. Only 3.4% of young people in care have qualifications beyond compulsory school compared to 38.4% of the general population.

Hungary: The Hungarian team has examined three national sources and found no data on participation rates of young people from a care background after compulsory schooling. However, statistics on young people in care under 18 show that they are more likely than other children to be studying in vocational (as opposed to academic) schools, to achieve fewer competence points' than other children, and are three times more likely to have multiple disadvantages in life. Agencies are not required to collect information about the educational careers of children and young people in care, so the data is often not available.

The three data sources have been:

- *Statistical Yearbook of Education 2007/2008* - presents the changes that have occurred in the education system, and ensures a basis for international comparison by the adoption of international categories. The basic unit of the investigation is the institution, so this database contains aggregated data.
- *Child Protection Statistical Guide 2007* - contains data from national data collection carried out by the Hungarian Central Statistical Office; these data cover basic child welfare provisions, children's homes, foster parent networks, Regional Child-Protection Agencies (TEGYESZ) and the guardianship office (or in the case of a special ministry request, reformatory institutions). It is a characteristic of these statistics that the basic unit of the investigation is the institution, and data concerning the clients and their families are present in aggregated form, only.
- *Competence assessments (2008)* - a national study, that not only investigates the text comprehension and mathematical skills of students in three grades (6th, 8th and 10th grades) but also contains questions targeting the family background and previous school career of students, so providing an overview of students living in different, other-than-average life situations, including those living in children's homes.

Based on the Statistical Yearbook of Education, comparing the distribution of a normal population by level of education to the distribution of students in the child-protection

system by level of education, we find that the latter are overrepresented in primary, vocational, and remedial vocational schools, while being underrepresented in general and vocational secondary schools (which offer better opportunities for the continuation of studies). Among students within the child-protection system, the rate of those attending secondary school is 2.3%, while in the whole student population, this rate is 16.5%; some 4.8% of students in the child-protection system attend vocational secondary school, in comparison to 19% of the student population, as a whole. In contrast to this, among students living within the child-protection system there are twice as many vocational school students (15.9%), whereas the rate for remedial vocational school students is tenfold (9.4%) compared to the rate that applies to the basic population.

It is important to mention that concerning those students studying in the higher education system, there are no data regarding other-than-average life situations—and therefore no data exists relating to students living within the child-protection system. This means that at present we do not have any information on the further studies of students within or leaving the child-protection system at higher educational levels.

From the data included in the Child Protection Statistical Guide, it is important to highlight those concerning persons who receive after-care support, since these persons over the age of 18 are potential participants in the higher education system and in further study. Slightly more than 4,000 persons receive after-care support in Hungary, half of whom are living in children's homes and the other half with foster parents; looking at percentages, **22%** of those living in children's homes and 17% of students living with foster parents receive after-care support. Based on these data, the correlation between school progress and the type of placement is clear: most children placed with foster parents and attending primary school (3,261 children) attend the grade that corresponds to their age, while this ratio is exactly the opposite in the case of those living in children's homes, where the overage students constitute the majority (their number amounting to 2,490).

However, based on the available data, we cannot know if it is the type of placement that influences the school performance, or the fact that less problematic, well-performing children are more commonly placed with foster parents. Among students finishing primary school, the preferred further study orientation, both for children living in children's homes (77.9%) and those living with foster parents (59.5%), is characteristically, the type of vocational school which does not provide the secondary school leaving certificate that is a prerequisite to further study in the higher education system. however, among students

living with foster parents, the rate of those going on to the type of vocational school which provides a secondary school leaving certificate, or to secondary school, is higher (38.6%), whereas this applies to only 19.8% of those living in children's homes.

The 2008 national competence assessment shows that the differences between the scores achieved in mathematics and text comprehension also depend on the type of family: students living with their own families performed at around the national average of 500 points, whereas those living in children's homes scored 70-80 fewer points. School performance within the two investigated fields also depend on the following variables: place of residence (students living in the more developed, western regions achieved above-average scores, whereas those living in the less developed north-eastern regions achieved below-average scores): parents' level of education (children of parents who have higher qualifications achieved a higher score): the number of books at home (there is an approximate difference of 130 points between the results of children living in families that own fewer than 50 books and those in families having more than 1,000 books): type of school (those attending secondary school performed above the average, whereas those attending vocational school performed below the average): and settlement type (students living in the capital scored higher than those living in townships).

In connection with the latter, we find it important to note that students living with their own families in Borsod-Abaúj-Zemplén county performed worse than those living in Budapest with foster parents. There is also a tight correlation between the targets for the continuation of studies and the results achieved at the assessment: those aiming at reaching a higher degree achieved better results, on average. It is also clear from the data that significantly more students repeat a grade among those living in children's homes. From the 1st to the 4th grade (that is, students who had to repeat one or more of these grades), 96% of students living with their own families indicated that they had never repeated a grade, whereas this rate is 83% in the case of students living with foster parents and only 73% for students living in children's homes. Similar percentages can be found concerning the 5th-8th grades (96-90-73, respectively).

Investigating the average school achievements of the previous year, the study data clearly indicate that students raised within the child-protection system perform worse: the overall average score is 3.96, which is the average for students living with their own families, whereas this is 3.47 among those living with foster parents and only 3.15 for students living in children's homes.

Concerning factors that influence school performance, children raised in the child-protection system belong to the group that has the worse position since, among this group, parents having a lower level educational background and those having a disadvantaged labour market position are overrepresented. Two-thirds of the parents of students being raised in their own families have a permanent job, whereas this rate is 50% among students living with foster parents, and a mere 38% in the case of students living in children's homes. Also, there are more members in this group who have less than 50 books at home.

Parallel to the data of the Statistical Yearbook of Education, there is a significant difference as well regarding plans for future study: some 41% of students living in children's homes prefer a vocational school certificate, whereas this was only indicated by 11.3% of students living with their own families; 55% of students living with their own families intend to obtain a certificate of higher education, whereas this applies to 26% of students living with foster parents and to a mere 15% of students living in children's homes.

It is important to emphasize that the social network of students living within the child-protection system does not help in the realization of plans regarding further study or even the completion of school. As we have seen above, the influence of the peer group is much more likely to be negative in their environment than in the environments of students living with their own families.

Spain (Catalonia): The Catalan Government publishes data about young people in public care three times a year (<http://www.gencat.cat>). According to the published figures, the number of children coming into care in Catalonia during 2008 was 987. The total number of children under legal measures at 31st December 2008 was 7,524. At the same date, young people with after care provisions amounted to 1,200. No figures are available about how many children and adolescents in care have compulsory and post-compulsory qualifications in Spain or Catalonia.

The Spanish team adopted the initiative of developing a data collection of all children in care in Catalonia that were born in 1993. Only children in residential or foster care were included - excluding those in specialized residential care: centres for handicapped, asylum seekers, emergency situations or juvenile justice. Kinship foster care and 'other situations' were also excluded, because to get such information proved to be extremely complicated and costly. A long process was required in order to obtain a list of these children, to get permission to ask about the school they were in, to contact the school, and to ask about

each child. A file was sent to the schools with items about school achievements and about behaviour at school at the end of the school year 2008-09. Children born in 1993 became 16 during that year, and at that age most of the Spanish students end the Secondary Compulsory Education (ESO) and get the Certificate of Compulsory Secondary Education (CEP).

Table 7: Young people born in 1993 in Catalonia - comparing the educational situation of the general population and population in care

	General Population (age 16) 2006 (source PISA, 2006)	Population in care (age 16) (2008-09)
Without repetition at 4 ESO	70% (PISA)	39,8%
1 repetition during schooling	27% (PISA)	39,8%
2 or more repetition	3% (PISA)	10,1%
Especial Education School	Not included (*)	4,2%
Waiting for admission		1,7%
No information		4,4%
Total	100%	100%
Foreign students	9%	20%

*We asked the Department of Education in Catalan Government about the percentage of children in special schools; it is 1.9%, so less than children in care

As a consequence of this initiative, we can now compare some situations and achievements of the population in care (restricted to these born in 1993 in Catalonia) with the overall student population. These are not yet real systematic statistics, but at least they are representative of the 1993 cohort (Montserrat & Casas, 2009). Table 7 may be illustrative of the situation.

PISA data only include the population in regular schooling. Not only students in special education, but also those who have dropped out of school are not included. However, other existing sources do not make good all the omissions. Statistics of the Spanish Ministry of Education for the school year 2007-08 show that among the overall population in Catalonia aged 17, as many as 7,1% are still studying in compulsory education, and 1,2% are still there at the age of 18. We know that 72,8% of the overall population in Catalonia finishes compulsory education 'on time' but it has been impossible to clarify whether such a percentage only includes 16 year-olds, or also includes other ages. Therefore, after obtaining the new data from the population in care there are still some problems of

comparability with data from the overall population to be solved.

Sweden: By the time of this consolidated report the Swedish team has not yet been able to carry out the planned data re-exploitation due to the complexity of the process for obtaining all the required permissions. Their information will be presented as an annex to this consolidated report in the near future.

It is hoped that they will be able to identify the children/young persons in public care within the UGU-data and carefully study different variables in relation to educational matters. Combining this dataset with data from the National Board on Health and Welfare can give a unique possibility of collecting new knowledge of children and young people placed in care, and education.

United Kingdom (England): The Department for Children, Schools and Families (DCSF) publishes tables on the percentage of all 16, 17 and 18 year olds in education and training with breakdowns by age, gender, ethnicity, mode of study, type of learning, type of institution (school or further education college) and highest qualification obtainable from the course of study. However the tables on looked after children are not broken down into these categories. For the secondary analysis of national statistics, the intention was not only to establish the proportion of young people in further and higher education, but also to describe their characteristics, as reported in national data sets compiled from local reports submitted to the DCSF but not publicly available. Permission to examine these tables was sought from the relevant government sources, but this section of the work is not yet complete and will be added as an annex when it becomes available.

In 2008, 23,000 children started to be 'looked after' in England, that is, they entered the care system during the year ending 31 March. The number of children who started to be looked after varied greatly across the 38 study areas. This compares with 59,500 who were in the care system as a whole under the age of 18 and does not include those over the age of 18 and still receiving services from local authorities.

In England, five 'ethnic origin' categories are used to describe the young people in care. Of the 59,500 children, around 70% were of White ethnic origin, and the remainder were of Black or Black British (10 percent), Asian or Asian British (8 percent), mixed ethnic origin (7 percent) and other (5 percent). Three survey areas had considerably higher proportions of non-white ethnic origin young people in care, and these were all London boroughs.

In the last ten years, there has been a marked change to the care population, brought about by the arrival of unaccompanied asylum seekers (UASC). In 2008, there were around 3,500 such children in the care system (DCSF 2008) When young people complete compulsory school years, at age 16, the school leaving examinations are called GCSEs (General Certificate of Education), and they are graded A* - G. To move up to the next level of academic education, A Levels, young people generally need to have five GCSEs graded A* - C, although schools and colleges are free to vary this condition in individual cases.

Ninety two percent of all children get at least five GCSEs graded A* - G, but this is the case for only 43 percent of young people who are in public care in their GCSE year (Year 11) (DCSF 2008). Looking at those who achieve GCSEs graded A*- C, the difference is even more marked. Sixty five percent of all children compared to just 14 percent of children in care get GCSEs graded A* - C. Despite the size of this gap, it represents a steady improvement over the years since 1998, when official attention was first turned to the educational attainment of looked after children, and a considerable step forward compared to 2005, when only six percent of young people in care gained GCSEs at these grades (Department for Education and Skills, 2005).

Not all young people sit GCSEs. A more complete measure of the activity of young people in care at the age of 16 and their engagement in education, training and employment shows that just over two thirds of them are in full-time education, 15 percent are in full- or part-time training or employment, and 16 percent are unemployed (DCSF, 2008). Compared to all young people, fewer were in education and more in training or were unemployed at age 16, and again the London boroughs in the survey were doing significantly better than average.

Children in England sit national tests (known as SATs) at the ages of 7 and 11 years and there is an expectation that they will reach 'level 4' at the age of 11 (or Key Stage 2). Overall, at age 11, slightly more than half of children who are looked after in care gain the expected level 4 in English and Mathematics compared to all children in England, while in Science the proportion is better - around two thirds. This may indicate that children who spend longer in the care system do increasingly badly in the examination system. Or it may indicate that the older children are in the care system, the more difficult it is to focus on educational attainment. Some children who come into care around the ages of 13 or 14 may already have disengaged from formal education.

Table 8: Performance of children looked after compared to all children in Key Stage 2 tasks and tests (range of percentages)

Local Authority Type	English		Maths		Science	
	Looked After children	All children	Looked After children	All children	Looked After children	All children
2008						
England	46	81	44	79	60	88
London Boroughs n = 5	58% ¹	78-90%	58% ¹	76-87%	58% ²	86-94%
Metropolitan Districts n = 10	31-79%	76-85%	38-93% ²	74-82%	42-86% ³	83-91%
Unitary Authorities N = 12	40-64% ⁴	75-85%	41-57% ⁴	72-82%	47-86% ⁵	82-91%
Counties N = 11	28-67% ³	79-86%	34-67% ³	75-82%	24-80% ⁶	86-91%

¹4 LCS missing ²3 LCS missing ³2 LCS missing ⁴7 LCS missing ⁵6 LCS missing ⁶1 LCS missing

Source: DCSF

The English government collects data on 19 year olds who were in care as 17 year olds, with whom they have a duty to stay in touch. According to these figures, 65 percent of young people known to local authorities were in education, training or employment at age 19 in 2008 (DCSF, 2008).

A more detailed analysis shows that six percent of 19 year olds known to leaving care services were in higher education studies beyond A level (not necessarily university), 24 percent were in education other than higher education and 22 percent were in training or employment (DCSF, 2008). Table 9 shows the data by local authority type.

