Helping Care Leavers:

Problems and Strategic Responses

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1. Defining the Problem

Children and young people become 'looked after' by local authority social services departments because their parents are unable to care for them for a variety of different reasons. They may be the victims of abuse or neglect or their parents may be overwhelmed by problems and be unable to cope. Some young people whose families have difficulties may experience problems as they grow up – getting into trouble at home or at school. Many of these young people – currently over 50,000 – will spend a short time 'in care' and return home. However, a significant number – about 8,500 – will leave the care of social services aged between 16 and 18 years of age, and the majority of these young people will be expected to live independently in the community.

1.1: The scale of the problem: numbers leaving care

Government statistical information on young people aged 16–18 leaving care is published annually in *Children Looked After by Local Authorities*

This provides us with a starting point and context for our exploration of problems. However, there are limitations to this data. First, it refers to the legal status of young people – that is young people who *legally* left care and accommodation – or in terms of the *Children Act 1989* 'ceased to be looked after'. It thus does not include young people whose order remained in force but moved to independent living or elsewhere. Second, there is no data on gender or ethnicity. Both these issues will be addressed later by drawing on research studies.

The most recent government information for 1997 reveals:

- 8,400 young people, aged 16–18, left care and accommodation during 1997, 4,900 (58%) were aged 16 and 17, and 3,500 (42%) were aged 18.

- 45% of these young people left from a foster care placement and 20% from a children's home.

- 25% left from community placements including lodgings, living independently or from their parents home.

- 10% left from some form of residential care other than children's homes, including schools for children with special educational needs, voluntary homes and hostels, youth treatment centres, young offender institutions, prison, family centres or mother and baby homes.

- 62% of these young people who left care during 1997 were looked after on a voluntary agreement between their parents and the local authority; 27% were looked after on care order.

- 50% of these care leavers had been looked after for more than two years, and a quarter for five years or more.

Since 1993 there has been a small drop in the numbers of young people leaving care – from 8,900 to 8,400 – but whereas the proportion of young people leaving care on their eighteenth birthday has fallen, from 48% to 41%, the proportion leaving aged 16 has increased from 33% to 40%.

1.2: The nature and difficulties of leaving care: a review of the literature

1.2.1: Early research: 1960–1990

From the mid-1970s, a body of small-scale surveys and qualitative studies has increased our awareness of the range of problems faced by young people leaving care, and made connections between these difficulties and the quality of their pre-care and in-care experiences. These studies have highlighted the diversity of the care experience and shown that care leavers are not a homogeneous group in terms of their pre-care experiences, their care histories, their needs and abilities, or their cultural and ethnic backgrounds. Care may have been valued by young people and helped them but it may also have contributed to other problems. They were likely to have experienced further movement and disruption during their time in care. For those in care longer term there was a weakening of links with family, friends and neighbourhood, and for some of these young people identity confusion stemming from incomplete information; separation and rejection:

> *Young people often lacked a detailed knowledge of their past, a convincing narrative of who they were and why events had taken the course they had* (Biehal *et al.* 1995, 4).

These feelings and confusions could be amplified for black and mixed heritage young people brought up in a predominantly 'white' care system, particularly if they became detached from their families and communities. These early British studies also documented their poor educational performance, their feelings of being stigmatised by care and their variable preparation for leaving care. And upon leaving care at between 16 and 18 years of age, loneliness, isolation unemployment, poverty, movement, homelessness and 'drift' were likely to feature significantly in many of their lives (Godek 1976; Mulvey;1977; Kahan 1979; Triseliotis, 1980; Burgess, 1981; Stein and Maynard 1985: Lupton 1985; Morgan-Klein 1985; Stein and Carey 1986; First Key 1987; Randall 1988; Randall 1989; Barnardo's 1989, Bonnerjea 1990).

As suggested earlier, this picture of needs was derived from small-scale qualitative research, in the main based on selected samples. Nor were any of the early British studies able to make comparisons with non-care young people in any systematic way.

The early research studies from the United States, Canada, and other parts of Europe were also limited in size and scope, and at the best their findings were impressionistic (McCord *et al;* 1960 Van Der Waals, 1960 Meier 1965, Bohman and Sigvardsson 1980; Raychuba 1987). There was, however, one exception, Trudy Festinger's seminal study *No One Ever Asked Us…A Postscript to Foster Care* (Festinger, 1983).

Festinger followed up 349 young people, who had been discharged from foster and residential group care in New York City in 1975. They had been in care for at least five years and were aged 22–25 when they were followed up. In contrast to all the previous studies comparisons were made with the same age adults in the population at large. This was achieved by using data from identical questions in two youth surveys augmented by New York City census data.

There were two main differences between the care leavers and the comparison sample. First, those who had been in care completed less education and gained poorer qualifications. Second, they were less likely to marry or live with a partner. In other respects – perceptions of self and others, health, friendships, dependence on welfare, records of arrest, areas of living – the care leavers, as a whole group, were more alike than different to the comparison sample of non-care young adults. However, there were significant differences between young people leaving foster care and those leaving residential group care. The former, who constituted 75% of the sample, corresponded with the findings outlined, whereas those leaving residential care (25%) were the most disadvantaged group in respect of

education, employment, single parenthood, dependency – and welfare and their personal satisfaction rating.

Returning to the early British research, despite its limitations it was not without influence. It is generally acknowledged that these studies contributed alongside other actions – by the small but powerful voices of young people belonging to 'in care' groups, by housing campaigners and by practitioners and managers working with care leavers in statutory and voluntary agencies – to the awakening of leaving care in the professional and political consciousness which led to the new 'leaving care' duties and wider discretionary powers contained within the Children Act 1989 (Stein 1991). However, in terms of needs assessment they still left the question of how the needs of care leavers differed from other young people unanswered, although at the same time giving signposts for further research.

1.2.2: Recent research: 1990 onwards

More recent research has been able to build upon these earlier studies. Four studies in particular, two from England and two from the United States, have attempted to compare the experiences of care leavers with other young people by the use of comparison samples and secondary sources: analysis of the National Child Development Study data, census material, government information and contextual research findings (*Biehal et al.* 1995; Cheung and Heath 1994; Cook 1994; Iglehart 1994, 1995).

In *Moving On* (Biehal *et al.* 1995) there were four main areas of contrast between care leavers and other young people.

Leaving home and leaving care
First, young people leave care to live independently at a much earlier age than other young people. In both the survey and qualitative sample nearly two -thirds of the young people left care before they were 18 and just under a third did so at just 16. This contrasts with 87% of similar age group who were living at home, and another study which found that the median age of leaving home was 22 for men and 20 for women (Jones 1987). The main reasons for leaving care included placement breakdown and the assumption by carers that they should move on having reached 16 or 17 years of age. Whereas the current trend for young people in the general population is for delayed household formation, care leavers have to make accelerated transitions and thus shoulder adult householder responsibilities at a much earlier age than other young people.

Education

Second, young people leaving care have lower levels of educational attainment and post-16 participation rates than young people in the general population. In the *Moving On* survey sample two-thirds had no qualifications at all, only 15% had a GCSE (A–C grade) or its equivalent and only one young person gained an A level pass. The qualitative sample revealed a similar pattern. Those who did gain some qualifications were overwhelmingly female (85%) and from fostering backgrounds (70%). The differences are striking in comparison with data from both national and participating local area school attainment tables. For the relevant year, nationally 38%, and locally, 30% attained five or more GCSE passes at A–C. As regards A level, 25% of boys and 29% of girls attained at least one pass.

Again, whereas the trend is for increased attainment and participation levels in education, the findings from *Moving On* and earlier studies reveal a depressing consistency of young people with care backgrounds ill-equipped to enter an increasingly competitive labour market.

These findings in respect of educational attainment are also supported by other research studies from the UK, United States, Canada and Australia (Festinger 1983; Raychaba 1987; Jackson 1988;1989; Heath *et al.* 1989; Aldgate *et al.* 1993; Biehal *et al.* 1992; Cook 1994, Cashmore and Paxman 1996, Pinkerton and McCrea 1996).