Table 9: Children now aged 19 years who were ‘looked after’ on 1 April 2005 then aged 16 years (in their 17th year) by activity (percentage)

Local Authority type	In higher education		In education other than higher education		In training or employment	
	FT	PT	FT	PT	FT	PT
2008						
England	6	0.3	24	3	22	9

London Boroughs N = 5	11 (2)	0 (1)	29 (2)	0 (3)	-	0 (4)
Metropolitan Districts N = 10	5 (5)	0 (1)	17 (2)	0 (7)	16 (2)	5 (8)
Unitary Authorities N = 12	0 (9)	0 (1)	15 (8)	0 (6)	22 (5)	0 (7)
Counties N = 11	4 (7)	0 (3)	17 (2)	1 (9)	20 (2)	7 (7)

(Figures in brackets are the number of local authorities in the YIPPEE survey where data was missing) Source: DCSF

The survey of leaving care teams for YIPPEE aimed to uncover more detail about these figures. Study leaving care teams were asked how many of the young people known to their service were attending university at the point of fieldwork. Four respondent local authorities were unable to give a figure. Of those that could, on average, nine percent of their young people were attending university. Relative to the other local authority types, London boroughs were doing better in getting young people from a public care background to university. On average, 17 percent of young people from London boroughs were at university, compared to six percent in metropolitan districts, six percent in unitary authorities and seven percent in county councils.

This is a recent and dramatic improvement: earlier estimates of numbers of young people from public care at university were just one percent (Social Exclusion Unit, 2003; Jackson et al. 2007). However, it should be remembered that local authorities participating in the study may have volunteered for the study on the grounds of their achievements in this area, and these figures may not represent the position in all local authorities in England.

Leaving care teams were asked to record the main placement type for those young people who were at university. For 21 of the 25 leaving care services that provided this information, the proportion of young people who had been predominantly in foster care as children was above the average. In other words, more than 70 percent of the young people in each of the 21 local authorities had spent most of their time in care in foster placements. In only one area, a Metropolitan district had young people attending university come from residential care in the same proportion as the national average, 14 percent.

Table 10: Number and percentage of young people known to survey leaving care teams attending further education or other training and aged 18+, by local authority type

	Range in numbers of young people attending FE/training aged 18+	Range in percentage of young people attending FE/training aged 18+	Average
London boroughs (n = 4)	19 - 183	37 - 63	53
Metropolitan districts (n = 9)	16 - 260	5 - 80	47
Unitary authorities (n = 7)	16 - 120	25 - 75	49
County councils (n = 8)	30 - 175	10 - 54	33

(Source: Leaving Care teams)

A higher proportion of those aged over 18 and known to leaving care services were attending forms of post compulsory education other than university although again there were some stark variations. Table 10 sets out the participation rate in further education or training by local authority type and shows that again the London boroughs were doing better than other types of local authority at getting young people into further education and training when aged 18 or over.

In interpreting this finding, it should be noted that nine of the 38 local authorities did not supply data for this question. Nevertheless, it does appear that attending further education and training is becoming much more common among those known to leaving care services. The variations between local authorities were most marked within the Metropolitan districts, with one recording only five percent of its young people in further education, compared to 80 percent in another.

Table 11: Range, percentage and average number of young people known to survey leaving care teams attending some form of post compulsory education aged 16+

	Range in numbers of young people attending some form of post compulsory education	Range in percentage of young people attending some form of post compulsory education (of all those in service 16+)	Average
London boroughs (n = 3)	31 - 212	60 - 88	77
Metropolitan districts (n = 7)	20 - 176	24 - 81	40
Unitary authorities (n = 8)	31 - 150	28 - 83	55
County councils (n = 5)	100 - 182	31 - 50	42

(Source: Leaving Care teams)

The survey asked about the placement background of young people in further education. However, twenty-five respondents did not supply information on this item so findings must be tentative. It would appear, however, that there is much less of a focus on foster care among those in further education than among those who were attending university. Only five of the local authorities reported that of those in further education, the main care placement had been foster care at a rate at or above the national average of 71 percent. Six respondents said that residential care had been the primary placement type at a rate above the national average of 14 percent. In four leaving care teams, the proportion that reported ‘another’ placement type was disproportionately high; this was usually supported lodgings or semi-independent living. It is important to note that these figures still indicate that the chances of accessing further or higher education from foster care are much better than from other forms of placement.

Looking more broadly still, the proportion of young people aged 16 and over known to leaving care services and in some form of post-compulsory education ranged from 24 percent to nearly 90 percent. The findings on this question are based on an incomplete data set as only 23/38 leaving care team submitted data. However, as Table 11 shows, again the London boroughs were doing better than other local authority types in terms of getting their young people into some form of post compulsory education after Year 11. On average, 77 percent of young people from London boroughs were in post compulsory education,

compared to 55 percent in unitary authorities, 42 percent in county councils and 40 percent in metropolitan districts. This may be partly related to availability of courses and ease and cost of transport. The extent to which leaving care teams achieve participation in any form of post-compulsory education might be considered to reflect a culture of educational participation in a particular area. While a few children, with aptitude, determination and support, may be expected to be exceptional and go to university, the extent to which those from public care, who have usually had difficult childhood years, and typically have low levels of educational engagement at school, are learning and participating in educational institutions when they are no longer legally obliged to do so, signifies a professional practice goal and culture.

Table 12: Educational data routinely collected by Leaving Care Services

Type of data collected	Yes		No		Missing data (number of Local Authorities)
	N	%	n	%	
Secondary school reports	22	73%	8	27%	8
Upper secondary reports	11	35%	20	65%	7
Exam results at 18	29	94%	2	6%	7
Attendance: Further Education institutions	20	65%	11	35%	7
Attendance: Vocational programmes	20	65%	11	35%	7
Record of discussions	31	100%	0	0%	7
Detailed chronological report	26	84%	5	16%	7
Data collated centrally	28	90%	3	10%	7
Data retained on Young Person's record	31	100%	0	0%	7

(Source: Leaving Care teams)

The professional culture of integrating education into the work of leaving care teams could also be assessed by the responses to the final set of questions in the survey. These were about the types of data that were routinely collected by the leaving care teams about the young people's educational profile. Table 12 sets out the responses to this question and shows that more attention was paid to recording the process of arriving at educational decisions within the team, than to collecting to data on the young people's educational performance (such as reports from schools or attendance figures). An exception to this was

that nearly all respondent leaving care teams kept a record of educational achievement at the age of 18 years.

Summary

In this chapter we have tried to develop a first approach to what can be known about the educational situation of young people leaving care through using available quantitative information or by creating new information, both through re-exploitation of existing data or by producing new data. The process has proved to be very costly and time consuming.

At the time of completing the report, three country teams are getting close to reporting on secondary analysis of official statistics (SW, DK and UK) which will be added to this report at a later date. A fourth team (Sp) has found a path to create a new source of data collection from now on which may be useful to obtain reliable information at relatively low cost - however, it needs time, because so far it has only been possible to obtain partial information about one cohort.

The most complete country data, from the UK (England) team, give grounds for optimism: The existence of leaving care teams has improved the educational achievements of young people in care after only eight years. However, figures are still far away from overall population means.

Data from the UK are a reference for all other countries: we suspect poor educational achievements from young people leaving care are the rule everywhere. However, not many of the data obtained in the UK can be compared with the data accessed from the other countries within this project.

There are a few apparently simple figures that may be easy to obtain in all countries, and could have a powerful informative utility. In practice, however, to make them comparable across countries would be very challenging. We refer to figures that allow us to **compare the progress in the educational achievements of the overall child population in each country with its own in-care population**, starting among the 16 year olds and following on, age by age. In four of the five partner countries compulsory education finishes at 16, the exception being Hungary, where the age is 18.

In Table 13 we show three of such informative figures: (1) children finishing compulsory education 'on time' in each country (usually at 16); (2) children delayed in finishing

compulsory education, because of repeating courses - this data could be disaggregated according to the number of years of delay (one, two or more) and age by age³ (3) children who dropped out (at 16 or later) or young people who were not able to finish compulsory education at later ages.

These figures are supposed to be available for the overall population in all countries; however, the third column is a complex one and is not easily available - it also depends on the age of the young person, like column 2. In relation to the population in care, what in fact is shown in Table 13 are data from different samples, at different ages, and obtained following different procedures. However, altogether, this table offers us an interesting insight into the situation. Last but not least, such data can be considered a first step to obtain equivalent data from different countries.

Table 13: Different data in each partner country on educational achievements of young people in care, compared to the overall population (excluding children with learning difficulties in special education)

	Data or sample details	Finished on time compulsory education		Delayed: repeating courses. May finish later		Dropped out or did not finish compulsory education	
		Care	All	Care	All	Care	All
Denmark	All 22 year olds on 31-12-2006 (a)	82,1%		17,9%	8,9%		
Hungary	No such data available in HU						
Spain (Catalonia)	All in-care born in 1993, the year they became 16	39,8%	70% (b)	49,9%	30% (b)	12,5% (c)	10-15% (d)
Sweden	GOLD and National Board of Health and Welfare (e)	86,3	96,5			5,6	0,6 (e)
United Kingdom (England)	At age 16	43%	92%	NA	NA	NA	8%

(a) In Denmark it is expected that young people complete compulsory school when they are 16 years old.

³ In England there is no provision for repeating a year due to lack of academic progress, at least up to 16, and therefore this could not be used as an indicator

(b) Data from the PISA (2006) study.

(c) Of 4,2% of children in care no information is available. Another 4,2% are reported to be in special schools and another 1,7% were waiting for a school place.

(d) No official statistics.

(e) GOLD (Gothenburg Educational Longitudinal Database) contains all those who are born between 1972 and 1992, and who were permanently living in Sweden at 16 years of age. N= 2 184 884. Children and young people who have been placed in care at some time in their life are identified through data from the National Board of Health and Welfare (0-20 years of age) - a total of 76 121 individuals born between 1972 and 1992.

These figures suggest forcefully that the problem of continuing education after care is only a further step in a problem which should be explored before leaving care: At 16 many of the looked after children are already in an extremely disadvantaged situation educationally. Therefore, the baseline shows clearly an inequality of opportunities for this population, compared to the overall population. Data pushes us to suspect that among the care population only about one half of the percentage of the overall population finishes compulsory education at the expected age.

To that previous risk of social exclusion, another fact will be added as soon as they leave care: they will have major priorities in life - to find a job, get money to pay for new accommodation - which will mean major new obstacles to continuing education, even for those who at 16 appeared to have the potential to do so.

Chapter 3: What happens when a young person in care reaches 18 years old, where to look for more information

Statistics and other official quantitative data offer us a first impression, but a very limited picture of the population we aim to study in more depth.

We need to know what happens in each country when young people in care leave the welfare or child protection system. We have different reasons for that: first to understand their life itineraries in relation to the support they can get and/or are offered. Second, because we need to identify relevant events and sources of information after leaving care in order to know what can be expected as mainstream in each country and what could be done to improve on present achievements.

In this chapter we provide an overview of the basic principles of service provision for young people leaving placements in out-of-home care in each partner country.

Denmark: When a young person turns 18 she or he is supposed to leave care. However, the municipality must carry out an assessment six months prior to the birthday of the young person if he/she would benefit from continued support. When considering leaving care support specific attention should be given to the young person's education and job situation. The young people can receive further support until they turn 23.

There exist four possibilities for support after the young person reaches the age of 18 (Law of Social Service):

- 1) Maintaining the placement in foster care or residential care;
- 2) Appointing a personal adviser;
- 3) Appointing a regular support worker; and
- 4) Establishing leaving care support.

In 2008 the municipalities reported 452 decisions to provide leaving care support agreed before a young person turned 18. In 48% of the decisions it was decided that there was a need for a residential care centre. In 5 % of the decisions a personal advisor was appointed and in 30 % a regular support worker was appointed. In 23% it was decided that there was a

need for establishing support when leaving a placement. In 10% of cases the decision was not finally made and 2% did not require leaving care support⁴ (Ankestyrelsen 2008).

Hungary: The Act 31 of 1997 on the protection of children and guardianship is the first comprehensive, independent legislation concerning child protection in the history of legislation in Hungary. It re-structured, improved and organized the system of protection for children into a comprehensive whole. The aim is to help children to get back to live with their own families as soon as possible, and if this is not possible, to help their integration into society, and to help them achieve an independent life. This Act is also the statutory base for supporting young people in after-care homes or in foster families until they reach 24/25 years old.

Young people who become 18 years old in the child protection system can leave the system or can choose to stay in after-care provision. Either way, they are entitled to receive *financial support* to be used to find a home if they were in care for at least 3 years without a break and reached age 18 in care, and if their financial assets or value of their property is below 60 times the amount of the minimum pension. Those who leave the system can request *after-care service* (help to create an independent life, to choose and continue studies, and to help solve social challenges, etc.) for a one year period up to age 24/25. Those young people are eligible for *after-care provision* (to stay in the care system until the age of 24/25) who continue their studies, or cannot lead an independent life, or are waiting to be admitted to a home for the disabled. After-care provision supports young people in several ways:

- provides accommodation in after-care homes, or in a separate part of children's homes or in foster families
- a personal adviser is appointed for each young person
- the fees for their studies are covered
- young people receive a monthly stipend

In 2007, the Parliament passed the National Strategy called 'Legyen jobb a gyermekeknek' ('Making Things Better for our Children') for the years 2007-2032⁵, the goal of which is to

⁴ The percentages are based on the total noted figures of a need for and a referral to leaving care. The percentages do not reach 100% as in some case on decision can contain more than one type of leaving care support.

⁵ Parliamentary Resolution 47/2007 (V.31) OGY

reduce child poverty and improve chances for children. It requires the government to prepare an action program every three years, based on the National Strategy, to define the tasks involved in designing the legislative, professional, and organizational conditions required. It covers all children, but by interpretation, priority must be given to those whose interests are the most seriously violated, the ones whose development is the most acutely limited by need.

Even though the National Strategy (Hungarian Parliamentary, 2007) does not specifically address the educational career of young children and adults in public care, there are at least two relevant groups of targets. In the first group, these are:

- Ensuring that the vast majority of special needs children continue their education in an integrated environment and with professional support enabling them to progress to the maximum of their abilities.
- Reducing the number of significantly 'over-age' children in a given school class to a minimum through pedagogy within the schools and extracurricular support.
- Eliminating all forms of school segregation.
- Radically reducing the number of young people who leave secondary school early by carefully considering choices of career.
- Ensuring that all young people finish school with knowledge useful for the labour market and that they can use it to the maximum.

The second group of targets is concerned with improving personal and specialized services focusing on families with children. These propose that the professional level of persons working in the services has to be significantly improved. The attitudes of service providers working with children need to be altered, by making changes in their training, exerting stronger supervision, and by retraining as required. All basic services have to become available in all sub-regions. Special attention needs to be paid to levelling out regional disadvantage and guaranteeing equal access. Clear-cut professional standards are to be developed, including protocols, and user satisfaction with the services is to be monitored.

The goals set are:

- Segregation-free institutions⁶

⁶ This relates to the discussion in the National Strategy referring to the fact that disadvantaged children usually study in worse infrastructural conditions and cannot access good quality

- Equal opportunity in accessing services
- Professionals with up-to-date knowledge
- Radical reduction of the number of children not covered by services
- Flexibility, services able to change to respond to needs
- Regular and continuous cooperation among the professionals in all areas

In late 2007, the related action plan was issued. It describes concrete goals with dates for achieving them and names the responsible ministers. Again, children in public care, or with a public care background, are not named as a target group, but goals are set to reduce social disadvantages, to help young people to achieve higher educational levels beyond the compulsory schooling age, and to support those Roma young adults who study in higher education institutions both financially and mentally. The deficits to be addressed apply to many young people in care, for instance those from a Roma background are known to be significantly overrepresented in the care population (Nemenyi and Messing, 2007).

Spain (Catalonia): There are no specific policies addressing young people from a public care background and their participation in education beyond compulsory school at national Spanish level. The competent Ministries are the Spanish Ministry of Education and the Spanish Ministry of Health and Social Policies.

In Catalonia the competent regional ‘Ministries’ are the Department (*Conselleria*) of Social Action and Citizenship and the Department of Education. **The maximum age of leaving care is legally 18 years old⁷.** If they live in either family foster care or kinship foster care they can continue to stay if both parties (the young person and the foster family) agree, but without any financial or other support. In practice, most of them do stay on in their foster placement. If they live in residential care and have nowhere else to go, and/or they need to receive guidance and help in the socio-labour integration process and to rent accommodation, they can enter the interdepartmental plan for over 18s, from 18 to 21 years old.

pedagogical services that help diminish their disadvantages. It also refers to the need to change the often-prejudiced perceptions and attitudes of professionals working with children.

⁷ An exception can be made for remaining legally in care after 18 when young people have officially a certificate of disability and they do not have family and need to stay in a residential home; in these cases, they may continue under child protection measures until other legal measures are taken.

The Area of Support to Young People After under guardianship and ex-guardianship (ASJTET) belongs to the Secretary of Childhood under the Department of Social Action and Citizenship and its approach is interdepartmental including other departments like Education, Employment, Justice, Home Office and Health. It can also include young people in care at residential centres who have turned 16 and who are taking responsibility for their personal autonomy and are preparing to enter the labour market. The Plan has a programme of socio-labour integration that includes training, support in the integration process and gaining work experience in collaborating companies. Young people without their own means of support are able to reside, temporarily, in subsidized apartments. In some cases, financial help has been given to rent a flat or young people have been placed in special homes to learn independence skills.

ASJTET is the service in Catalonia getting in contact with a major percentage of young people that have been in care. Although there is no official precise figure of how representative are their clients of the overall population in care, their own estimation is that they reach about 60% of those that have been in **residential care**, but a much lower percentage of those in foster care. According their data, about 35% of youngsters in care are at present asking for the ASJTET support **before** leaving the child protection system in Catalonia. An unclear additional percentage asks for their support **after** leaving the system. So, overall, this centralised service may have information about 40% to 50% of all the population in Catalonia that has been in care.

This service is not compulsory for young people so it does not reach at least two groups of youngsters that have been in care: (a) those that have not asked for any kind of public support because they do not want it or think they do not need it (mostly young people that were in family foster care - both, kinship and non-kinship care -, or in family reunification programs); (b) those who do not accept the conditions to benefit from the services

In 2008, the ASJTET published a study done through 77% of placements, basically residential homes, in Catalonia which have placed adolescents between 15-18 years old (ASJTET, 2008). The final sample was 478 individuals, 60.5% were men. 58% were Spanish nationals and 43% were 17 years old.

Concerning their educational background, 55% of the sample had functional language skills both in Catalan and Spanish, but 40% had only Spanish. Most worrying is the fact that 52% had not completed compulsory education, and only 5% of the sample had started post

compulsory studies.

Sweden: According to the Social Services Act (SSA), a placement in care is considered as voluntary assistance, and is provided on the condition that there is an explicit *need* of assistance. Thus, a placement in care is offered to the parents as *assistance* to help them in a situation where they cannot perform their parental tasks in an adequate way. All cases are assessed initially to establish need, and then reviewed every six months, to investigate if the need for assistance continues to exist.

If a child or young person is placed according to the CYPÄ (Care of Young People Act) due to inadequate parental care or other difficulties connected to the situation in the birth home, the placement formally ends at the age of 18. Youth justice is included in Swedish child welfare, and in cases where young persons are in care on a mandatory care order due to their own behaviour, the placement should end at the age of 21 (Norström and Tunved 2004).

In Sweden, a young person attains majority at 18. As a consequence, a young person placed in foster care or residential care because the parents have asked for this assistance according to the SSA can no longer be placed on the same grounds after his or her 18th birthday. The same situation occurs when a young person is placed under the CYPÄ. When young people turn 18 years of age, they have to ask for assistance on the grounds of their individual circumstances, and not on the situation of their birth parents.

This legal formulation is of specific importance for young people placed in care. Some social services departments want to formally end the placement at age 18, which in many cases would present problems to the young person. For example, secondary education, although not compulsory by law, is considered to be essential in all other ways. To be able to find a job, it is vital to have completed secondary education. As secondary education consists of three years, all young people are at least 19 years old when they take their exams. If a young person's placement is terminated at 18, their chances of continuing education and finding employment are jeopardised.

Most social services departments are willing to find solutions, and keep the young person in care until secondary school is completed. However, a recent pilot study (Höjer and Sjöblom, in progress) gives evidence of frequent discrepancies between the views of social services,

foster care case workers, and foster carers/residential staff concerning when the placement should end.

In 2008, the SSA was amended. Social welfare committees are now, for the first time, responsible for support and help to children and young people after they have left a placement in out-of-home care. This indicates growing awareness of the importance of a well planned care leaving phase for young people.

In addition, amendments to the SSA emphasise the importance of young people's access to adequate support with housing, help to find a job, guidance in finding suitable education or training and also help and support in contacting birth family, both parents and relatives. It is explicitly stated that young people may need to stay in their foster home until they have completed their secondary school (gymnasium). It is hoped that this will provide better and more formally systematised support from social services to young care leavers.

United Kingdom (England): Although there has long been provision for children to remain in care up to the age of 18, a tradition of leaving care at 16 became established that has only recently been reversed. In 2008, of all young people who left care at age 16 or older, 61 percent left on their 18th birthday, 24 percent at age 16 and 15 percent at age 17 (DCSF 2009).

Each local authority in England has a 'leaving care' team. These teams were largely set up after the Children (Leaving Care) Act 2000 (CLCA). They are dedicated to the care and support of young people who have been in the care of the local authority as children and increasingly operate on a multi-agency basis.

The overall aim of the Act was to reinforce local authority responsibility for care leavers up to the age of 21 and to develop the idea of 'corporate parenting' for this group of young people after the point at which they leave local authority accommodation or a care order is terminated (ibid.). It was implemented after a long period during which local authorities had powers but not duties in relation to young people leaving care, which meant that wide differences in local authority provision for care leavers emerged (Allard 2002; Broad 1998, Jackson et al., 2003). The CLCA was designed to even out variations in local authority provision through the prescription of duties, which were to:

- Delay young people's discharge from care until they are adequately prepared

- Improve assessment, preparation and planning around the leaving process
- Secure the availability of financial and personal support to young people once they have left care.

The Children Act 2004 further emphasised the importance of educational participation among young people in care (s.52), saying ‘the duty of a local authority ... to safeguard and promote the welfare of a child looked after by them includes in particular a duty to promote the child’s educational achievement’.

The Children and Young Persons’ Act 2008 contains a range of provisions to support the transition from care to adult life. These include a £2,000 bursary for care leavers going into Higher Education and extension of the right to a personal advisor and a pathway plan to all care leavers who start or resume education or training up to the age of 25.

The majority of leaving care teams included in the study were run as part of the local authority’s services for children and young people, and located under the Children and Families Directorate within Children’s Services. Two out of the 38 services were delivered by a national children’s voluntary organisation (NGO) under contract with the local authority and in a third the service was delivered by the local authority in partnership with a local voluntary organisation. Voluntary organisations were also contracted to deliver specific aspects of support alongside statutory services such as fulfilling the role of personal advisers. Overall, we found that there were four ways of organising leaving care teams and the services provided:

- continuation and extension of support already being provided to children in care before they reached 16 years of age
- an after care service responsible for young people once they have technically left care (18 - 21 years)
- a service catering for children and young people from 14 or 15 through to 21 years or older if still in education
- an integrated team retaining responsibility for all looked after children and care leavers (0 - 18 years)

The aim of the leaving care teams was to offer a specialised ‘post care’ service for care leavers, usually falling under the general provision for looked after children as a whole or as part of the provision of services for young people aged 16 and over. An earlier study had suggested that young people perceived leaving care teams as offering both emotional and

practical support in a different way from the social work teams they had known when they were under 16. Leaving care teams offered support on a more unconditional and negotiated basis than social work teams did (Cameron et al. 2006).

The structure of leaving care teams varied across the study sample depending on factors such as type of authority. For example, county councils typically operated across large geographical areas and had a decentralised model of service delivery with separate locality teams. Structurally, services differed in terms of staffing, multidisciplinary working and service provision. They were also very different in size, ranging from 10 members of staff to 35 and the staff came from a range of professional backgrounds including education, health, police, youth offending and so on.

At the centre of all the teams were leaving care managers and what are known as 'personal advisors who offer support to young people with issues to do with housing, education, employment and training. Personal advisors come from a range of professional backgrounds, such as social work, teaching, police or youth work - there was no one core discipline underpinning this work. Many of the teams also had specialist advisory posts, such as those focused on training and careers advice, known as Connexions. At their best, services reported having a maximum of two full-time specialist Connexions advisors who provided expertise in the areas of education, employment and training and worked exclusively with care leavers; at worst, two services reported difficulty in accessing the Connexions services at all.

The two leaving care teams contracted out to the voluntary sector saw their distancing from the local authority as a distinct advantage in the work. They felt it was easier for them to engage with young people who had had previous negative experiences with social care staff. One leaving care manager put it:

NCH (National Children's Homes) do exactly the same work as social care staff but provide a voluntary perspective, so if a young person is disillusioned with social care they have got the opportunity to have a Personal Advisor who is not a social care worker (Leaving Care Manager)

Leaving care teams also developed strategic links with other service providers. In some cases the team was expanded to include professionals from other agencies and they worked together on a full-time basis; in others, the arrangement was less integrated, with perhaps

part-time secondment, joint meetings or agreed working arrangements. The majority, however, worked only with the education and health sectors.

Key responsibilities of the Leaving Care team

Leaving care team managers in the survey reported two main areas of responsibility: i) offering practical help with making the transition to independent living; and ii) encouraging participation in education, employment and training. Both these responsibilities involve planning ahead for and with young people.

The key mechanism for this purpose is the Pathway Plan, designed to be an extension of the care plan, devised and regularly reviewed during the later years in care. The main support figure for young people within the leaving care teams is the allocated Personal Advisor, whose role is to provide advice, advocacy and support, and, according to the Act, young people should be involved in choosing an appropriate person to fulfil this role.

The CLCA promoted a holistic approach to the leaving care process, in that all the core aspects of a young person's life should be attended to through the Pathway planning process - personal support, accommodation, education, training and employment, family and social relationships, life skills, financial assistance, health and contingency planning (DoH 2001). The Act envisaged that a multi-agency and coordinated approach would be required to achieve this multi-dimensional goal.

The Personal Advisor, as the specialist coordinator of the pathway plan, is at the core of the holistic approach to leaving care. In theory, he or she involves all of those with an interest in the support of the young person, including themselves, and steers the plan to fruition. The primary aim is to address needs, which may be multiple and complex, at an early stage, and to ensure that information is available about sources of support and that these are accessible when needed, drawing on all of the relevant agencies such as those noted above (Cameron et al. 2006). Leaving care teams were more specifically guided by two performance indicator targets set by government: one was to increase the proportion of care leavers living in accommodation that was suitable for their needs; the second was to increase the proportion of care leavers aged 19 who were engaged in education, training and employment.

The survey showed that eight years after the CLCA was implemented, considerable variation persisted between local authorities in the approaches taken to achieve the aims of the Act,

with services offering support and advice in a variety of different ways. We will document some of these below.

Leaving care teams had a responsibility to secure suitable accommodation for young people once they left foster or residential care, which usually happened at around the age of 18 years. A range of options were reported as available, including supported lodgings, training flats, semi-independent and independent living. Other practical support provided included financial help to decorate and equip newly acquired accommodation and loans of equipment to refurbish accommodation.

Some Leaving Care teams had formed strategic links with local housing providers to prioritise care leavers. For example, in one area, housing providers leased accommodation to the leaving care service, which then sub-let it to young people. Another scheme recruited private landlords to accommodate care leavers in semi-independent living arrangements, and in a third case foster care placements were converted into supported lodgings or semi-independent living arrangements. There were also examples of funding local providers such as the YMCA to offer accommodation and support to care leavers. Twenty four out of the 38 LCMs interviewed cited housing as a main priority of their service provision for young people and 12 reported that their team had a dedicated accommodation officer.

In terms of support to live independently, one leaving care team had developed two preparatory courses for young people. One was called 'Managing your own home' and was a pre-tenancy training modular course delivered by the team's youth worker. It was a 10 week accredited course where young people worked in groups, to develop their independent living skills and get a recognised qualification at the end of the course. The course covered topics such as budgeting, cooking, cleaning and other practical matters. The second course, called 'Maintaining and Decorating', was also delivered by a youth worker but through the local college and followed up the first course by teaching young people painting and decorating, plumbing in the washing machine, changing plugs/light bulbs and so on.

Summary

Although the official age of leaving care is in principle 18 years old in the five partner countries studied in this project, the characteristics of after-care procedures and services are rather different across the five countries, and, therefore, the accessibility of information about young people after care becomes diverse - linked to the different social agents involved.