Analysis of data from the National Child Development Study (NCDS) reveals lower levels of educational attainment among cohort members who had experienced care compared to those who had never been in care (Cheung and Heath 1994). As Cheung and Heath comment:

> *Perhaps the most striking percentages are those for respondents with no qualifications. Of the people (aged 23) who had been in care 43% had no qualifications compared with only 16% of their peers who had never been in care. In a society in which qualifications are of major importance for success in the labour market, the educational disadvantage suffered by children in care hardly needs emphasising* (Cheung and Heath 1994, 365).

More specifically, when respondents who had been in care secured qualifications, they tended to be lower level ones. Whereas two-thirds of their peers secured qualifications at O level or above, only one-third of the respondents who had been in care achieved equivalently.

The NCDS data was also analysed to include division within the 'care' category and this pointed to two main conclusions. First, respondents who were only briefly in care were not disadvantaged in terms of educational attainment or subsequent educational or occupational status compared to non-care respondents. Second, the most disadvantaged group were those who came into care before eleven years of age and typically remained in care for around nine years. They not only had low educational attainment but also had even lower occupational attainments than would have been expected given their lack of qualifications.

The NCDS data was further analysed to consider the effects of social origin on the findings: is it possible that children who have been in care come from particularly disadvantaged backgrounds and that the findings simply reflect that poverty leads to a cycle of disadvantage? In applying additional controls for social origin the research clearly indicates *'the legacy of care cannot be explained purely as a legacy of poverty '*(p371).

The reasons leading to poor educational attainment have been less systematically researched. Hypotheses and speculations arising from earlier qualitative studies include damaging pre-care experiences, non-attendance, exclusion, emotional stress, low expectation of carers and teachers, the prioritisation of welfare above educational concerns and disruption caused by placement moves (see Stein 1994). An Audit Commission study found that nearly half of the children of school age living in local authority children's homes were not attending school and over one-third were not receiving any formal education. The main reasons for their non-attendance at school were being excluded or refusing to attend (Audit Commission 1994).

The evidence contained within *Moving On,* from both the survey and follow-up sample, highlights the importance of placement stability offering continuity of care and schooling in the context of a supportive and encouraging environment for study.

Employment and careers
Third, and closely connected to the previous point, care leavers are more likely to be unemployed than other young people aged 16–19 in the population at large. In *Moving On* 36.5% of the survey sample and 50% of the qualitative sample were unemployed compared to a mean of 19% for other young people. In the follow-up sample half of the young people were unemployed within a few months of leaving care and nearly two-thirds failed during the course of the research to establish a stable career pattern, facing periods of short-term casual work interspersed with episodes of training and unemployment.

Analysis of the NCDS data adds to this picture. This revealed that respondents in 1981 and 1991 who had been in care were much more likely to be unemployed, were more likely to be in semi-or unskilled manual work, and were less likely to be in managerial work than their peers who had never been in care. Also, through statistical modelling of the data, Yi Cheung and Heath suggest that respondents who had been in care in 1981 and 1991 fared less well than would have been expected.

> *That is, these results suggest that unqualified respondents who had been in care were more likely to be unemployed or, if employed, were more likely to be restricted to low skilled manual work than were the unqualified respondents who had never been in care. In this respect there does appear to be a continuing legacy of care. Respondents who had been in care suffered an additional penalty when they entered the labour market over and above the penalty that they suffered in the educational sphere* (Cheung and Heath 1994, 369).

Perhaps not surprisingly, in view of the findings presented above, a consistent finding from research studies completed since the 1970s has been that the vast majority of care leavers live at or near the poverty line. They struggle to survive and to make ends meet – and this affects their whole life.

Young parenthood

The fourth area of contrast between care leavers and other young people is in relation to early parenthood. In *Moving On,* one-quarter of the young women in the survey sample and one half of young women in the follow-up sample were coping with early parenthood, being aged between 16–19 when their babies were born – a finding consistent with other research (Garnett 1992). These patterns contrast sharply with those for the population as a whole. For the comparable year only 5% of young women aged 15–19 had children and only 2.8% were lone mothers at 19 years of age. The average for becoming a mother at that time was 26.5 years and recent research suggests that this age is increasing – indicating another difference in transitions to adulthood between care leavers and other young people (Kiernan and Wicks 1990).

However, despite reoccurring panics about teenage parenthood and especially lone mothers being seen as social problems, this is not inevitable. Research has also drawn attention to the social context in which mothering takes place, the financial dependence it entails, and, where young mothers had sufficient supports, especially from their mothers, their ability to cope and provide good quality care for their children (Sharpe 1987; Phoenix 1991). There is also evidence from young mothers who had been in care

of a feeling of maturity and status thus contributing to achieving an adult identity. The gains for some included a renewal of family links and improved relationships with their mothers and their partner's families. Hutson found that young mothers in supported accommodation tended to experience less poverty and reduced social isolation (Hutson 1997).

Reasons for early parenthood are less researched. In *Moving On,* just over half of the parents said that their pregnancies were unplanned and nearly two-thirds of these were 17 years or younger. Disruption through movement in care, problems with truancy and the absence of a consistent carer capable of inspiring trust may mean they miss out on advice. Also, as the authors of *Moving On* suggest:

> *Safe sex requires an ability to communicate between partners and wether young women have had poor chances for developing trust, confidence and a positive identity, relating to young men in a confident and assertive way can be difficult* (Biehal *et al.* 1995, 132).

1.23:   Differences between black and white young care leavers

There are very few studies which have been able to make significant comparisons between black and white young people, or are solely of black young people leaving care. The only study with an exclusive focus on this group found that transcultural placements or placements in predominantly white areas could leave young black people with subsequent confusions about their cultural identity. Lack of cultural knowledge affected their confidence and self-esteem and thus proved an additional burden at the time of leaving care (First Key 1987; Black and in Care 1994).

Consistent with other findings, by far the largest group of 'black' (black/Asian/mixed heritage) young people in both *Moving On's* survey and qualitative study were young people of mixed heritage (Bebbington and Miles 1989; Rowe *et al.* 1989; Garnett 1992). As a group they tended to enter substitute care earlier and stay longer than white young people. However, apart from that there was very little difference between their care careers and those of young white people. After leaving care, they had similar housing and employment careers, although they were slightly more likely to make good educational progress after leaving care than young white people.

The majority of these young people had experienced racist harassment and abuse and some mixed heritage young people felt that they were not accepted by black or white people.

Young people's definitions of their ethnic identity were often complex, varied and shifted over time. Their identification with a particular ethnic group was strongly related to their identification with or rejection of family members (Tizard and Phoenix 1993; Hail 1992; Owusu-Bempah 1992).

1.2.4 Young people with special needs

As regards young people with special needs, in *Moving On* 23 young people (13% of the survey sample) were identified. The largest group, over half, was composed of young people who had been classified as emotionally or behaviourally disturbed, four had severe learning disabilities, three a physical disability and two had a mental health problem.

Compared to other young people in the survey sample they had fewer educational qualifications, were more likely to be unemployed and were over-represented among the homeless.

Recent research has identified high levels of behavioural and emotional disturbance among young people referred to social services. Triselictis *et al.* (1995) found the behaviour of 90% of young people rated above the 'normal' cut-off point using an adaptation of the Rutter scale (thus allowing comparison with the general population). And in another study over three-quarters of young people referred for assessment were thought by professionals to be displaying disturbed or disturbing behaviour. The highest levels of disturbed behavioural were to be found among those young people who go missing from substitute care. They also found that young people with emotional and behaviour difficulties were over-represented amongst those who went missing often and were at risk of detachment from safe adult networks (Wade *et al.* 1998).

1.2.5 United States research

The Westat study in the United States (Cook 1994) made systematic comparisons between its sample of care leavers and two other groups: 18–24 year olds in general population, and 18–24 year olds living below the poverty level. The principal researcher comments:

> *In general, the status of discharged foster care youth is only adequate at best. With respect to education, early parenthood, and the use of public assistance, discharged foster care youth more closely resembled those 18–24 year olds living below the poverty level than they did the general 18–24 population*(Cook, 1994, 217).

The study shows that the general 18–24 year old population had a high school completion rate of 78% compared to 54% for the study population and 53% for youth living below the poverty level. Not surprisingly this was reflected in higher levels of youth unemployment and lower job maintenance after one year compared to the general population.

Sixty percent of the young women in the study population and the same percentage of the young women living below the poverty level had given birth to at least one child compared to 24% of the young women in the general population.