In one country the post-care services are joined together with the child protection agencies (Hu) and, in fact, they are in contact with young adults (19-24/25 years of age) who still remain in care (about 4.000 in all Hungary), and with those who left the system but requested after care service (about 800). In two countries these service are absorbed into the general social services for the overall population (Dk and Sw). According to a Danish research, in 2006, just 14% of the young people in care were provided with further support after leaving care at the age of 18 (Ankestyrelsen, 2008) and therefore those are the only accessible sample. In Catalonia (Sp) a specialised and centralised agency is giving support to a proportion of young people, estimated to be between 40 and 50% of the population formerly in care. Only in the United Kingdom do post-care teams exist, that are supposed to be in contact up to the age of 19 with all young people who were in care at 16, but actually reach only 90 percent of them.

Table 14: After-care populations that (in theory) can be tracked through identified services in each country.

	Population that can be tracked	Identified services	Population reached N =	% of all of the same age that were in care
Denmark	Those who are provided with support after leaving care at the age of 18	Local authorities		14%
Hungary	100% of young people still living within the child-protection system (young adults 18-24/25 years old)	TEGYESZ (child protection county agencies)	4,053 (31-12-07)	90%70%
Spain (*) (Catalonia)	Those asking for support before leaving care or after: About 60% of those that have been in residential care, but a much lower percentage of those in foster care.	ASJTET (centralised after-care support services)	1,202 (31-12-08)	40-50%
Sweden	No after care services			
UK (England)	100% of those that have left care after age 16, until aged 19 years	Local after care services		90%

As a consequence, efforts to contact key informants that may facilitate information on educational achievements and pathways of young people after care need to follow different routes in each country, and, except in the UK, they will have limitations or biases, because the possibilities of being in contact with young people after care are limited to those with

some specific characteristics (i.e.: those who receive some kind of support). Managers of different kind of social services, including post-care services when available, have been our focus for additional data collection.

Chapter 4: Contextualising leaving care support in practice: Information provided by managers of social services in each country

A total of 88 managers of welfare services responsible for young people in or leaving care were interviewed, and, in Sweden, partial information was obtained from a further 111 telephone interviews with managers (see Annex I for questionnaire; Annex II illustrates the few items that for various reasons have not been included in some of the countries). In this chapter we present the results obtained after analysing the answers of the sample of managers in each country.

Denmark: The professional culture of integrating education into the work of municipalities could be assessed by the responses to the final set of questions in the survey to managers of services. These were about the types of data that were routinely collected by the municipalities about the young people's educational profile. Table 15 sets out the responses to this question

The table shows that none of the documents are collected by all municipalities and the extent to which they collect documentation varies from municipality to municipality to which extent that they collect documents. The documents collected are retained on the young peoples' record and are only used in relation to writing up action plans. It should also be noted that the group leaders sometimes hesitated when asked about the collection of documents. Therefore it is our belief that their answers sometimes were more a guess than actually knowledge about it.

It is worth mentioning that when the group leaders were asked about exam marks from other educational institutions one of the managers replied:

'they do not pursue education beyond compulsory school that is seldom. Well, it should be upper secondary school next; we have some in upper secondary school although it is only a few. I think in some situations when we are revising the action plan and come to the point about school, then we ask how are you doing and how did you do in your exam'.

Table 15: Educational data routinely collected by municipalities in Denmark

Type of data collected	YES	NO
Secondary school reports	2	3
Individual school curriculum	2	3
Exam results - compulsory school	2	3
Exam results - Further Education institutions	2	3
Attendance: Vocational programmes	2	3
Record of discussions with young people and education	1	4
Detailed chronological report	1	4
Data collated centrally	-	5
Data retained on Young Person's record	5	-

(Source: Interviews with 5 managers responsible for children and young people in care)

Generally it seems fair to conclude that the municipalities do not have the same approach to collecting documents. One respondent remarked that we had give her some aspirations as to which document to collect. Another respondent justified the fact that that they do not collect much evidence on school progress by explaining that they had been preoccupied with a recent reorganisation.

In Denmark, five interviews with group leaders responsible for children and young people in care from five municipalities revealed that few, if any young people had gone to university.

Hungary: The 20 TEGYESZ agencies investigated cover approximately 90% of persons living within the child-protection system in the country; therefore, the survey actually provides a national overview. Based on the available data, we can claim that basic statistics on those living within the child-protection system have already been available within in the TEGYESZ agencies included in the study. According to these, there are currently (as of 31st December, 2007, the date of the last available official statistical summary) 17,220 children living within the child-protection system in Hungary, and 3,673 children under 18 years of age were admitted into the system in the given year. Based on the replies provided, there are 4,053 young adults over 18 who, are in after-care provision, in Hungary; therefore, they may be used as the base population for the study.

However, when we enquired about the ratio of those raised primarily with foster parents compared to those who were primarily brought up in children's homes and in residential care within the child-protection system, less precise answers were obtained. About a third of the investigated TEGYESZ agencies replied to these questions that the figures given were estimates, rather than an official statistical figure.

In fact they should have available official data concerning this issue, since they are obliged to keep records of this information as part of their reporting obligations for the regular supply of data on those living within the child-protection system in their respective counties. But it seems that they cannot easily access data relating to the type of placement. Factual information is, probably, more likely collected in connection with the annual reporting obligations. Nevertheless, it is worth mentioning that these estimates are probably accurate: for Budapest or Heves county, precise percentages were given (in the case of Budapest, 27% and 73% and in the case of Heves county, 50.8% and 49.2%) as the 'estimated' proportions of those living with foster parents and in children's homes, respectively.

Data provided by the Hungarian TEGYESZ agencies mainly show that the automatic collection of data and school reports of those within the child-protection system is not characteristic of these agencies. The collection of school leaving certificates is the most typical data collection; however, these are only kept, systematically, for every child and young adult in 6 out of 20 TEGYESZ agencies. The least-collected types of documents are those relating to consultations about the youths' schooling aims, and those containing detailed, chronological records of the key events of school progress - which does not mean that there are no consultations with the children or young adults about school progress or the qualifications they wish to obtain, but only indicates the fact that, in most cases, these records do not make their way into the central archives of the TEGYESZ agencies. Nevertheless, the school reports themselves are held at the place of care of the child/young adult concerned.

The small proportion of TEGYESZ agencies collecting data and certificates shows that data collection regarding school progress is a decentralized task. This may partially be due to the fact that there are few data on education regarding the studies of those within the child-protection system included in the data obligatorily collected as part of the reporting obligations of the agencies; therefore, the county-level agencies do not automatically collect information related to studies. Data and certificates relating to school progress are typically used when preparing or reviewing a care-plan (e.g. in the course of career-

planning), and they also provide key information when changing the place of care. Many respondents have highlighted that these data are used within after-care provision (as an appendix to the agreement, when planning after-care provision).

Regarding the number of university and college students, a substantial majority of TEGYESZ agencies were able to provide, at a minimum, estimated data, with the exception of one county, which reported, in connection with the part of the questionnaire dealing with education, that the agency neither keeps any kind of records on the educational data of children/young adults, nor do they collect this type of information centrally; therefore, they cannot comment on it). It seems that, compared to basic statistics, information related to studies is available to the TEGYESZ agencies to a much lesser degree. About 60% of them were able to reply to the question concerning the number of university or college students. Approximately half of them could provide data concerning the type of placement of those in further and higher education, and the number participating in other vocational training.

The available data clearly show that very few of those brought up in the child-protection system enter college or university, only approximately 6% of those older than 18 years of age. However, the proportion of those attending college, university or some vocational training while living in after-care provision is very high (more than three quarters at the national level, and 100% in the case of those 9 agencies out of the 17 which replied to these questions), which is due to the characteristics of the system, as it is a prerequisite for staying in after-care provision that the young adult should work or continue some sort of studies.

The information received from TEGYESZ agencies on the relationship between the type of placement and students attending higher education institutions and vocational training courses can be summarised as follows: **a higher proportion of young adults brought up with foster parents attend university and college, while most of those who participate in vocational training are likely to have been raised in children's homes.** However, we cannot disregard the fact that replies concerning the type of placement are not derived from official statistics. Thus, it may be possible that the replies also reflect stereotypes related to the continuation of studies.

Experts believe that the reason for the bad school performance and low levels of qualification of those living in care is that many of them enter the system as adolescents, and their families do not recognise the values of learning and obtaining qualifications. Many

have pointed out that long years of upbringing in an unsettled, deprived family background have significant effects on school achievement and school performance; thus, these children have already accumulated an enormous number of shortcomings during primary school. A typical problem is the lack of motivation of the children and youths. It has been stated, many times, that those living in foster care are more motivated, since personalised education and attention is more effective, and since foster parents also provide a stronger role model. It is also pointed out that many children prefer work over study, in order to start a self-sufficient life, become independent, and to escape from the care system as soon as possible.

Interviews with the employees of the 4 selected TEGYESZ agencies included in our study also indicate the causes listed above. It has been indicated as a problem that, for instance, there is no financial support that targets youths who have been brought up within the child-protection system. There is also a great need for affirmative action: for instance, tuition fees or the expenses of studies greatly burden these youths who would be better supported and motivated by various scholarship opportunities. It was emphasized that the youths are already starting from a disadvantaged position, they have shortcomings regarding their socialization, their skills and abilities are poorer, and they struggle with a lack of self-confidence and self-esteem.

Moreover, there is often no role model to motivate the youths; they are much more alone in making their decisions than a child brought up in a family. In addition, a large number of foster families are poorly educated, unemployed, families of low social status, so they cannot convey, authentically, the importance of studying.

Experience shows that whether or not one can complete grades 9 and 10 after the eight grades of primary school is a very important step, one that determines the continuation of studies of those brought up within the child-protection system.

Experts urge the strengthening of the basic education system, and they also suggest the better preparation of teachers so they can handle the problems of students living in the child-protection system. In addition, they emphasized the importance of psychosocial support for children, both at school and within in the child-protection system.

Several professionals stated that children need successful persons to serve as role models, so they might actually be empowered to see a better alternative. In addition, it would be important to introduce some form of financial aid, aiming at increasing the proportion of

those continuing their studies through higher education, based not only upon school achievement, and, where there is motivation in those living within the child-protection system, some sort of scholarship should be made available to them, to help them in the continuation of their studies.

Spain (Catalonia): As reported in Chapter one, in Catalonia a sample of 13 managers from different key services were interviewed. Two kinds of these services, child protection teams (EAIA) and general social services teams (SSAP) have confirmed that they do not routinely collect the data requested in the questionnaire, although occasionally they might have a copy of school reports.

The ASJTET is the only service that normally collects data about the educational level of young people over 16 years old, as well as about their attendance at further or higher educational institutions or in vocational programmes (Table 16), as long as they are receiving support from its own services. This information is usually retained on young people’s individual records and is available to practitioners in the services.

Table 16: Type of data routinely collected by services in Catalonia.

Type of data	ASJTET	EAIA	SSAP
i) School reports from secondary school (age 11- 16 years)		Not routinely, but sometimes	Not routinely. It happens that
ii) School reports from upper secondary school (age 16 - 18 years)	Information about the educational level	there is a copy of the school report in the folders.	in few cases there is a copy of a school report in the folder.
iii) Examination results from school leaving at age 16		Not routinely.	
iv) Examination results from school leaving at age 18			
v) Attendance at further or higher educational institutions	Yes		
vi) Attendance on vocational programmes	Yes		It depends on the case, but sometimes they have that information.

- | | | | |
|---|----------------|----------------|----------------|
| vii) Record of discussions about young person's educational ambitions and measures to help them realise ambitions | Not routinely. | Not routinely. | Not routinely. |
| viii) Detailed chronological report on each individual's progress through education | Not routinely. | Not routinely. | Not routinely. |

On the other hand, none of the three kind of services keeps any records with detailed chronological information on each individual's progress through education or on young people's educational ambitions and on the measures taken to help them to realise them.

Table 17: Children in and from care in Catalonia

Data about young people in care with after care provision	Summary of all data obtained from services surveyed	Rate to calculate a country figure	Total country figure: (S) statistics (E) estimate	Observations
12. No. of new under 18s in care (2008) in our area			987 (S)	Data for all Catalonia
13. No. of young people under 18s in care at the last census date (31 st Dec 2008)			7.524 (S)	Data for all Catalonia at 31 st Dec 2008
14. No. of young people with after care provisions				In after care provisions in Catalonia at 31/12/08
a) Aged 16 - 18			a) 218 (S)	
b) Aged 18 +			b) 984 (S)	
c) Or all together			c) 1.202 (S)	
15. Proportion of the total who had most of their placements in foster care	43 (S)	16,2%		
16. Proportion of the total who had most of their placements in residential care	303 (S)	60%		

17. Proportion of the total who had most of their placements in other types of accommodation	93 (S)	23,8%
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As pointed out in Table 17, at 31st December 2008 in Catalonia young people with after care provisions amounted to 1,202. Of this total, 218 were aged between 16 and 18; and the majority - 984 - were over 18. Most of them came from residential care (60%), and only a few from family foster care (16.2%). The other 23.8% came from other types of accommodation which include supported flats, pre-adoption and living at home under legal supervision (Table 17).

According to ASJTET (that as previously stated reaches about 40-50% of the after-care population - mostly from residential care), at the end of 2008 only 88 young people receiving their services (7% of the total) were continuing their studies in upper secondary education and not very often at university. These data are not available disaggregated by type of placement. It is not possible to know how many may be getting support from other social services.

Sweden: As mentioned before, no quantitative data has been collected in the interviews in Sweden, as managers were not expected to have such information. This assumption proved to be correct - when asked what statistical information the managers had of how many young people left care, how many who had succeeded in their exams, etc., all of them answered that they did not know. In this section only results from telephone interviews with managers are presented (see description of the sample in chapter 1), while the more detailed analysis of the 8 face-to-face interviews will be presented in other reports.

All the open questions have been categorised, to be able to analyse them quantitatively. Categorising these questions was sometimes difficult, as each answer could contain several separate issues, and some squeezing of quotations into categories has been inevitable. The answers of the questionnaire have been analysed and some summarised results are the following:

- 10 of the managers (9%) reported specific programs to support education for young people in care or leaving care.
- 20 local authorities (18%) used private agencies that provided programs for educational support to young people.

- Only four local authorities had any specific programs for supporting education for young people leaving care.
- Only five local authorities had a specific policy document relating to after care of young people placed in foster care or institutional care.

Table 18: How do social services prioritise education for young people leaving care in your LA?

Comments	Frequency	%
Improved situation - recently more focus on education	8	10,8
School is important - with action	12	16,2
School is important - without action	23	31,1
Joint responsibility school - social services	7	9,5
Schools should be responsible!	3	4,1
Little interest in this issue	7	9,5
Focus on problems and emotional well-being of YP - little focus on education	4	5,4
Problematic contact with schools	2	2,7
Goal is completed secondary school	3	4,1
Goal is completed upper secondary school	3	4,1
YPLC want to work, not study	2	2,7
Total	74	100,0
No response	37	

Seventy four out of 111 managers chose to comment on the question of how they prioritise education for young people leaving care (Table 18). The categorisation of these answers was quite complicated. The categories 2 and 3 have had to include a lot of rather vague comments. Comments that implied any kind of action, such as specific programmes or specific focus on education in the regular six-monthly placement evaluations, were categorised as ‘School is important - with action’. More general and unspecific comments, which implied no actual practical commitment of any kind, were categorised ‘School is important - without action’. The latter is also the category where the majority of the

answers - 23 answers (20%) - can be found. Eight managers (11%) state that the situation has improved over recent years. In their answers they identify the Integrated Children's System (BBIC) as the reason for this improvement. Seven managers emphasise the importance of cooperation with schools, whereas three state that education of children and young people in care is the responsibility of schools alone. Eight do not think education is a prioritised issue. Four mention the fact that social workers generally focus more on the problems, and the well-being of the young people than on education. Three stated that their goal for young people leaving care was for them to have completed secondary school, whereas three others set their goal higher - completion of upper secondary school. Two respondents had experience of problematic contact with school, and two state that young people leaving care would prefer to find a job than move on to further education.

United Kingdom (England): The 38 managers interviewed for the project included representation from all the different types of administrative areas in England: London boroughs, metropolitan boroughs, unitary authorities and shire counties. They included prosperous areas and others of high social deprivation, cities, small towns and rural areas. The findings of the survey can therefore be considered reasonably representative, with the caution that those who chose to respond may be more confident of the quality of their services and the extent to which they are achieving the government's objective of raising the educational attainment of looked after children.

On the positive side, our analysis shows a steady improvement in the proportion of children in care achieving the government target of five or more good quality (A*-C) passes in the General Certificate of Education (GCSE). In the past GCSE used to be the school-leaving examination, but now for most children it is just a marker along the way, although it remains an entry qualification for Advanced Level (upper secondary) study and Further Education Colleges. However, as the published figures show, the attainment of children looked after by local authorities remains far below that of the general school population, and this is a major barrier to their participation in further and higher education. According to our respondents, many young people of normal intelligence have serious literacy and numeracy problems due to irregular attendance at school, and some have not attended school for several years by the time they reach the official leaving age. It might be argued that this is the group that is most urgently in need of further education and evidence from special projects, such as the Coram Family Education Service, suggests that by the age of 18 or 20 they can be re-engaged and eventually achieve in line with their ability (QCDA, 2009).

Comparing our findings with reports in the literature, it is clear that the government focus on raising educational attainment has born fruit at policy and managerial levels (DCSF, 2007; Berridge et al, 2009). In contrast to earlier findings, joining up care and education in Departments of Children's Services has produced a much stronger focus on education than in the past when it received very little attention from social workers or Social Services managers (Jackson & Sachdev, 2001). All of the leaving care managers who took part in our survey recognised the great importance of education and gave it high priority. Leaving care teams operate in many different ways, however, and some still seemed uncertain of the extent to which they were responsible for promoting educational achievements.

Given the huge gap in attainment between looked after and home-based children, it is understandable that the emphasis is on raising basic levels of educational performance. This is reflected in the available statistics. The government target relates to reducing the proportion of young people who are NEET, in other words it is a negative aim, not a positive one. It says nothing about the quality of the young person's experience, even though there is all the difference in the world between the prospects of a care leaver beginning a university or college course at age 19 and one in insecure, low-paid employment.

There is a strong social class element in post-compulsory education. The norm is for middle class children to remain at school or move for A-level study to a Sixth Form College where, although they may be treated more as young adults than previously, there is still a considerable element of close personal attention and control. The other option, more usually open to children in care, and other young people from socio-economic backgrounds, is to attend further education colleges, which are often very large and anonymous. It is an environment where vulnerable young people without parental support are at high risk of getting lost and may be one of the factors accounting for the high drop-out rate.

The figures for those with a background in care who do remain in education after 16 are encouraging, but we do not know, and few of our respondents were able to tell us, how many of these young people successfully completed their courses or, as previous researchers have found, left prematurely (Wade and Dixon, 2006). This was especially likely if they had left care before the age of 18 and were struggling to combine study with keeping house and supporting themselves on a low income. Another cause for concern is the very wide variation in participation rates between different authorities, even those of the same type. It is disturbing to find that in some local authority areas the chances of a care leaver accessing higher education remain at the same level as reported by the Social Exclusion Unit six years

ago (SEU, 2003). These variations may have more to do with the priorities and culture of leaving care teams than with the characteristics of the different areas or the abilities of the young people concerned.

A further question, which will be explored in the next, case study, phase of the study, relates to career guidance and choice of courses. Anecdotally, there seems to be a strong tendency for young people who have care experience to choose courses leading to social care occupations or, perhaps influenced by television and celebrity magazines, to opt for media studies or performance arts, extremely competitive fields where employment opportunities are very limited. Work experience in a wide variety of occupational fields should be a high priority for looked after children. Schools often rely on parents to arrange work experience placements, and when this is not done by foster parents the young people tend to be allocated to routine and unstimulating work settings. The published statistics do not give any detail about the type of work that young people listed as 'in training or employment' are doing.

In summary, the survey in England, combined with the statistics supplied by local authorities to national government, show that policy initiatives since 1998 have succeeded in shifting expectations and priorities to the extent that all of our interviewees acknowledged the importance of education for young people's future life chances and gave it high priority. The previous assumption that 16 marked the end of education for those in care has given way to a perception that continuing in education or some form of structured training is a desirable aim for most young people if not all. The extent to which this aspiration is realised differs enormously between different authorities. Moreover, this report is written from the perspective of professionals and managers. When we turn to the accounts of young people themselves, we may find that policy statements and what the professionals say they are doing do not necessarily correspond with what happens on the ground.

Summary

In Denmark, five interviews with group leaders responsible for children and young people in care from five municipalities revealed that few, if any, young people had gone to university. In Hungary, data was collected from all 20 child protection agencies. The research team found that agencies are not required to collect information about the educational careers of children and young people and so data was not always available. School records were most often kept. Estimates are that six percent of young people from public care go to higher education and about 75 percent of this group attends some form of education or training. As

already mentioned, studying or working is a condition attached to post-care accommodation support.

In Spain (Catalonia) 13 face-to-face interviews were conducted with managers of services for various services responsible for young people. Available data suggests that around 7 percent of those in care and from a residential care background, continue in education after the age of 16.

In Sweden, telephone interviews with 111 managers in 75 local authorities found that while nearly all managers thought education was important, there were very few specific programmes or initiatives in place to support young people's participation in post-compulsory education. Managers did not have information about the educational progress of their clients.

In England, of the 150 local authorities leaving care teams contacted, only 38 responded with sufficient information to be included in the survey, and some of this was partial coverage. Within these constraints, on average, around nine percent of young people who had been in public care were attending university, and around 45 percent were in some form of post compulsory education. This is a recent and very marked improvement; earlier estimates were that only one care leaver in a hundred was able to access university.

Chapter 5: Facilitators and obstacles identified by managers of welfare services in each country

A major research question for the YiPPEE study was to identify facilitators and obstacles to continued progress in education for young people in public care. In this chapter we report the views of managers on this issue, as revealed in face to face and telephone interviews, including the 'extra' telephone interviews in Sweden. Managers were asked the following:

- *Thinking about your experience of young people from a care background and their participation in further and higher education, could you outline two major reasons to account for the figures you have given? (Responses from n= 193)*
- *Thinking again about the current rate of participation in further and higher education, could you give two major factors that might lead to more young people participating in education? (Responses from n= 195)*

First we present two major categories of answers: (a) The obstacles or barriers, and (b) the facilitators and opportunities identified. Next we will take into account (c) the managers' ideas and suggestions for action that they consider may result in increasing the number of young people from care participating in higher education.

For analytical reasons, we have divided the reported obstacles and barriers into five systemic levels: individual, family, school, child protection or welfare system and policy level. Tables 19-28 set out the comments of managers interviewed in each country in tabular form.

Obstacles and barriers identified by managers at individual level: Some of the managers in all countries point out personal limitations of young people in care which prevent them from achieving educational success. Some of the characteristics mentioned offer a pessimistic view, because they refer to internal factors, difficult to change or overcome (mental problems, neuropsychiatric conditions, less intelligent). However, many of the answers refer to changeable factors, which are challenging for both educational and social intervention (lack of motivation, low self-esteem, accumulated disadvantages).

Table 19: Individual level obstacles/barriers which may prevent young people in care from participating in further and higher education

Denmark	<ul style="list-style-type: none"> • Lack of self-esteem • Lack of motivation • Less intelligent compared to their peers
Hungary	<ul style="list-style-type: none"> • Accumulate disadvantages • Not motivated • Difficulties in choosing an occupation and in orienting themselves • Mental problems • Difficulty in formulating longer term plans
Spain (Catalonia)	<ul style="list-style-type: none"> • Lack of basic education • Life experience not providing motivation for education • Feeling alone when reaching age 18
Sweden	<ul style="list-style-type: none"> • Gaps in their knowledge base resulting in loss of interest in school. • Neuropsychiatric condition • Lack of motivation
United Kingdom (England)	<ul style="list-style-type: none"> • Lack of basic literacy and numeracy skills • Low self-esteem and few aspirations for their future

Answers in all countries seem to suggest the need of major personalised psychological and psycho-pedagogical support for this population.

Family level: The comments of managers are extremely consistent in underlining the importance of family problems that create obstacles for the young people to continue in education after care. In general they say that families do not give appropriate support and do not value education enough.

Table 20: Family level obstacles/barriers which may prevent young people in care from participating in further and higher education

Denmark	<ul style="list-style-type: none"> • Poorly functioning family that provides no stimulation • No role models to copy or learn from • No support from their social network
Hungary	<ul style="list-style-type: none"> • Do not value education • Income from illegal (not taxed) work more desirable
Spain (Catalonia)	<ul style="list-style-type: none"> • Lack of support • Lack of positive influences • Very disadvantaged social background • No importance given to accessing higher education
Sweden	<ul style="list-style-type: none"> • Small/dysfunctional/unsupportive social network • Experience of abuse and neglect in the birth family • Lack of support from parents • Low level of education of foster carers
United Kingdom (England)	<ul style="list-style-type: none"> • Lack of emphasis placed on education

Lack of support for the young person is also attributed by some managers to the networks in which the family is involved. That fact is related to the weakness of family networks due to problems in the interpersonal relationships.

School level: The diversity of obstacles found at school by young people in care is striking, according to quotations from the managers’ interviews. Altogether the comments seem to suggest that schools are generally not capable of focusing on the real difficulties experienced by young people in care. They do not seem to make any attempt to improve their school achievements by giving more personalised support and offering solutions to problems.

In some countries it is emphasised that they are considered ‘like any other child’, under the principle of normalisation. However, it is obvious they have unequal opportunities to overcome the same obstacles as their peers. Unless they receive some kind of extra support or ‘compensation’ it seems that the situation can only result in a major probability of lower educational attainment, and therefore lower employment opportunities and higher risk of social exclusion.

Table 21: School level obstacles/barriers which may prevent young people in care from participating in further and higher education

Denmark	<ul style="list-style-type: none"> • The size of the classes • Not keeping in step with peers in school due to truancy or behavioural problems • Lacking the opportunity to be like their peers, e.g. having a computer, being dressed according to the fashion • Lacking friends
Hungary	<ul style="list-style-type: none"> • Cannot provide good experiences • Not prepared to deal/work with children in care
Spain (Catalonia)	<ul style="list-style-type: none"> • Lack of flexibility and understanding of the painful emotional experiences suffered by children in care • School resources do not motivate the child
Sweden	<ul style="list-style-type: none"> • Previous bad experience of school: Poor self-image of the young person because of negative attitudes of teachers or peers. Feeling of being unwanted at school • Lack of support
United Kingdom (England)	<ul style="list-style-type: none"> • Low expectations and lack of encouragement from professionals • Poor support for young people with special educational needs • Some education services unable to provide the intensive support needed • Lack of continuity in schooling experiences

Some obstacles are related to the organisation of the educational system (size of the classes, not prepared to deal/work with children in care), but other are related to attitudes of the professionals in the system, such as inflexibility or unawareness of the effects of painful emotional experiences of life before and in care.

However, particular obstacles are related to the personal history of the child in the school system. These include lack of continuity in schooling experiences, lacking friends, previous bad experience of school, poor self-image of the young person because of teachers or peers, and the feeling of being unwanted at school. All these should be much more seriously taken in to account to cope with young people's difficulties and improve their participation in education.

Child protection / welfare system level: In this case the diversity of obstacles observed by managers in the child protection system is also impressive.

Table 22: Child protection/welfare system level obstacles/barriers which may prevent young people in care from participating in further and higher education

Denmark	<ul style="list-style-type: none"> • Schooling/education is under-prioritised • More focus on placement than schooling/education • Different approaches to support from different municipalities • Services do not collect the same information and the same kind of documentation. • Continuous personal support sometimes missing throughout placement
Hungary	<ul style="list-style-type: none"> • Most children are not taken into care until around age 12-14
Spain (Catalonia)	<ul style="list-style-type: none"> • Lack of stability, constant changes of placement • Changes of educators in the residential home • Guidance/counselling focused on employment. No advice to continue studying • Lack of stable positive role models
Sweden	<ul style="list-style-type: none"> • Problematic contact with schools • Little focus on education. School issues not highly prioritised by social services • Residential units have too little focus on education • Low expectations of educational achievement
United Kingdom (England)	<ul style="list-style-type: none"> • Instability of placement causing disruptions in education • Lack of emphasis placed on education • Low expectations and lack of encouragement from professionals • Absence of information and guidance for those aiming to continue in education after leaving care • Absence of ‘significant other’ after leaving care • Lack of contact with people who had gone to university in their social circle (i.e. no role models)

Three kind of comments seem to be rather consistent across countries: (a) the fact that education does not seem to be an important priority either for the child protection system or for the professionals in the system; (b) stability is not often guaranteed to the children while in the child protection system and as a consequence they may suffer from frequent

changes in placement, in tutors or professionals of reference and so on; (c) in the child protection services there is often a climate of low expectations in relation to the educational achievements of the young people and little encouragement from professionals is expected. Last but not least, some managers point out that ‘models’ of educational success are generally absent in the child protection systems.