Finally, 30% of the study population and 24% of the population living below poverty were public assistance recipients, compared to 5% of the general population.

The second study from the United States compared 63 non-foster care adolescents with 42 adolescents placed in kinship care and 69 young people in no-relative foster care in terms of their readiness for independent living (Iglehart 1995). Bivariate analysis of self-report data revealed that foster care and non-foster care young people were not significantly different in their perceptions of independent living skill levels, their type of employment, and their perceived overall preparation for independent living. However, both groups of foster care young people were more likely to perform poorly at school, worry about their future, plan to work fulltime and not expect to be financially supported by their carers. And the group in non-relative foster care did not expect to live with their foster carers. Iglehart suggests:

> *Foster care brings with it worry…and the perception that the adolescent has to rely on him/herself after emancipation…these perceptions appear to capture a general sense of isolation and an absence of social support…while independent living programs may offer skills and knowledge needed for successful emancipation, it is not clear to what extent, if any, these programs can combat isolation and provide social support'* (Iglehart 1995, 430).

In an earlier exploratory study the same author identified the significance of educational success, placement stability and work in contributing to readiness for independent living – and conversely, the negative consequences of mental health problems (Iglehart 1994).

In addition to the substantive similarities, what these studies contribute by drawing on comparative data, and what was lacking in earlier research, is an empirical underpinning to our assessment of need, an essential foundation

for conceptual clarification and the planning of intervention. The analysis of the NCDS data is particularly pertinent for it provides substantial evidence for a connection between the main areas of comparison by what is referred to as *the legacy of care*. To avoid over-simplification, this legacy should perhaps be considered as derived from a process linking reasons for being 'looked after' including pre-care experiences with early interventions as well as subsequent care careers.

The evidence from these studies shows that young people leaving care have to cope with the challenges and responsibilities of major changes in their lives – in leaving foster and residential care and setting up home, in leaving school and entering the world of work or, more likely, being unemployed and surviving on benefits, and in being parents – at a far younger age than other young people. In short, they have compressed and accelerated transitions to adulthood.

2: Aims and Objectives for Local Authorities

The increased recognition of these problems has led to legislative change, the development of specialist leaving care teams and more focused support for care leavers.

2.1: Legislative framework

The legislative framework for developing these services is provided by the duties and powers given to local authorities by the Children Act 1989 and its associated guidance (Department of Health 1991). The main leaving care provisions are summarised below:

■ duty to advise, assist and befriend young people who are looked after with a view to promoting their welfare when they cease to be looked after (s24(1));

■ duty to advise and befriend young people under 21 who were looked after by the local authority or a voluntary agency after the age of 16 (s24(2));

■ duty to advise the relevant local authority when a young person who they are advising and befriending moves to another area (s24(11));

■ social services departments have the power to request the help of other departments, including housing authorities, to assist in the provision of services and these departments have a duty to comply so far as it is compatible with their own statutory duties (s27(2));

■ duty to establish a procedure for considering representations, including any complaint, made to them by a person qualifying for advice and assistance (s26(3))

■ duty to accommodate any child in need who has reached the age of 16 if their welfare is likely to be seriously prejudiced without accommodation (s20(3));

- power to assist in kind or, in exceptional circumstances, in cash, any young person who qualifies for advice (s24(6)(7));

- power to provide financial assistance connected with a young person's further education, employment or training (s24(8);

- power for education and training grants to continue beyond 21 to enable a young person to complete their education or training (s24(9));

- power to accommodate young people aged 16 to 20 in a community home, if that home accommodates young people who have reached 16, if to do so would safeguard or promote their welfare (s20(5)).

The Children Act 1989 involved a major re-writing of both public and private law for children and families. In addition to the explicit leaving care sections of the Act, the new provisions for family support services, for the inclusion of children with disabilities, for the recognition of culture, language, racial origin and religion and for consultative rights, helped to provided a new general legal framework for young people at home, in care and for those leaving care.

As we shall see, recent research findings show that specialist leaving care schemes can lead to positive outcomes if they build upon a foundation of good quality substitute care providing stability, continuity, family and carer links and gradual preparation for leaving. However, the research evidence indicates that there is great variation in the range and quality of leaving care services in the UK.

2.2: Policy developments

In response to variations in the general range and quality of child care services (see Biehal *et al.* 1995; Department of Health 1997; Broad 1998 in respect of leaving care service variation), the present government has launched the *Quality Protects* initiative including Objectives for Social Services for Children (Department of Health 1998a; 1998b). Objective 5 *is to ensure that young people leaving care, as they enter adulthood, are not isolated and participate socially and economically as citizens*

This is detailed in sub-objective 5.1 *… to maximise the number engaged in education, training of employment at the age of 19* and 5.2 *… to maximise the number of young people leaving care after their sixteenth birthday who are still in touch with SSD, or known for approved contact, on their nineteenth birthday*

In addition, the Government's Response to the Children's Safeguards Review (Utting1997) is committed to *'radical new arrangements for 16/17 year old care leavers for the future* through legislative change and improved local services as part of the *Quality Protects*programme. The Review Response identifies key outcome areas: reduction in early discharges from care; increased contact, support and assistance; increased numbers in suitable accommodation; increased numbers in education, employment and training; reduction in numbers of socially excluded young people including those sleeping rough, in prison, dependent on benefits and living in poor conditions. The importance of outcomes has also been recognised by the introduction of the *Looking After Children Assessment and Action Records* (Pareker *et al.* 1991; Ward 1995). Further proposals to improve services for care leavers have been recently outlined in a new consultative document entitled *Me, Survive, Out There?*(Department of Health 1999).

Given the central role of human resources in implementing the Quality Protects programme and in achieving the outcomes identified in the Review Response it is assumed that, to be effective, training will need to be strategically integrated with policy.

2.3: Local authority aims

The legal and policy framework identified above, as well as the research discussed, leads us to identify the following aims for local authorities.

Local authorities should be aiming to:

1.   Provide stable placements, continuity of carers and the maintenance, wherever possible, of positive family links whilst young people are 'looked after'.

2.   'Look after' young people until they are prepared and ready to leave care.

3.   Maintain relationships with carers and families, where possible, after young people leave care.

4.   Prepare young people, gradually and holistically, paying attention to practical self-care needs –health, budgeting, domestic skills – and personal and social relationship dimensions.

5.   Maximise the education, training and employment outcomes for young people leaving care.

6.   Ensure young people leaving care have access to a range of accommodation and the support and skills to maintain themselves in their accommodation.

7.   Ensure that there is contingency provision to support care leave's in the event of a crisis, including arrangements for respite care.

8.   Provide or enable ongoing support. This may include specialist leaving care scheme support, support by carers and social workers, and support by befrienders, mentors or volunteers.

9.   Ensure young people leaving care receive their full income entitlements.

10.   Involve young people in all assessment, planning, review and decision-making arrangements for leaving care.

11.   Inform young people leaving care of the available services – including the provision of an accessible leaving care guide.

12.   Monitor and evaluate the outcomes of 1–11 above.

3: Issues Affecting Local Authority Responses

There are a number of issues that may influence the ability of local authorities to respond to the problems that have been identified. These will be dealt with under three headings: the application of research findings to policy and practice; the Children Act 1989, and the wider policy framework affecting young people.

3.1: Translating research findings into strategy, policy and practice

In local authorities which currently attempt to meet the aims outlined above and provide a comprehensive range of leaving care services, the following elements are usually present (see First Key 1996).

    i)   A considerable level of awareness amongst members, senior managers and a range of practitioners of the key messages from research in this area. In particular they will be aware of those factors which research suggests can lead to positive outcomes (Stein 1997).

    ii)   A corporate and inter-agency framework for delivering services agreed through formal committee and planning structures. This includes local authority endorsement of leaving care policies and the development of formal joint working arrangements with relevant departments and other provider agencies.

    iii)   A strategic response reflected in comprehensive written leaving care policies and procedures. This includes a leaving care policy statement which is fully integrated into the local authority Children's Services Plan.

    iv)   An appropriate model of service delivery.

    v)   A highly motivated and skilled workforce, trained in the specialist areas of knowledge required for the work. These will include knowledge of housing, welfare rights, education/careers, youth and leisure services.

The research findings on what works in leaving care and which therefore help to provide an evidence base of the strategic developments of services are summarised below.