Policy level: Many of the obstacles pointed out at policy level suggest as a major problem the lack of integrated/holistic policies, with, perhaps, the exception of the United Kingdom. The most frequent situation is that education of children in care is not fully the responsibility of either the Ministry of Education or the Ministry of Welfare. One is responsible for education and so sees children as ‘students’, and the other is responsible for care or welfare of children, and so sees children as ‘users of social services’. Who is responsible for thinking and planning about ‘the child as a child’, as a whole person?

Comments from Spanish managers also raise the question of ‘who is responsible of thinking about a family with children as a family’, and not just as a set of users of different services? Dividing citizens by administrative competences of different ministries is an inefficient way to overcome the real problems of people. And that is particularly the case of young people in the child protection or welfare systems. Action becomes lost in discussion of who is responsible for what. Misunderstandings appear frequently, and it is pointed out that often a tug-of-war is observed between services, always attributing responsibility for inefficiency to ‘the other services’.

Table 23: Policy level obstacles/barriers which may prevent young people in care from participating in further and higher education

Denmark	<ul style="list-style-type: none"> • Two different laws and two different ministries • Need for a holistic approach
Hungary	<ul style="list-style-type: none"> • Two different laws and two different ministries • Need of a holistic approach • No child and youth policy • Not enough early interventions (prevention programs)
Spain (Catalonia)	<ul style="list-style-type: none"> • No policies to break the cycle of social exclusion of some families
Sweden	<ul style="list-style-type: none"> • Tug-of-war between schools, between schools and social services, or between local authorities • Local authorities reluctant to pay for other children than ‘their own’

United Kingdom (England)	<ul style="list-style-type: none"> • Not enough early interventions planned • Not allowing students to stay in term time accommodation during vacations • Financial support insufficient to avoid debt while studying
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Facilitators/opportunities identified by managers at individual level: As when referring to obstacles, managers quote both fixed and changeable factors at individual level that may help to improve young people’s achievements in education. While talent or basic ability does not seem to be easily changeable by any kind of intervention, other factors may be influenced by improving and increasing psychological and psycho-pedagogical interventions.

Table 24: Individual level facilitators which may help young people in care to increase their participation in further and higher education

Denmark	<ul style="list-style-type: none"> • Motivated to take responsibility for his/her own life • Self-esteem • Belief that they can manage an advanced education course • High expectations • Feet on the ground/realistic awareness of their situation • Support
Hungary	<ul style="list-style-type: none"> • Realistic view of their future • High expectations
Spain (Catalonia)	<ul style="list-style-type: none"> • Thinking in a longer perspective
Sweden	<ul style="list-style-type: none"> • Talent
United Kingdom (England)	<ul style="list-style-type: none"> • High levels of motivation, determination and self-confidence

Family level: Facilitators pointed out by managers may be summarised as ‘having a caring and supportive family’. We know that very often children are in the child protection system because they do not have such a family. Therefore we probably should read from managers’ comments that services where children are accommodated while in care should be as caring and supportive as possible for their educational career, and should encourage them to aim higher.

Table 25: Family level facilitators/opportunities which may help young people in care to increase their participation in further and higher education

Denmark	<ul style="list-style-type: none"> • Respect for education/school in the family, e.g. accustomed to eat together, dressed in clean clothes, being used to look after oneself
Hungary	<ul style="list-style-type: none"> • Paying more individual attention to children (i.e. foster families) • Inspiring environment at home • Show good personal example
Spain (Catalonia)	<ul style="list-style-type: none"> • Support received
Sweden	<ul style="list-style-type: none"> • Background with educated parents • Supportive extended family • Support from foster carers
United Kingdom (England)	<ul style="list-style-type: none"> • Positive support from family • Education valued

School level: Sensitivity towards young people in care and personalised support seem to be two major facilitating factors at school level according to managers.

Table 26: School level facilitators/opportunities which may help young people in care to increase their participation in further and higher education

Denmark	<ul style="list-style-type: none"> • More focus at schooling/education before placement • Mentors • Measures to prevent/discourage dropping out • Continuity in education • Being at the same level as their peers
Hungary	<ul style="list-style-type: none"> • Following and motivating throughout school career • Dedicated person to help the child • Focusing on developing children’s basic competences and practical education • Offering psychosocial support • Positive discrimination within school
Spain (Catalonia)	<ul style="list-style-type: none"> • Support, understand and value parents
Sweden	<ul style="list-style-type: none"> • Special programs at upper secondary school
United Kingdom (England)	<ul style="list-style-type: none"> • Positive support and provision of resources • School sensitive to the experiences of young people in care • Developing aspirations and self-esteem

	<ul style="list-style-type: none"> • Stability in schooling • Mentors/tutors in schools and colleges providing support for recruiting and retaining YP in further and higher education. Student volunteers as peer mentors.
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Having a mentor or a dedicated person to provide additional support is often mentioned and can be understood as a basic form of provision to compensate for deficits. Stability or continuity in education is also frequently cited as a key factor. Additionally, having skilled psychological or psychosocial support is explicitly or implicitly referred to in many of the comments.

Overall, the managers interviewed suggested many ideas that could be included in specific programs to improve achievements of the population in and after care while in the education system.

Child protection / welfare system level: There was a consensus among managers in all five project countries that having personalised support for anything related to education is a major facilitator to increase attainment and progression in care and beyond.

This support must be stable and continuous, and should be related to the availability of other resources (particularly, financial support, but also, for example, the possibility of staying in placement post 18. Overcoming educational difficulties among this population is specifically related to having a system capable of designing individually shaped solutions.

Table 27: Child protection/welfare system level facilitators/opportunities which may help young people in care to increase their participation in further and higher education

Denmark	<ul style="list-style-type: none"> • Continuous personal support/advice throughout placement • Investment of time and resources • Services focused on this group of young people • On-going support after leaving care; not changing social worker
Hungary	<ul style="list-style-type: none"> • Offering psychosocial support • Financial support • Providing successful role models
Spain (Catalonia)	<ul style="list-style-type: none"> • Financial support giving enough autonomy to devote time to studying • Importance given to higher studies. Understanding the life-course implications of having or not having higher education • Having stable educators who are a positive reference for the child

Sweden	<ul style="list-style-type: none"> • Good leaving care process: housing, education and economic support integrated and discussed with the young person • Focus on education • Support from social services • Access to individually shaped solutions
United Kingdom (England)	<ul style="list-style-type: none"> • Durability of support figures • Stability of placements and opportunity to stay in placements post 18 • Targeted support in school, with multi-agency involvement • Higher expectations of children in care held by support workers • Developing aspirations and self-esteem. Professional practices raising young people's aspirations and motivation to succeed in education • Designated member in the leaving care team whose role is to support young people into education • Financial help and practical support • Clear protocols for professional action

Policy level: Political decisions focused on the educational support needed by this population in and after care can be a major facilitator to improve achievements. At the political level, integrated legal and administrative frameworks for action are needed. All the services and agencies involved need to take joint responsibility and give higher priority to supporting the educational achievements of children in care.

The case of the United Kingdom is a good example to follow. After changing the legal framework, more steps must be taken and clear protocols with local organisations and educational providers should be established.

Table 28: Policy level facilitators/opportunities which may help young people in care to increase their participation in further and higher education

Denmark	<ul style="list-style-type: none"> • Keeping young people who require further support after 18 in the same department • On-going support after leaving care • More focus at schooling and education
Hungary	<ul style="list-style-type: none"> • Clear policies for financial help and practical support • Ensuring pathway plans exist and are acted on
Spain (Catalonia)	<ul style="list-style-type: none"> • Prioritising children who have gone through more difficult situations
Sweden	<ul style="list-style-type: none"> • Joint responsibility between school and social services
United Kingdom (England)	<ul style="list-style-type: none"> • High level of responsible corporate parenting • Legal framework which ensures that services are delivering high quality support and advice which enables care leavers to succeed • Clear protocols with local organisations and educational providers. Ensuring pathway plans are kept up to date • Clear policies for financial help and practical support

Action to increase participation in higher education of young people in and after care:

Many of the comments made by managers in the different partner countries seem to address similar challenges to be faced if we aim to increase participation in higher education of young people after care. Although the political, legal, historical and organisational context is different in each country, and wording and phrasing by managers differ, it becomes evident that many underlying social dynamics are similar enough as to be able to share common goals.

In this section we present some of the aspects highlighted by managers in each country, which directly or indirectly suggest a focus for action.

Denmark: There are some policies in place that positively influence the lives of children and young people in care. In the Law of Social Service there is a special focus on schooling/ education and this has to be considered every time an action plan is revised. Despite this, the respondents feel that schooling/education is under-prioritised in everyday practice. The analysis points to structural issues as a reason for this as education and care are treated

under two different bodies, under two different laws and under two different ministries. In the law regarding schooling, the Municipal Primary and Lower Secondary School Act, there is no specific attention to children and young people in care. It seems difficult to maintain a focus on children and young peoples' schooling if there is not a holistic approach in place.

The municipalities' organisational structure means that in most cases the young people are transferred to another department when they turn 18. The respondents would like to keep the young people in their department as they fear that they 'lose' them when they have to change to a new social worker.

The respondents agree that the transition to adulthood is very important for the young people and they want to ensure that the young people get continuing support when they turn 18 years old. The law states that the municipalities need to decide if the young people would benefit from further support after this age. This assessment should take place when the young person is 17 ½ years old and should cover the future way of living, education, jobs and accommodation. Despite this assessment and the focus on education, statistics shows that the number of people getting support after they come of age is fairly limited. The respondents argue that attention to education should be further increased in social workers' everyday practice as they all agree that education is the tool to enable young people from care to combat their problematic background. However, the respondents in total could only give two examples of young people who had pursued further education.

In discussing what might help more young people from a public care background to succeed in education, they mention among other things that there should be more focus on education in childhood and during placement in order to motivate the young person to take responsibility for his/her own life. The respondents also point to the need for continuous personal support throughout placement. Leaving care support is also regarded as very important.

The young peoples' economic situation was only briefly discussed by the respondents interviewed in Denmark. It does not seem to be an issue in Denmark because children in care are entitled to pocket money from the municipality each month. Other than that there are no special financial services for young people in care. They are regarded as being on equal terms with their peers.

Across the municipalities there are different approaches to support for children and young people in care. Their policies do not contain the same information; they do not collect the same kind of documentation for assessment purposes. For example, some collect reports from the young peoples' schools regarding their performance and development and some do not. They have different approaches to placing children and young people in care and different views of care and schooling. Some municipalities run special schemes for children and young people in care and others offer no schemes at all. Thus, despite the existence of the law emphasising the importance of education, what actually happens depends very much on decisions taken within each municipality.

Hungary: Our respondents voiced their criticism of basic education (i.e. elementary schools) for not focusing on developing children's basic competences and not providing more practical education instead of putting the emphasis on acquisition of theoretical knowledge.

The need for more psychosocial support for children both within the care system and in the school system would be important, achieved by having fewer children per adult, so that more personal attention could be paid to each child. Positive discrimination within the school, and more financial support for further studies could counter-balance quite a lot of disadvantages. Several mentions were made of the need for more specialists (such as psychologists, and development pedagogues) to work within the child protection system; and also the need for a number of successful models for children. One example of this is joint celebrations of holidays with children previously living in care who have successfully integrated into society.

Some respondents think that children should be taken into care at an earlier age from situations where they are at risk, so that the child protection system could have time enough to correct/counteract their disadvantages. Involving non-profit organizations in supporting children's studies and eventual successful labour market integration would be helpful. Two respondents emphasized the need for society to value knowledge more, which could influence our target groups as well.

Spain (Catalonia): Among Catalan managers there was broad agreement on the need to **improve aspects of the educational system**: more **facilities**, more **flexibility**, and more **support** are needed to improve the educational achievements of children in care and their continuation in further and higher education.

The second most frequent comments deal with the failure of the system to solve the **economic needs of this population**: Frequently, meeting their basic living costs has to be the major priority in their lives, because the support they receive is much lower than for the majority of the young people in our society, and as a consequence their educational careers have to remain on stand-by.

A majority of managers also refer to **the inadequate social support received** by this population from their family and social environment as a major factor which should be acknowledged and compensated for in some way by post-care services.

Other factors pointed out that need to be addressed are:

- Accumulated shortcomings in school learning which call for remedial action
- Presence, stability/permanence of significant adults, which may be a major problem during residential care, and may have an important impact after care.
- Guidance and counselling received which reflect the low educational expectations of the professionals and are therefore, biased towards the earliest possible entry into employment instead of pursuing educational goals
- Appropriate individualised coaching is needed and follow-up/support.
- Promoting the idea of studying and learning as a positive value, in and after placement
- Improving strategies to cope with problems: Appropriate planning should seek to counter the impulsivity often seen in this population and instil a longer-term perspective.

Last, but not least, Catalan managers made many comments about factors related to existing childhood policies and to the overall social context. In a good part of the Catalan society, childhood is seen as a low priority area. There is no social pressure on politicians to invest resources in the child protection system or post-care services except in extreme situations, for example when child abuse in an institution comes to the attention of the media.

Sweden: A majority of the comments focus on the young people's difficult background, and the lack of support from parents, social networks and schools. In many cases they have also experienced abuse and neglect in their birth families. The managers also conclude that school issues are not highly prioritised by social services. As mentioned in the interviews with managers, social services tend to focus more on social and emotional problems and/or emotional problems rather than on educational achievements of children and young people in care.

A placement in care is supposed to compensate for previous difficult experiences and care deficits in the birth families, but apparently neither a placement in foster care, nor in residential care, seem to have succeeded in compensating for an inadequate schooling. Several managers mention the presumed low level of education of foster carers as a barrier, and residential units are accused of having far too little focus on education. Thus, the lack of focus on and experience of educational achievements, in birth families as well as in foster families and residential homes, is a well-defined barrier to further education.

Table 29: Managers' views on possibilities for young people leaving care to move on to further education

Categories	Frequency	Valid %
Limited possibilities	27	25,2
Support from foster carers and residential homes	11	10,3
Support from social services	22	20,6
More access to individually shaped solutions	5	4,7
Adult education, special program at upper sec. school, folk high schools	10	9,3
Dependent on individual factors	11	10,3
Access to 'ordinary' jobs	6	5,6
Same possibilities as anyone	15	14,0
Total	107	100,0
No answer	4	

Low expectations of educational achievement are also one of the barriers. Several managers commented on the fact that children and young people in care are often not expected to perform well at school, which must work as an additional barrier for further education.

A quarter of the managers conclude that this group of young people have a limited possibility of moving on to further education. In their comments they mention the same barriers as were accounted for in the previous question, namely lack of motivation and lack of support.

22 managers (20%) define support from social services as an important facilitator, and 10 managers (9%) identify adult education and Folk High Schools as vital factors for access to

further education. 11 managers (10%) refer to individual prerequisites, and six state that young people leaving care prefer work to education. 15 managers (14%) state that care leavers have 'the same opportunities as anyone'. If they want to, they can use the same resources as all other young people; there is nothing to stop them from moving on the further education if they wish to do so (Table 29).

11 managers (10%) state that adequate support from foster carers and residential homes would facilitate access to further education; six of these managers are of the opinion that foster carers provide better support for young people leaving care than residential homes.

Economic support is generally given to YP in care until they have completed their upper secondary school exams. There is no economic support for further education beyond this except in very extreme cases. Former child welfare clients will have to apply for study loans in the same way as the majority of other young people if they want to move on to college and/or university. A few local authorities have some kind of systematised support for help with housing and other practical matters.

A dysfunctional family network is one of the acknowledged barriers to further education for young people leaving care. Most managers are aware of previous difficult experiences in their birth families and the detrimental effect of such experiences on children and young people placed in care. They may have experienced problems with parent's drug/alcohol abuse, neglect and/or mental disorders. Additionally, several managers' mention that parents themselves may have had very limited experience of education, and thus lack the ability to support their children.

Social services have a clear mandate to provide children and YP in care with the **best possible support**. According to the managers, this is also their serious intention. However, social workers are traditionally more **focused on solving social problems and the emotional well-being of the child, rather than on school performance**. Several managers make this point, and mention it as an explanation for the lack of interest social workers often take in children's educational attainment when they are in care.

Foster carers and residential staff would be expected to help children and young people placed in care to do as well as possible educationally. However, this is often not the case. There seem to be insufficient efforts directed towards support in educational matters.

Neither foster carers, nor residential staff, seem to be aware of the importance of such support.

According to the managers, this situation is now about to change, as increasing attention is being directed towards the school performance and educational achievement of children and young people in care. Some of the managers state that this is due to the recently implemented Integrated Children's System (BBIC); others mention the bleak results of Swedish research on outcomes of care placements, which have made them reconsider methods and procedures concerning out-of-home placements in general.

To sum up - most managers display an awareness of the importance of education for children and young people placed in care. However, various barriers and difficulties make access to further education problematic for them. Despite good intentions, social services have so far not been able to compensate for previous educational shortcomings and difficulties. There is agreement that better policies and more focus on educational matters are needed for this group.

United Kingdom (England): Literature reviewed by the YiPPEE study found that factors such as the durability of support figures and the stability of placements were important facilitators for young people from care who participated in higher education (Hojer et al. 2008). The survey sought to investigate the extent to which the current information from managers supported these findings.

Among leaving care teams surveyed, the proportion of young people known to the leaving care services who were in higher education at the time of fieldwork varied from one percent to 26 percent. Survey respondents were asked for their perception of reasons that might account for the number young people they had enrolled in further and higher education.

One factor accounting for the variation appeared to be the proportion of young people who had entered the country as unaccompanied asylum seekers. A higher proportion of young people at university was associated with local authority areas with higher proportions of unaccompanied asylum seekers, the majority of whom had come into care at the age of 16.

Overall, managers reported that many young people known to the leaving care teams lacked basic literacy and numeracy skills and were therefore not ready to go on to higher education. Of those who had the potential to continue in education, leaving care team

managers reported that rather than one single factor, there were multiple factors operating at different levels during young people's childhood years that affected their continued educational participation.

A number of factors that might lead to more young people participating in education while in care and in statutory education were noted including placement stability; more targeted support in school, with multi-agency involvement to support detailed personal education plans; opportunity to stay in placements post 18; quicker, earlier action, with an injection of multidisciplinary support; a need for a high level of responsible corporate parenting; and higher expectations of children in care held by social workers and carers.

Recent UK policy highlights **stability** as a factor for success in educational attainment. The Staying Put 18+ Family Placement pilots (DCSF 2008) is part of the Children and Young Persons Bill. This pilot scheme gives young people in foster families an opportunity to stay in placement past the age of 18. Ten areas were given a share of almost £5 million. This funding is intended to give children in care the chance to benefit from a stable family placement so that they only move to independent living when they feel properly prepared and ready to make the transition to adulthood in a more gradual way.

Coordinated professional practice and clear protocols with local organisations and educational providers were said to have a positive impact on the numbers of care leavers in education. For example, working with local colleges and universities facilitated by a government sponsored programme called Aimhigher was reported to be helping young people make the transition from school to further and higher education. In one local authority, the respondent attributed the increased rate of care leavers in post-compulsory education to their focus on ensuring pathway plans were completed and of high quality.

Mentors, such as designated tutors in schools and colleges, were noted as being very successful in providing on-site support and helping to retain young people in further and higher education.

One local authority mentioned various collaborative projects with a university which provides mentors. They had found that although they were succeeding in getting young people into college, they were at high risk of dropping out. So they re-negotiated the transition from the last school year (Year 11) into college with a support plan, and set up a

peer mentoring scheme with student volunteers, which increased the number of young people going to and staying in college.

Respondents considered financial help and practical support to be important facilitators. But this assistance also needed to be supported by clear policies that set out what young people were entitled to and the types of support available to them. Practical support can also include facilitating visits to university, and paying expenses of family or friends to accompany young people as well as travel to interviews and buying appropriate clothing for interviews.

Overall, leaving care teams reported that what helped young people from care backgrounds to stay in education, after the compulsory phase, was underpinned by valuing education from early on in life, from both families and in policy and professional practice. Giving a high value to education could take many forms but generally included practical support, in the form of finance and stable living conditions, as well as advocacy type support. Professional valuation of education was helped by involving a range of professional agencies, supported by clear protocols for action. One local authority had a highly qualified teacher embedded in the after-care team who saw his role as encouraging, advising and supporting young people to continue in education and helping to relaunch them on their educational journey when, as often happened, things did not go smoothly.

Summary

In Denmark, barriers mentioned by managers of social services underlined social problems and a lack of tradition of going to higher education in the young people's birth families, schooling being under-prioritised when considering a placement as well as the division between youth and adult departments and the division between schooling and care. Facilitators identified and proposed are mirror images of the barriers. The managers proposed (a) close and on-going contact with the young people, and (b) schools playing a prominent role by showing greater understanding of the position of young people in care and considering how to support them better.

In Hungary, major barriers to participation in higher education were identified as the multiple psycho-social difficulties in children's lives by the time they enter care at the age of 12 -14; and also the fact that earnings were more highly valued than academic achievement. Consistently, the facilitators recommended by managers were better

emotional support during years spent in care and in school and financial support in order to access university.

In Catalonia, major improvements were considered necessary in the educational system, namely increasing facilities, flexibility and support given to children in care in order to better promote their continuation in further and higher education. Other major challenges for post-care services are to increase the level of financial and social support in order to make it possible for care leavers to focus on their educational careers like the majority of other young people of their age in the same society.

In Sweden, the managers' interviews provided rather limited knowledge of factors related to the educational system. The statements of the managers can often be characterised as comments on schools in general, and their failure to support children with special needs and social problems. Exclusion of children with learning difficulties is perceived as a problem, which could make children and young people alienated and less interested in education. The need of early interventions in school is emphasised. There is also a general perception of a need for cooperation between school and social services.

More specifically, in Sweden, the tug-of-war between schools and social services has been identified as a tangible problem for children and young people in care. Which authority should be responsible for extra support to them seems frequently to be an unresolved question. Such disagreements may prevent young people from receiving adequate support in school, and thus also diminish the potential for enhancing their educational achievement while placed in care.

In the UK, factors that appeared to be common among those who were successfully participating in education range from individual through organisational to societal factors:

- **Individual characteristics:** High levels of motivation, determination and self-confidence were thought important to counteract the structural and attitudinal barriers that young people who are in care can encounter.
- **Support networks:** Positive support from families and professionals in the form of high aspirations and provision of resources as well as valuing education were said to be key to raising the educational achievement of young people in care. Survey participants also stressed that such support continued to be necessary once young

people had entered further or higher education. This point will be explored further in the next Workpackage (WP5).

- **Community and cultural influences:** The particular ways in which the community and cultural environment interact with support networks and an individual's characteristics will have an impact on the young person, the family or placement where they live and the specific value attributed to education.
- **Institutional practices:** The ability of schools and other organisations in contact with young people in care to act in ways that are sensitive to the experiences of young people in care and understand the effect of these experiences on their education and provide the support and resources to increase motivational levels and aspirations thereby raising achievement levels. Developing aspirations and self esteem affect the chances of sustaining their educational success in post-compulsory education.
- **Public policies:** These can have a positive impact of the life chances of young people in care and leaving care by providing a legal framework which ensures that services are delivering high quality support and advice which enables care leavers to succeed. Most importantly, they can authorise the expenditure of public funds for economic and practical support.
- **Professional practices:** Looking more specifically at professional practices which were thought to account for more care leavers entering further and higher education, these included specific measures aimed at raising young people's aspirations and motivation to succeed in education. For example, it was very effective to have a designated member of the leaving care team whose specific role was to support young people into further education, work with foster carers and service staff to highlight the importance of education for young people and advise them how to support and motivate the young people themselves. The names for individuals in these roles vary; titles included post-sixteen teachers or leaving care coordinator for education.
- **Stability:** Stability in both schooling and placement was highlighted by respondents as a crucial factor. Placement stability is an important determinant of participation and success in education for children in care. At the post-compulsory phase of education, survey respondents described the need for services to support young people to manage their transition to independent living as well as their transition to further or higher education. Survey respondents said that where young people in care could stay in their care placement until 18 or beyond, this greatly increased their chances of choosing to continue in education. In some areas, leaving care teams had negotiated semi-independent living arrangements with the foster carers of young

people in education until the end of their current courses. In some cases this ensured that young people had accommodation during vacation periods.

As a conclusion, once more we can say that comments made by managers in the five countries of the YIPPE project seem to address either similar or complementary challenges to be faced for action to increase participation in further and higher education of young people in and after care. Although the political, legal, historical and organizational context is different in each country, it has become evident that many underlying social dynamics are similar enough to make it possible to share common goals. Action should be taken with an integrated approach, with the capacity to impact all systemic levels at the same time: individual, family, school, child protection/welfare system and policy level.

Chapter 6: Discussion, state of the art and next steps to be taken

Low educational qualifications have increasingly damaging consequences for individuals and societies. It can consign people to low-paid jobs or long term unemployment and undermine social cohesion (OECD, 2005).

Different figures show the steep rise in youth unemployment in 2009 in all partner countries (Jackson, 2009):

- Denmark: increase 61% compared with same quarter 2008⁸
- Catalonia: 44.5% increase in unemployment (Spain 35.1%)
- Hungary: 23% aged 20-24 unemployed (national rate 9.5%) (Source: Hungarian Central Statistical Office).
- Sweden: 27.3% 20-24 unemployed (5 x other age groups) (Statistics Sweden)
- England: 943,000 under 24 yr olds unemployed (highest rate of increase in Europe 2008-9).

In the EU countries for which data is available, young men and women from a public care background are over-represented in virtually every indicator of disadvantage, including poverty, housing, unemployment, criminal activity and teenage pregnancy (Petrie and Simon 2006). That means that young people who have been in care of the child protection system or welfare system in any European country are clearly in a situation of risk of social exclusion (Jackson, 2007).

Our working hypothesis has been that such risk of social exclusion is grounded in a personal history which culminates in an inequality of opportunities to follow an educational career like most young people in our societies. Evidence of this inequality of opportunity comes from the following facts:

- (d) Many of the children in care who at 16 showed some educational promises have major difficulties in pursuing further and higher education. A good number of them are only able to do so years later than their peers.

⁸ http://www.ae.dk/files/AE_markant-stigning-i-ledigheden-blandt-unge.pdf

- (e) About half or more of children in care do not finish compulsory studies at the same age as the majority of their peers. Repeating courses and delayed completion raise complex problems for their educational careers.
- (f) A higher proportion of children in care than in the overall population, drop out before finishing compulsory education.

Professionals of the child protection system and of social services in all European countries know these facts. However, figures making these facts evident and visible to the overall society and to politicians are scarce, and systematic data collection is almost non-existent. For that reason one of the YIPPEE project goals was initially defined as *establishing a baseline of post-compulsory educational participation among young people who have been in care*.

However, our research activity in this project to date has shown that such an apparently easy task as collecting some simple quantitative data that reflect the state of the art of this population in a few countries is a major activity, extremely complex and time and resources consuming.

At some point in our project we had to adopt the pragmatic decision of collecting ‘the best data possible’ in each country, without any pre-requisite to make such data comparable across countries. In fact, the data that we have been able to collect in each country is rather different, and we had to use different sources and different procedures to obtain informative figures. Therefore, a first conclusion is that we are still far from having a ‘comparable baseline’ on the state of the art in different European countries. However, the different data collected reinforces the evidence that we confront a common problem, with rather similar characteristics in all countries.

Most available relevant information we now have is based on estimates. For example, in Denmark about 66% of young people who have been in care do not have post-compulsory qualifications and only 7% have the upper secondary school leaving qualification. In Spain estimations suggest that only 7% reach higher education, while in Hungary the estimated figure is still lower - perhaps about 6% reach that level. We also have preliminary data showing that in Catalonia fewer than half (40%) of children in care finish compulsory education on time, while 70% of the overall population does so. Figures of those not achieving the expected level on time seem to be rather similar in UK (43%) and Denmark (45.8%). All these figures are worrying, and far from the attainment levels of their peers in

the overall population. However, it is encouraging that only a few years since political attention was turned to this issue in the UK, we already observe in some local authorities that as many as 46% of young people aged 18 and more who have been in care are now in further education, including 9% at university. It is important to note, however, that although these UK figures show important recent improvements, they do not yet come near matching figures for all young people in the country.