First, specialist leaving care schemes can make a positive contribution to specific outcomes for care leavers. They have been shown to work particularly well in the areas of accommodation and life skills and to some extent in furthering social networks, developing relationships and building self-esteem. The evidence from the United States suggests that targeted and combined programmes worked well.

Second, successful educational outcomes were closely linked to placement stability, more often although not exclusively achieved in foster care placements, combined with a supportive and encouraging environment for study. Without such stability and encouragement post-16 employment, education and training outcomes were likely to be very poor and schemes were then less able to provide sufficient compensation.

Third, success in social networks, personal relationships and in having a positive self-image although assisted by schemes was also closely connected with young people having positive, supportive relationships with family members or former foster carers (Biehal and Wade 1996; Wade 1997).

Fourth, stability, continuity and family/carer links provide the foundation upon which schemes must build if they are to work well.

In overall terms, schemes have been shown to work well with approximately three-quarters of young people in either achieving good outcomes or making positive progress towards such outcomes in terms of accommodation, support and self-esteem.

When schemes work well why is this so? There appear to be a number of reasons suggested by the evaluation of practice (Biehal *et al*. 1995).

    i)   They are able to target what have been referred to as the core needs of care leavers – for accommodation, social support, finance and careers – in different ways. This includes providing information, counselling, group work support and drop-in facilities.

    ii)   They are able to engage and involve young people successfully in decisions that are important to them. They are able to work with young people not for them.

iii) They are able to work with other agencies – particularly housing providers, benefit agencies, employment and training agencies – in meeting the core needs of care leavers.

iv) Finally, they are able to influence policy at the local level – by increasing awareness of issues, contributing to debates and informing policy responses.

3.2: The Children Act 1989

The Children Act 1989 provides the legislative framework for a comprehensive range of leaving care services. However, there is also survey evidence of considerable variation in the resourcing, range and quality of service provision (Audit Commission 1996; First Key 1992; SCF 1995; Biehal *et al.* 1995; Broad 1998). The problem of 'geographical happenstance', identified in the Short report in 1984, or what might be more appropriately called territorial injustice, both within and between local authority areas, remains a major cause for concern (Stein 1999).

The permissive nature of local authority financial powers is at the heart of this problem. At one end of the spectrum, some authorities have used section 24 funds imaginatively to fund specialist leaving care schemes to provide support and develop resource options, to offer leaving care grants to help furnish flats and to subsidise young people in education, training or low paid work while, at the other, some authorities have not invested in specialist services and some young people continue to receive little financial help at all (Lowe 1990; Garnett 1992; First Key 1992; Biehal and Wade 1999). A recent inspection of leaving care procedures in nine local authorities suggested that, while the overall situation had improved, variations persisted and young people often lacked information about the financial help available (Department of Health 1997).

Given the particular needs of care leavers for support and the delayed transitions of young people from families to householders, there are arguments for considering whether after care services under the Act should be provided up to the age of 25.

3.3: The wider social policy context

The present social policy framework, particularly in relation to benefits and housing, is complex, discretionary and, generally, discouraging for care leavers. Securing financial support can involve negotiations with local authority social services, housing and education departments, in addition to the benefits agency. The income support system for under 25 year olds is

based on the assumption of parental support – hence the lower levels of benefit for this age group and the 'estrangement' hurdles that 16 and 17 year olds have to overcome to secure benefits. Access to local authority housing also involves negotiations over 'vulnerability'. For those young people leaving care without assistance there is evidence of great hardship, including destitution.

4: Baseline of Existing Local Authority Practice

4.1: The development of leaving care schemes

Growing awareness of the problems faced by young people helped to foster the growth of specialist services for care leavers from the early 1980s. Of 33 leaving care schemes surveyed in 1989, only one had been in existence in 1978 and the vast majority, 82%, had started in or after 1985 (Stone 1990). The duties and powers given to local authorities by the Children Act 1989 provided a further stimulus to the development of services in the 1990s. A recent survey identified 61 projects carrying a 'leaving care' label and the 46 that responded were based in 43 different local authority areas and included a mix of statutory and voluntary providers (Broad 1998).

The piecemeal nature of this growth has been associated with the emergence of different models of service delivery and significant differences in the range and intensity of services offered (Bonnerjea 1990; Stone 1990; Stein 1991; Smith 1994; Biehal *et al.* 1995; Stein 1997).
Some local authorities have invested heavily in providing universal and comprehensive services administered through centrally organised specialist schemes. Others rely primarily on continuing support from social workers and carers, perhaps complemented by small projects that serve limited numbers or target particular groups of care leavers. Yet others have developed dispersed schemes, with individual specialist workers attached to area-based social work teams. Considerable variations also continue to exist, both within and between authorities, in the types of amounts of financial assistance that young people can expect to receive to help them with housing, education and income (Garnett 1992; Biehal *et al.* 1995; Broad 1998). Although there appears to have been an increase in the number of authorities that have written leaving care policies and guides to services (Broad 1998), a recent inspection of nine local authorities found that young people, especially those in foster care, were often not aware of them. All nine authorities had some form of specialist service, although not necessarily universal in coverage, and young people in receipt of these services were the most likely to be receiving a comprehensive and well-informed package of support. Despite this, the inspection found that few young people had written leaving care plans, that only a minority received a formally planned service and that a lack of effective monitoring systems

inhibited knowledge about the post-care progress of young people and the possibilities for strategic planning and service evaluation (Department of Health 1997).

4.2:   The outcomes of scheme services

Attempts to evaluate the impact of scheme services on subsequent outcomes for young people are at an early stage in the leaving care field. The growing literature on outcomes acknowledges the complexity of the task, given the range of contextual and interpersonal factors that help to structure the life changes of young people (Knapp 1989; Parker *et al.* 1991; Cheetham *et al.* 1992; Ward 1995). In the past 20 years there have been no studies in this area that have adopted an experimental design (Stein 1997) and very few longitudinal studies that have employed a quasi-experimental design to compare outcomes for young people in receipt of specialist services with those who are not (Cook 1994; Biehal *et al.* 1995). Cook's evaluation of independent living programmes in the United States found that such preparation programmes tended to have the most beneficial impact on a range of subsequent outcomes when a core group of skills were taught in combination and targeted towards specific goals.

Moving On represents the most comprehensive British study to date of different approaches to delivering leaving care services (Biehal *et al.* 1995). The study evaluated four leaving care schemes situated in three local authorities and tracked a sample of 74 young people over their first 18–24 months of independent living. The sample was subdivided into a participating group of scheme users and a comparison group of young people not in receipt of scheme services. The study identified considerable diversity in the organisation of and approaches to delivering leaving care services. It suggested that there could be no single blueprint for schemes. Models of schemes and the shape of the services offered by them varied according to the geographical, policy and resource context within which they were imbedded and the nature of the providing agency. However, all the schemes, with varying degrees of success, were working at a number of levels in an attempt to meet the core needs of care leavers – assisting their authorities to develop clear policies and access routes; developing a flexible range of resource options in co-operation with other agencies (especially in relation to accommodation, finance and careers); providing information and consultancy services (including preparation and leaving care planning); and offering direct individual and/or group-based support to young people. However leaving care services are organised, these core functions appear necessary if services are to be both effective and comprehensive.

The outcomes of scheme interventions were assessed across nine dimensions of young people's lives – accommodation, life skills, education, career paths, social networks, relationships, identity, drug use and offending. Two approaches to measuring outcomes were developed. First, comparisons of progress for those using/not using schemes were made for each dimension. However, schemes tended to work with young people who had more disadvantaged starting points. They were less likely to have positive family relationships, were more socially isolated and tended to have had less stable early housing careers. In recognition of this, a second approach was developed to assess young people's progress across these dimensions, taking account of their differential starting points. In relation to outcomes, the achievements of schemes were quite impressive, especially in the areas of accommodation and life skills. By the end of the study, while there had been no change for the comparison group, there had been an increase in the proportion of scheme users managing in good accommodation. Scheme users were also more likely to have improved their practical and budgeting skills and were more likely to have maintained their negotiating skills in the community. Schemes were less able to compensate for young people who had poor social networks and relationship skills nor were they able to improve the career paths of young people, an area in which poor outcomes were the norm for both samples. However, in overall terms, three-quarters of the young people involved with schemes had made progress in relation to their starting points.

Consistent with much of the research identified earlier, a number of factors were found to be important to the provision of a successful 'through care' approach to supporting transitions and to improved outcomes. Placement stability was associated with improved educational and career outcomes and better relationship skills. Consistent, holistic and well-structured preparation in the context of a stable placement seemed most beneficial. The maintenance and repair of family relationships were crucial to later outcomes. Over three-quarters of those with broadly poor outcomes lacked family support. Well co-ordinated leaving care planning that delineated clear responsibilities and maximised continuity of support by prime carers, social workers and families offered the best chance of a successful transition. The risk that specialist schemes, where young people are transferred to them, may promote discontinuity in these links has been identified in the early literature (Stein 1990). Given the proliferation of different models of provision, further exploration is required to evaluate which types of service may best promote such continuity for young people while most effectively carrying out the core functions described above.

Our knowledge of the field combined with discussion with specialist agencies, including First Key, suggests that, despite the diversity of service types that exist, the following models of authority-wide provision are common.

Non-specialist service – In this model responsibility for delivering a leaving care service rests primarily with field social workers, perhaps in collaboration with carers. This was the main form of provision in the early 1990s (First Key 1992). This model ought to help ensure continuity in support for young people through transition but may be less effective in developing resource options, delivering specialist advice and offering choice to young people.

Dispersed and specialist service – In this model individual specialist leaving care workers are attached to area-based fieldwork teams. The model ought to promote collaboration within and between agencies and provide specialist advice and consultancy. However, it may also be weak in developing a range of resource options and contributing to policy developments.

Centrally organised specialist service – This is likely to be the most expensive option for authorities and comprises a centrally organised team of workers that usually attempts to provide an authority-wide service. The model ought to have strength in delivering a universal and comprehensive service, developing resource options and specialist advice, but may offer less continuity for young people where they are transferred to schemes.

Centrally organised integrated service – There is evidence of an emerging model which attempts to provide an integrated service for a wider range of vulnerable young people, including care leavers and other young people 'in need' – for example, homeless 16 and 17 year olds, young offenders, street children and young carers. Integration is intended to be facilitated through a multi-agency management and staffing model.

5:   Best Practice in Leaving Care

From a policy and practice perspective, leaving care work is marked by continuing change and innovation. Nothing stands still for very long. However, as we have suggested in earlier sections of this report, there are a number of core messages that can help to inform best practice, which derive from published research, project evaluations and government policies, guidance and inspections. We will draw upon these sources to inform this chapter. In addition, we have undertaken a survey of local authorities asking them to send documented examples of current best practice in leaving care. Although not all could meet the tight timescale we were forced to set, the responses from 42 authorities and voluntary sector agencies will be utilised to provide illustrations of positive practice. Given the dynamic nature of the field, not all have yet been evaluated and some are at an early point in the planning, implementation and review cycle.

Differences in the size of authorities and in rural/urban settings are likely to lead to different challenges and point to the need for different kinds of solutions. In this sense, there can be no single blueprint for a best practice model. However, it would be reasonable to expect that applicants for Beacon status should provide evidence that their leaving care services are both comprehensive (capable of reaching out to all care leavers in their area) and flexible in meeting individual needs and that they are making positive progress in relation to each of the areas discussed below. No authority is likely to have everything in place.

A core message from research suggests that while leaving care represents a crucial moment in a young person's life, it needs to be built upon the firm foundation of a stable and positive experience of being looked after during which young people can be adequately prepared for adult life. Stability, continuity of links and relationships, a positive approach to education, gradual preparation and the option only to leave when ready are quite firmly associated with more successful post-care outcomes.

Where young people lack this foundation, positive outcomes are harder to achieve and a greater commitment to intensive compensatory help is likely to be necessary (see Biehal *et al.* 1995; Stein 1997). We will therefore start with preparation.

5.1: Preparation for adult life

Comments from young people and evaluations of looked after settings, especially residential, have pointed to inadequacies in the preparation young people receive. Many care arrangements have tended to be over-protective, with limited opportunities for young people to participate in decision making. Children's homes have tended to be inflexible and to focus on practical skills in the last months of care, and the needs of particular groups, for example young black people or those with special needs, have not been appropriately met (Page and Clarke 1977; Stein and Ellis 1983; Black and in Care 1984; Berridge 1985; Stein and Carey 1986; Who Cares? Trust 1993; Biehal *et al.* 1995).

Evaluations of good practice point to the importance of *assessment* to identify young people's needs and how they will be met; *support and participation*, involving discussion, negotiation and risk taking in the context of *a stable placement* and the *gradual* opportunity to learn skills (Clayden and Stein 1996). In one study, young people's positive evaluations of preparation most frequently referred to the practical skills that had been taught and the participative manner in which they had been taught, either individually or in groups (Lynes and Goddard 1995).

There is evidence that many children's homes experience difficulty in providing the stable home life that young people need for such an approach to work (Berridge 1985; Berridge and Brody 1998; Wade *et al.* 1998). Research into the quality of care in children's homes has indicated that homes are more likely to achieve positive outcomes where they are small, not disturbed by frequent reorganisation, where the head of home feels its roles are clear and mutually compatible, and where there is some autonomy to get on with the job (Sinclair and Gibbs 1998). Consistent with other studies, it also highlighted the importance of tackling bullying and sexual harassment, which contribute to the misery of residents, of family contact, the gradual teaching of skills, ongoing support after leaving and of young people being able to leave when ready.

Evidence also suggests that preparation should be holistic in approach, attaching equal importance to practical, emotional and inter-personal skills (Biehal *et al.* 1995). Elements of preparation may include: *self-care skills*–personal hygiene, diet and health, including sexual health; *practical*

skills–budgeting, shopping, cooking, cleaning; *inter-personal skills*–
managing a range of formal and informal relationships, including sexual
relationships; *education* –planning and supporting positive progress; and
identify– knowledge of and links with family and community, sexuality,
cultural knowledge/skills for young people from minority ethnic
communities. Particular attention may also be necessary to meet the needs
of young people with learning or physical disabilities, for whom there is
evidence that preparation opportunities may be overly restrictive (Fry
1992b; Biehal *et al.* 1995).

The *Looking After Children* Assessment and Action Records, which most
local authorities have now adopted, provide a framework for linking this
approach into the child care planning and review cycle (Parker *et al.* 1991;
Ward 1995). An assessment of young people's skills and abilities should be
explicitly built into leaving care planning in order to gauge whether they
are ready to leave and what work remains to be done, since those leaving
with incomplete skills tend to fair worse.

Specialist leaving care schemes can have an important role to play in
preparation programmes for looked after young people, through offering
advice and consultancy to carers and social workers, assisting with the
development of life skills packs, offering training, and through direct work
with young people individually or in groups. At present, this seems more
likely to happen with young people in residential settings (Biehal *et al.*
1995). At the after care stage, there is evidence, especially for those who
have experienced less stable care careers, that specialist schemes can
contribute to more positive outcomes in the life skills area by offering
young people intensive compensatory help and ongoing support, especially
where young people spend a period of time in semi-independent or
supported living situations (Biehal *et al.* 1995).

- Some leaving care schemes have prepared detailed skills assessment packs and pathway to independence workbooks, covering most of the above skills areas, for use by carers, key workers and young people.

- Some schemes offer structured weekly preparation groups and individual support to young people aged 15 + while still looked after.

- An initiative is under way to train and support ex-care young people as peer educators to provide life skills advice, support and training to looked after young people.

Source: Local Authority Best Practice Survey 1999

5.2: Planning and review: an appropriate policy and practice framework for leaving care

Effective planning and review for individual young people depends upon the existence of an appropriate policy and practice framework and a model for delivering leaving care services. The shape of this framework is informed by the Children Act 1989 Regulations and Guidance (Department of Health 1991b) and by the subsequent inspections and work on standards in leaving care (First Key 1996; Department of Health 1997). Evidence also suggests that it is helpful for this framework to situate leaving care in the context of a continuum of *through care* services for young people, linking preventive services, services for looked after young people and after care (Biehal *et al*. 1995; First Key 1996).