The lack of a tradition of data collection on the educational achievements of this population and the lack of focus on the education of children in care, has produced in all countries a social invisibility of figures to give us evidence for action, together with insufficient qualitative information on the processes needed to reach and address this situation of inequality of opportunity for an important cluster of young people.

Summing up, our major conclusion is that a **system of routine collection of relevant data is needed in Europe to monitor the situation of this population in relation to their educational pathways and to provide an incentive for action**. In other words, we need to agree and establish a **system of indicators** that are comparable across European countries and can provide information on:

- (3) The different achievements of this population in relation to the overall population of the same age in each country.
- (4) The changes resulting from political action to improve the situation of this population.

If all countries had a statistical system with good and detailed data about the topic we are researching, to have a 'baseline' would be a rather easy exercise. However, we now need to discuss how to begin to collect the new data needed, which are good **indicators** that are useful and sensitive to **evaluate** changes and improvements in the education system (ES) and in the child protection system (CPS) that result (or may result) in more youngsters who are leaving care youngsters being able to access further and higher education.

Initially in the YIPPEE project, we already suspected that availability of systematic statistics would be limited. Even in the UK, which has a law making such data collection compulsory, many data are still not reliable enough. These were the reasons we designed WP4 as a way to obtain complementary additional information, not available in the official statistical systems.

Results of our research for WP4 are somewhat frustrating: in all countries our capacity to obtain good data from alternative sources at present is very limited, and in most cases they are clearly biased. Except in the UK and DK, data from all countries are mostly limited to care leavers who are receiving some kind of support or services. This varies very much depending on the country in the proportion they represent of the total of young people who have been in care. Moreover, in all countries, youngsters coming from residential care seem to be overrepresented among those receiving support.

How can we obtain the unpublished or 'alternative' systematic data needed, not available at present, by means of institutionalising the production of new statistics in each country? A basic challenge for this project is to give some steps in the direction of specifying which data would be needed (or desirable) in order to:

- Have a more detailed quantitative knowledge of the situation in each country.
- Make a quantitative comparison among countries possible.
- Make quantitative evaluation of changes along time possible in each country and across countries.

Definition of data in order to make a working model with indicators is an interesting challenge. Some related questions are:

- Which data should be collected to be used as indicators that could be comparable between countries?
- What steps must be taken in each country to get such data produced systematically?
- Which, of a list of desirable data, could be organised in the short term in different countries?

These indicators should be data that:

- Are available in the present or could be within a short time
- Can be systematically obtained in the future,
- Can show change which can be attributed to the development of improvement programs (social interventions) in the CPS.

The Hungarian team has proposed that it would be important to collect the following data in both individual and aggregated form (national and county level) according to types of

provision (institutional placement, foster care), all of which are related to the educational participation of children and young adults:

1. Results achieved at the end of the school year, in the given grade of primary school
2. Number of fails and repeats of grades in the given grade of primary school
3. Occupation and scope of work of those who did not continue their studies after primary school
4. Results achieved at the end of the school year, in the given grade of secondary school.
5. Number of fails and repeats of grades, in the given grade of secondary school.
6. Number of students achieving secondary school leaving certificate, in the given year.
7. Continuation of studies of students achieving secondary school leaving certificate (number of those admitted to higher education institutions, number of admitted persons by vocational group, number of successful entrance exams).
8. Continuation of studies of students achieving secondary school leaving certificate in training provided outside the school system, by vocational group.
9. Occupation and scope of work of those who did not continue their studies past the compulsory school age.
10. Number of dropouts at each level of education (number of those leaving school without achieving any qualifications).

Professionals of the child protection system and of social services in all European countries also know a lot about obstacles and barriers, as well as facilitators and opportunities for young people in care to improve their educational achievements and to encourage them to continue an educational career. All of that knowledge must be taken into account and translated into proposals for new action.

An important part of this report has been devoted to analysis obstacles and facilitators that young people in and from care meet in attempting to continue their further and higher education after leaving the child protection system. Efforts are needed at all systemic levels in order to change the situation and to improve the educational achievements of this population.

In the different country reports we can read a number of interrelated political and social problems which need to be addressed to face the present situation. In all countries managers say that education is a neglected issue both in school and in placements. More

focus on education and a child-centred perspective among child protection agencies and in schools are needed. Child protection services usually have too low expectations and short-term perspectives related to education. Their aim is usually for young people to achieve early financial independence through work, not to reach further education.

In Denmark and Sweden it is pointed out that the principle of normalization needs reconsideration: if access to higher education for young people leaving care is based on the principle that they are 'the same as everyone else' the inequality of opportunity that they suffer cannot be overcome. Foster and residential placements do not compensate for inadequate schooling. Support is insufficient and its continuity is not guaranteed. Too often problems in secondary school mean that there is no incentive to study further.

More problems in finishing compulsory education and continuing in education are observed among young people who have been placed in a residential context, compared with those who were in foster care. This arises from the roots of the child protection system: those children with more complex backgrounds and problematic behaviour are usually placed in residential settings. More and earlier intervention is needed.

Last but not least, many of the social service managers interviewed in our sample pointed to the lack of articulation between the educational system and the child protection system as a major political challenge.

Strong political will is necessary to change the situation. To improve educational itineraries and achievements of this population becomes a major political challenge at European level. A first step needed is a decision to make new data available, particularly a few relevant indicators of the state of the art. The list of desirable data and complementary qualitative information could be long. However, our conclusions point out that a few comparative data are necessary to start new discussions and to challenge the invisibility of the situation.

After analysing the new data obtained in Catalonia from the cohort of children in care born in 1993, we have discussed what would be a realistic proposal for data collection which would produce some comparable indicators in the short term. Our conclusion is that we could start trying to collect as many as possible of the following 10 items from all cohorts of children in care, year by year (see Annex III for more detail). Each data set refers to the number of young people from each cohort that every year:

1. Left school without the certificate of basic/compulsory education.
2. Is in compulsory education but not yet with any certificate.
3. Finished compulsory education (with a certificate), but does not continue.
4. Is in vocational upper secondary education.
5. Is in academic upper secondary education.
6. Has finished upper secondary education (vocational or academic).
7. Is in higher education (non university).
8. Has finished higher education (non university).
9. Is at university.
10. Has finished university studies.

Obtaining all such data in the short term is probably a utopian aspiration. Procedures needed to obtain them may be very different in each country. But the sooner we start to have some of them, the shorter will be the time we need in order to start having some **systematic and comparable indicators in European countries essential to provide a baseline of post-compulsory educational participation among young people who have been in care.**

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ANNEX I: Questionnaire for managers of services

This schedule is for data to be collected via telephone interviews in EN, DK, SW and face to face in HU & ES (WP4)

Country Code Area Code

Introduction

Thank you for participating in this unique five country study young people who have been in care as children and their pathways in further and higher education. The study is taking place in Denmark, Sweden, Spain, Hungary and the UK. We are trying to gain a detailed picture of what is happening for young people each country by talking to managers responsible for young people leaving care or still in care over the age of 18 years. We will also be talking to young people and some adults that the young people nominate as having been important to them. From the detailed picture, we will be trying to establish what helps young people from public care backgrounds to participate in education, and what does not help, in each country context, and then to make some practical recommendations for helping improve young people's participation in post-compulsory education . The study is part of the European Commission's Seventh Framework programme of research, under the theme of youth and social exclusion.

Confidentiality

Any information you give to the research team will be treated as **absolutely confidential and private to the research team**. Nothing you say will be passed on to anyone else in away that would identify you. Your information will only be used for the research. You may withdraw from the interview at any time. Your name will not be given in any publications arising from the research.

Consent

Is it OK to continue with the interview?

Background information on the service

1. Can you briefly name and describe your service? (Local social services, specialized social services, evaluation team, post-care services...):

2. What is your job title (or *what is your post in this service*)?

3. What administrative area does your service cover?(city, county, region, province, ...)

4. What is the population of this area?

5. How many young people under 18 are in this area?

6. How many young people aged 18 - 21 are in this area?

7. Does your service have responsibility for:

7a All the young people under 18 who are in-care in your area? If Yes, please

insert number: _____

7b A proportion of all the young people under 18 who are in care in your area.

Please (indicate) or (estimate) a % of cases: _____

and indicate what happens to the remainder _____

8. What are the responsibilities of this service for young people from a public care background who are 18 years or older? _____

9. At what age do young people usually leave care - in practice?

Statistics

In this next section we ask you for some statistics. We realise that many services do not collect comprehensive data but we are trying to establish what is collected and what is not. It would be very helpful if you could indicate what information you collect, what happens to it and the figures for young people in various educational programmes.

10. What data do you routinely collect on the educational profile of young people registered in this service from the age of 16 years onwards?
- i. School reports from secondary school (age 11- 16 years)
Yes/No
 - ii. School reports from upper secondary school (age 16 - 18 years)
Yes/No
 - iii. Examination results from school leaving at age 16
Yes/No
 - iv. Examination results from school leaving at age 18
Yes/No
 - v. Attendance at further or higher educational institutions
Yes/No
 - vi. Attendance on vocational programmes
Yes/No
 - vii. Record of discussions about young person's educational ambitions and measures to help them realise ambitions
Yes/No
 - viii. Detailed chronological report on each individual's progress through education
Yes/No
11. If Yes, to any of the above, is the information
Collated centrally and available to you?
Yes/No
Retained on young people's individual records
Yes/No

Please write in any further details about what happens to the information collected

The following table contains a request for statistics, where available. Please enter the figure in the left hand column. In the right hand column please indicate whether this is a figure from statistics with an A; a figure from your estimate B. If you cannot estimate, please leave the box blank.

	Number	A or B
12. Number of new under 18s in care (protection) during 2007 in your local authority area or child protection agency (under your jurisdiction)		
13. Total number of young people under 18s in care (protection) at your last census date (31 st Dec 2007) (30 th Nov 2007) (30 th March 2007) (.....)		
14. Total number of young people in your service		
a) Aged 16 - 18		
b) Aged 18 +		
c) Or all together		
15. What proportion of the total in your service had most of their placements in foster care?		
16. What proportion of the total in your service had most of their placements in residential care?		
18. What proportion of the total in your service had most of their placements in other types of accommodation? (e.g., in England this might include: supervised while with birth parents, secure accommodation, young offender institution)		
c) How many young people who were in the care of your authority as children do you have currently at university or on degree level college courses? Of these,		

19a What proportion had most of their placements in foster care?		
19b What proportion had most of their placements in residential care?		
19c What proportion had most of their placements in other types of accommodation? (e.g., in England this might include: supervised while with birth parents, secure accommodation, young offender institution)		
20. How many in further education or other forms of training? Of these,		
21a What proportion had most of their placements in foster care?		
21b What proportion had most of their placements in residential care?		
21c What proportion had most of their placements in other types of accommodation? (e.g., in England this might include: supervised while with birth parents, secure accommodation, young offender institution)		
21d. TOTAL number currently in post-compulsory education		
22. How many of these are getting post-care support from the care or post-care services?		
23. How many of these are getting both supports together?		

24. Thinking about your experience of young people from a care background and their participation in further and higher education, could you outline two major reasons to account for the figures you have given?

1. _____

2. _____

25. Thinking again about the current rate of participation in further and higher education, could you give two major factors that might lead to more young people participating in education?

1. _____

2. _____

Thank you very much for your help with this research

ANNEX II: Items included in each country data collection in the questionnaire for managers of services

Question	Dk	Hu	Sp	Sw	UK
1	Yes	Yes	Yes	Yes	Yes
2	Yes	Yes	Yes	Yes	Yes
3	Yes	No	Yes	Yes	Yes
4	Yes	Yes	Yes	Yes	Yes
5	Yes	Yes	Yes	No	Yes
6	Yes	Yes	Yes	No	Yes
7a	Yes	Yes	Yes	No	Yes
7b	Yes	Yes	Yes	No	Yes
8	Yes	Yes	Yes	Yes	Yes
9	Yes	Yes	Yes	Yes	Yes
10 (I - viii)	Yes	Yes	Yes	No	Yes
11	Yes	Yes	Yes	No	Yes
12	Yes	Yes	Yes	No	Yes
13	Yes	Yes	Yes	No	Yes
14a	Yes (15-17 years)	Yes	Yes	No	Yes
14b	18-22 years	Yes	Yes	No	Yes
14c	Yes	Yes	Yes	Yes	Yes
15	Yes	Yes	Yes	Yes	Yes
16	Yes	Yes	Yes	Yes	Yes
17	Yes	No	Yes	No	Yes
18	No*	Yes	Yes	No	Yes
19a	No*	Yes	Yes	No	Yes
19b	No*	Yes	Yes	No	Yes
19c	No*	No	Yes	No	Yes
20	No*	Yes	Yes	No	Yes
21a	No*	Yes	Yes	No	Yes
21b	No*	Yes	Yes	No	Yes
21c	No*	No	Yes	No	Yes
21d	No*	Yes	Yes	No	Yes
22	No*	Yes	Yes	No	Yes
23	No*	Yes	Yes	No	Yes
24	No#	Yes	Yes	Yes	Yes
25	Yes	Yes	Yes	Yes	Yes

DK: * We get the statistics on a national basis

We did not ask this question as we got our statistics from Statistics Denmark

HU: We used the full first questionnaire with the 4 managers we interviewed. We also collected information using the Statistics part of the questionnaire from all child protection agencies (20) in Hungary. We indicated NO in the table for No. 3 because all agencies have county level responsibilities by legislation, so we did not have to ask. Questions 17, 19, 21 has NO because we do not have alternative forms.

ANNEX III: Data that would be desirable in order to establish a baseline of further and higher education participation among young people from public care background in each country.

The utopia: Statistics on the population that has been in care more than 1 year

Age	Year of birth	Finished school without the certificate of basic/ Compulsory education	Within educational system, but not yet with any certificate	Finished the basic/ compulsory education (with a certificate), but does not continue	In vocational upper secondary education	In academic upper secondary education	Finished upper secondary education (vocational or academic)	In higher education (non university)	Finished higher education (non university)	At university	Finished university studies
16	1993										
17	1992										
18	1991										
19	1990										
20	1989										
21	1988										
22	1987										
23	1986										
24	1985										
25	1984										

Disaggregated by:

- Gender
- Type of placement (residential, foster kinship, foster non-kinship, other)
- Duration of each placement (less than 1 year, 1-3, more than 3)
- Receiving after care services (yes/not needing them/missing in the system)
- Job status