In summary, an appropriate framework would incorporate the following elements:

1) **Clearly written, comprehensive and accessible leaving care policies, procedures and practice guidance**. These should specify:

- the full range of services available for young people leaving care and after care;

- criteria governing entitlement to a service;

- the procedures associated with preparation, leaving care and after;

- arrangements for meeting diversity of need–including young black people, young parents, young people with learning or physical disabilities;

- a corporate and inter-agency strategy for meeting needs;

- a designate lead officer for leaving care services;

- arrangements for informing those entitled to a service – including guides for young people and carers;

- arrangements for representation and complaints;

- arrangements for monitoring and review of policy and service framework, including those for incorporating the views of young people.

2) **A model of service delivery appropriate to the numbers and diversity of young people leaving care and to the geographical area in which they are situated.** It should be properly costed, regularly reviewed and accessible to all those eligible to receive services. Where a specialist leaving care service is considered appropriate, there is evidence to suggest that it is likely to work best where it is integrated into the continuum of throughcare services for young people, works in partnership with young people's existing sources of support and provides a specialist input into policy, resource development, preparation, leaving care planning and after care support (Biehal *et al.* 1995, First Key;1996).

Wherever it is possible, the model should:

- maximise the continuity of young people's links with family, friends, past carers and social workers;

- offer young people choices about where they can obtain services from;

- make provision for those who may return for support at a later date;

- include arrangements for inter-agency partnerships;

- incorporate the expertise of experienced carers, social workers and other specialists;

- make provision for specialist training.

3) **Arrangements for systematic monitoring of individual and service outcomes**. The *Quality Protects* initiative urges local authorities to improve their procedures for tracking young people who have left care and seeks evidence of improvements in education and employment outcomes. Such a feedback loop, incorporating the views of young people, should both help to improve individual outcomes and provide evidence of aggregate need to facilitate service planning and review.

4) **Arrangements for consulting young people.** Involving young people in the evaluation of services, at least in anything more than a token way, is difficult and time consuming. A recent inspection of nine local authorities found that, with the exception of leaving care schemes, few authorities could provide examples of arrangements for consulting young people on general service issues and suggested a tendency to underestimate young people's willingness to participate (Department of Health 1997). However, evidence from young people is likely to be necessary to ensure that services are workable, user friendly, meeting expressed needs and measuring realistic objectives. Some strategies for consulting young people, derived from the local authority survey, are illustrated below.

Service models

Although models of leaving care service are likely to vary according to the size and circumstance of the authority, some larger authorities are in the process of developing innovative inter-agency partnership models that address the core needs of care leavers alongside those of other vulnerable groups of young people. Two brief examples are offered below:

- One city authority is developing a 'one stop shop' approach to provide a comprehensive package of support to specified groups of young people 'in need' including care leavers, young homeless, young people with special needs and young carers. Service management is drawn from all relevant partner agencies and includes young people. A multi-disciplinary team recruited from within these agencies work together to provide integrated packages of support. The model has not yet been evaluated.

Consulting and involving young people in services

A number of positive strategies were evident from the local authority survey:

■ reserving places for young people on agency management boards;

■ use of regular forums and consultative groups to give opportunities for feedback, usually with a staff member or an independent person, such as a Children's Rights Officer, to co-ordinate them;

■ involvement of young people in the preparation of information and user–friendly guides;

■ involvement in conferences/training to substitute carers, officers and members;

■ feedback/discussion groups in leaving care projects, children's homes;etc;

■ some leaving care schemes systematically involve young people in policy and service review and in the recruitment and training of future staff and/or volunteers.

Sources: Local Authority Best Practice Survey 1999; Department of Health (1997)

5.3: Arrangements for individual planning and review

The planning and review process prior to a young person leaving care is the foundation upon which good after care support can be built. Research suggests that a number of elements are associated with smooth and well-planned transitions (Biehal *et al.* 1995). First, that it helps for leaving care planning to take place early–to start at least 12 months before a proposed move. Second, that all those with an interest in the support of the young person are fully involved in the process, provided this is consistent with the young person's wishes. These may include social workers, past carers, family members and staff from other partner agencies. This will help to maximise continuity of support for young people. Third, where specialist schemes exist, it is helpful for them to be involved at an early point. They can offer specialist knowledge and help to focus planning. Fourth, that the process should proceed at the young person's pace. This will help to ensure that young people are fully informed about the options available to them and that they will be able to make real choices. Fifth, that the approach should be holistic and explore all dimensions of young people's lives. Deficits in skills and abilities and in the young person's sources of informal support need to be identified in order that appropriate plans can be made. Sixth, young people need to be aware of the future sources of support that will be available to them; how to access them and of contingency plans in the event of crisis. Finally, it helps for leaving care planning to be written to facilitate review of progress and to identify discrete tasks for those involved.

The following illustration points to the areas that ought to be considered during leaving care planning and review:

- safe and affordable accommodation; options appropriate to the young person's needs taking account of location and support networks; financial assistance to set up and maintain the accommodation;

- education, employment and training options; financial assistance where required;

- assistance with claiming entitlement to welfare benefits where appropriate;

- provision of general and specialised health care;

- leisure options;

- maintenance of informal networks of support, including family members and friends; creation of new networks of advice and support where appropriate;

- introduction to specialist services where appropriate (counselling, advocacy, health);

- clear signposting of sources of assistance in the future, including out of hours in emergency.

Source: First Key 1996

5.4: Helping young people maintain existing relationships/community ties and develop new ones

For young people who have spent considerable lengths of time being looked after, the tendency for their links with family and neighbourhood to weaken has been well documented (Millham *et al.* 1986; Berridge and Cleaver 1987). This process may have particular resonance for young black people brought up in predominantly 'white' care contexts (First Key 1987). However, there is also evidence that, at the point of leaving care, a need to renew or repair relationships with family members, including extended family, remains at the forefront of young people's minds (Biehal *et al.* 1995). Despite this, and perhaps understandably, work on family links and family mediation were not a priority for professionals at this time. Fewer than one-third of the social workers were active in this area and the specialist schemes tended not to undertake direct work with families. There is also evidence that professional support from social workers and substitute carers tends to decline once young people ceased to be looked after (Garnett 1992; Biehal *et al.* 1995), thereby risking further young people's sense of continuity, and that relatively few young people are able to remain with foster carers beyond this point (Fry, 1992).

These findings suggest that, wherever it proves possible, young people's best interests will be served by efforts to maintain or create links with their families and friends while they are looked after(Marsh & Peel, iggg). Even if relationships with parents have irretrievably broken down, other members of a young person's extended family may be able to offer some support. Contact with family may increase young people's sense of stability in foster placements and help preserve placements (Berridge 1996), and there is evidence that, at a later point, those lacking family support may have greater difficulty creating new relationships (Biehal *et al.* 1995).

A thorough knowledge of young people's existing sources of informal support and of their ability to make and sustain relationships should form an important part of leaving care planning. Arrangements can then be made for them to live close to those supports. Such an assessment can help to gauge young people's preparedness for independent living and identify work that needs to be done (Smith(ed.) 1998). Plans can also be made to ensure a continuing role, funded where necessary, for substitute carers to support young people once they have moved on, where this is wanted This might also include the option to remain with carers on a supported lodgings basis (Fry 1992; Wade 1997).

There is also evidence that specialist schemes can play an important role in helping young people to form new links and relationships. Through the provision of groups to facilitate social contacts and guidance on social skills, through linking young people into local youth and leisure provision and through individual advice on managing social relationships where difficulties arise, they can help care leavers combat isolation and strengthen their resistance to exploitation by others (Biehal *et al.* 1995). A recent inspection found that, in relation to promoting support networks, specialist schemes usually offered a more comprehensive age-appropriate service (Department of Health 1997).

- Some local authorities have written into their leaving care policies and procedures a continuing care role for foster carers and residential social workers.

- Some specialist schemes help to negotiate stays with foster carers on a supported lodgings basis. Most have some commitment to promoting links with family and friends. Most also offer groups and/or drop-in services to young people.

- One authority is using Family Group Conferencing as part of the planning process for care leavers. The aim is for family members to devise an appropriate plan and support package with young people, in partnership with the local authority.

- One project offering floating support to young parents has an explicit aim to accommodate them close to their own communities so as not to disrupt family ties and education plans.

Source: Local Authority Best Practice Survey 1999

5.5: Ensuring young people receive their full income entitlement

Studies revealing high levels of unemployment and low levels of participation in education and training amongst care leavers point to a tendency for the majority of young people to remain financially dependent for some time after leaving care (Garnett 1992; Biehal *et al.* 1995; Broad 1998). Coping with poverty can intensify young people's isolation, threaten their coping skills and, if lacking support, lead to subsequent homelessness (Biehal and Wade 1999). At present the Children Act 1989 gives local authorities a range of powers to assist young people in relation to housing, education, training and work. The discretionary nature of those powers has led to variations in the financial help young people can expect to receive (Biehal *et al.* 1995; Broad 1998). Current government proposals to improve the financial arrangements for care leavers may lead to significant changes in the duties placed upon local authorities in this area (Department of Health 1999).

There is considerable evidence that the poor educational performance of looked after young people–a majority lack qualifications at the end of schooling–severely restricts young people's career options at the leaving care stage (Jackson 1998/99; Jackson 1994; Stein 1994). In this sense, preparing young people to sustain themselves financially after care needs to be continuously planned and monitored throughout the time they are looked after. Maximising opportunities at school is likely to provide the best protection against subsequent poverty.

Young people are unlikely to receive their full entitlement unless local authorities provide clear and accessible information to social workers, substitute carers and young people. Inspection evidence suggests young people, social workers and carers, especially foster carers, often lack information about entitlements from social services and, given variations in amounts paid, by what criteria these have been assessed (Department of Health 1997). Leaving care policies and guidance should make clear the range of financial support that is available, the criteria used for assessing entitlement, the groups of young people that are eligible to apply, make clear how this links with entitlements from other agencies and provide information about how to make claims.

Financial assistance to young people is also likely to be promoted by formal links and protocols with other relevant agencies – the Benefits Agency, Housing Benefit, the Education Authority. The identification of designated link officers in these agencies is likely to be helpful in processing claims and facilitating joint working arrangements (First Key 1996; Department of Health 1997).

An assessment of young people's financial needs should form part of the leaving care planning process. At this stage it should be possible to specify in writing precisely how these needs will be met and to monitor progress. However, young people's circumstances are likely to change after they have moved on. Arrangements therefore need to be in place to monitor these changes and to provide support if and when unforeseen events occur.

Research has shown that specialist schemes can play a lead role in implementing local authorities, discretionary powers to provide leaving care grants, 'top-up' payments for those in education, training or low paid work and education grants. Schemes also have the expertise to advise young people in need of community care grants, social fund loans, housing benefit and income support. Drop-in services can also provide hidden support – for example, meals, outings and holidays, loans and help with transport (Biehal*et al.* 1995; Stein 1997).

5.6: Promoting a healthy and stable lifestyle

The health needs of young people leaving care have been largely neglected in the research literature until very recently (Save the Children 1995; Saunders and Broad 1997) and, in consequence, the evidence base to guide best practice is limited. However, evidence relating to looked after young people points to inconsistencies in the maintenance of health records and in the provision of general and specialist health care. For example, a recent study of children's homes found little consistency in the nature and extent of the health services provided in the homes, limited opportunities for young people to receive counselling, and problems in accessing specialist health services (Berridge and Brody 1996), a finding consistent with other recent studies (Farmer and Pollock 1997; Wade *et al.* 1998). Instability in young people's care careers is also likely to undermine a planned approach to meeting health needs.

With regard to the health needs of care leavers, the Social Services Inspectorate expects local authorities to build upon the health assessments necessary while young people are looked after to promote a healthy lifestyle, ensure appropriate use of primary health care services, provide access to specialist health and therapeutic services where necessary and promote leisure interests (Department of Health 1997). The inspection findings were disappointing. Although young people knew how to access primary health care, recording of health issues on file was poor, there was little information available on healthy lifestyles for staff or young people, little evidence of joint initiatives with Health Promotion, variations in the availability of specialist health services and little recognition by social work

staff, other than specialist schemes, of the need to promote or subsidise leisure activities.

However, there is considerable evidence of need. A recent survey of care leavers found high levels of smoking, drug and alcohol use, high levels of chronic physical conditions and of mental health problems, including self-harming and attempted suicides (Saunders and Broad 1997; Smith(ed.) 1998). Other evidence concerning high levels of early parenthood also point to the need for greater attention to be paid to advice about sexual relationships and sexual health (Garnett 1992; *et al.* 1995).
The costs involved in accessing leisure pursuits also appear prohibitive to many young people (Department of Health 1997; Smith(ed.) 1998).

The health needs of young people leaving care need to build on the foundations provided while young people are looked after. Best practice is likely to be evidenced through thorough health assessments and the maintenance of detailed health records at this stage. The *Looking After Children* materials offer one means of discussing health and lifestyle issues with young people and a basis for linking these discussions into child care planning and review. Accessible information should be available to staff and young people on healthy living and include information on leisure, sexual health; sexuality, the needs of learning and the physically disabled young people and on the health, dietary and cultural needs of young people from minority ethnic communities. These may best be facilitated through partnerships with health agencies with designated link officers or through inter-agency good health forums. Improving young people's access to specialist health services may require imaginative solutions to overcome barriers to access (referral timescales, waiting lists) and to try to make the service itself more user friendly and engaging for young people (Farmer and Pollock 1997; Wade *et al.* 1998). Arrangements for training to enable staff to update their skills and knowledge is likely to be necessary and there is some evidence that involving care leavers as peer educators may represent one way of offering advice and support on health issues to looked after young people (Saunders and Broad 1997, Smith(ed.)1998).

Young people's health needs should be built into the preparation, leaving care and after care planning and review cycle. Evidence suggest that these needs should be viewed from the young person's perspective and be holistic in approach, linking material circumstances (housing, employment, income) and social relationships to a young person's physical and mental health (Saunders and Broad 1997). The reciprocity between these spheres is such that a breakdown in one area can have implications for a young person's health and well-being (Biehal *et al.* 1995). Maintenance of a healthy and stable lifestyle therefore needs to form part of a package of

comprehensive and ongoing after care support. There is evidence, as has been suggested, that specialist schemes can be successful in helping young people to maintain and improve their life skills, develop social skills and in promoting subsidised leisure activities.

- Some SSDs have staff based in multi-disciplinary teams, often within a health setting, to provide specialist services to disabled young people and their families. Authorities developing multi-agency management models often have a health worker attached to the service for young people leaving care.

- One local authority has appointed a psychologist to be based in social services and another uses a voluntary agency to offer specialist counselling.

- Some authorities and specialist schemes have developed partnerships with Health Promotion to research health needs, prepare health packs and hold discussions with looked after young people on health and lifestyle issues.

- One specialist scheme, in partnership with a voluntary agency, is planning to train and support ex-care young people as peer educators to deliver advice, support and counselling on health issues to looked after young people. Young people have also been involved in the design of this project.

Source: Local Authority Best Practice Survey 1999; Department of Health 1997

5.7: Contingency planning

Young people leaving care do so at an early age relative to other young people in the general population. They also have to cope with a series of difficult transitions – managing a home, finding employment, learning to cope financially and building a sustaining network of support for themselves. It is reasonable to expect that many young people will experience difficulties and crises. However, research evidence suggests that, in the event of crisis, opportunities to return to a more sheltered setting are rare and tend to be restricted to young people with learning disabilities or young parents where there are child care concerns (Biehal *et al.* 1995; Department of Health 1997). The need for clear arrangements is also

heightened by the role that specialist leaving care services are increasingly being expected to play in helping to meet local authority responsibilities to young homeless people 'in need' (Broad 1998).

It is therefore important that the potential for crises is foreseen and that contingency arrangements are built into the leaving care planning process. Such arrangements need to be holistic, capable of responding to difficulties in any of the core areas of young people's lives, since loss of employment or the breakdown of an important relationship may stimulate crises in other areas of a young person's life. They also need to be flexible and sensitive. Young people may find it difficult to admit failure or to acknowledge the need for greater help. Contingency planning should therefore acknowledge the right of young people to try to live independently but also have arrangements in place that make it easy to return for subsequent support (First Key 1996; Department of Health 1997).

Planning will be of little use unless arrangements are in place to stay in touch with young people, monitor their progress and offer continuing after care support. Young people's requirements for support will need to be assessed and reassessed at regular intervals during their early years of independence. The continuing involvement of family, substitute carers, social workers and specialist schemes ought to enable problems to be picked up at an early stage and levels of support to be adjusted accordingly without threatening young people's sense of independence.

Where young people living independently are in acute difficulty, a range of accommodation options is likely to be necessary to enable them to return to a more sheltered supportive setting. There is some evidence that a simple return to a care placement were that feasible, especially a children's home, might not meet this need satisfactorily, since young people may have difficulty reconciling themselves to such a return (Biehal *et al.* 1995). However, where a young person has a positive relationship with a foster carer this arrangement may be quite successful, especially if the placement could be re-designated and funded as supported lodgings. More generally, supported lodgings or supported hostel places could meet this need provided there is sufficient availability to enable direct access to young people presenting as homeless. Provision of these kinds of options may present greater challenges to local authorities covering larger rural areas although recent research suggests that 'night stop' arrangements with families and supported lodging schemes may feasibly meet these needs (Stephens 1998).

There is also evidence that specialist leaving care schemes are effective in this area. Their brief to develop accommodation options, their expertise in working flexibly with young people living independently through the key worker system, groups and drop-ins mean that they are well placed to pick up risk signals and respond in a sensitive manner. Once familiar with the scheme, young people are also more likely to feel comfortable about returning for later help. Fewer barriers are presented than is the case with official duty systems (Biehal *et al.* 1995).

- Some local authorities have written into their leaving care policies and procedures a recognition that young people should be given opportunities to live independently but also the right to ask for more support whenever this is necessary.

- One specialist scheme, in response to the needs of care leavers and other homeless young people, has developed emergency direct access placements with families and an emergency on call service for existing clients in crisis.

- One rural authority, confronted with a lack of direct access accommodation for young people in difficulty, contributed funding into research to explore possible solutions.

Sources: Local Authority Best Practice Survey 1999; Department of Health 1997

5.8: Employment, education and training

Evidence concerning the poor educational progress, lack of qualifications and limited career opportunities for looked after young people during and after care is well established (Stein and Carey 1986; Jackson 1988/89; Aldgate *et al.* 1993. Jackson 1994; Garnett 1992; Stein 1994; Biehal *et al.* 1995; Broad 1998). The Quality Protects initiative from the current Government requires local authorities to raise standards of participation and performance in education, training and employment, and to establish clear targets against which improvements can be assessed (Department of Health 1998a and 1988b). Improved arrangements for the finance and support of young people participating in further and higher education is also likely to be required (Department of Health 1999).

As with most of the areas that have been discussed, improving the career chances of care leavers needs to build upon a solid foundation of

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educational progress whilst looked after. What works in achieving educational success for looked after young people is, however, under-researched. Evidence drawn from the above studies suggests that placement stability, especially in the later years of schooling, is likely to be important, together with positive encouragement to achieve by carers and social workers. Good pro-active placement/school links, a positive attitude from teachers and the provision of intensive compensatory inputs are likely to be necessary. Where young people are truanting, refusing to attend or excluded, positive links with the Education Service may help to reduce barriers and avoid delays in re-integrating young people back into education. In general, evidence also suggests a need for social workers and residential staff to give greater priority to young people's educational needs.

The adoption of the *Looking After Children* Assessment and Action Records has the potential to improve practice in this area – by directing social worker attention to the importance of education, by obliging them to obtain detailed information about performance, by working in partnership with carers and young people, and by clarifying responsibilities for decision making, accessing resources and day to day support (Stein 1997).

- PRAISE (Partnered Reading Activities Involving Social Services and Education) trained residential social workers and foster carers to use specific reading strategies with children in their care in order to promote reading both as an enjoyable activity and as an essential skill for successful learning. Although the evaluation of the project did not include pre- and post-reading tests, the qualitative assessment indicated that the use of home reading schemes was equally applicable in both residential and foster care settings and could produce benefits for the young people involved (cited in Stein 1997).

- Some local authorities have developed dedicated teams of teachers to work with looked after young people. They can offer direct support to young people in schools, untangle delays that impede educational placements, monitor progress and attend planning meetings and reviews.

- First Key have prepared detailed guidance and checklists for teachers, psychologists and education departments to increase their awareness of the educational needs of looked after young people (McParlin 1996).

Career planning ought to form a central part of the leaving care planning and review process (Biehal *et al.* 1995; Department of Health 1997; Broad 1998). It offers an opportunity to take stock, draw on the views of all relevant partners, enable young people to explore the options available to them, make choices and finalise arrangements for continuing financial, practical and emotional support. Where young people have experienced greater instability in their care careers and missed out on aspects of schooling, active compensatory inputs are likely to be necessary at this stage to help young people identify their strengths and weaknesses, prepare them for work and training and to assist them with opportunities for a return to study. Young people need to be given clear signpost information at this stage about their future entitlements to practical and financial support should they wish to return to education or training at a later date and about how they might access that help.

Continuing support and links with young people will be essential both to offer encouragement and motivation and to make available financial assistance to those wishing to enter education, training or employment some time after leaving. There is also some evidence that young people may have more success in launching their careers from the relative shelter of supported accommodation, suggesting that for many young people the pressures of coping with a multiple set of transitions may not be realistic (Biehal *et al.* 1995).

Despite considerable evidence of individual careers work with and on behalf of young people, the development of formal joint arrangements with provider agencies has until recently been given a relatively low priority by specialist leaving care services (Biehal *et al.* 1995). Recent inspection evidence points to the development of positive links with the Careers Service and of positive working relationships between SSDs and Education Departments, although these often centred on solving particular problems

rather than regular, planned meetings to discuss service developments. With the exception of disabled young people, few opportunities were apparent for work experience or monitored employment (Department of Health 1997). There is evidence that the development of formal links with education departments, colleges, training providers and employers are helpful in creating opportunities for young people (Smith 1994), although further evaluation is needed to identify more precisely those strategies which best contribute to positive outcomes for young people leaving care.

Smith (1994) highlights the positive contribution made to the Royal Philanthropic Society's leaving care projects by an employment worker who undertook both direct work with young people and a development/networking role. Her evaluation of this work concludes by suggesting the following practice steps when preparing young people to return to employment, education or training:

- gather detailed information about a young person's achievements and potential;

- carefully assess each young person's capabilities so far as employment is concerned;

- work with each young person in a creative way to increase their employability before taking on the demands of education, training and employment;

- ensure that employment initiatives are flexible;

- look at creative ways of opening up employment opportunities for young people;

- forge links with local community services;

- provide adequate emotional and financial support for young people who take part in education, training and employment.

- In some local authorities dedicated SSD/Education teams are assisting young people with college access and support and/or offering pre-college assessment packages linking young people's level of competency to GNVQ/NVQ programmes which allow accreditations for future courses and can form part of a record of achievement.

- A voluntary agency offering supported accommodation to care leavers is launching an education support service for residents. The service will focus on an individually tailored package of assessment and tuition in basic skills, computer literacy, homework support and interview preparation. It will also provide advice about accredited education and training provision and assist young people to link in with the main service providers.

- Recognition that care leavers often lack the confidence and skills to access mainstream pro-vocational training has led one authority to set up a multi-agency Initial Training project, funded by the local TEC. This programme will run initial training and a number of career link courses.

- Some specialist schemes have developed formal links with the Careers Service, including seconded staff to work specifically with care leavers. In these models careers staff may visit after care groups, offer individual counselling and support, make home visits and assist with the development of careers advice information packs. Another scheme is also piloting a mentoring scheme to help young people return to education, training or work.

- A few local authorities have taken a corporate approach to provide work experience and training placements within council departments for young people leaving care.

Source: Local Authority Best Practice Survey 1999

5.9: Arrangements for staying in touch

Staying in touch with young people who cease to be looked after is likely to present significant challenges to local authorities. We know that only a small minority of young people who are looked after beyond 16 years of age are able to return to live in the family home. We also know that care

leavers are likely to be mobile in the early years after care and that losing touch tends to be associated with lack of preparation and poorly planned, unstructured transitions (Biehal *et al.* 1995). However, the *Quality Protects* initiative requires local authorities to improve the numbers of young people with whom they are in touch at 19 (Department of Health 1998a and 1998b).

The possibility of staying in touch is also likely to depend on the degree to which young people have received a stable and positive experience whilst looked after and on the quality of their relationships with past and present carers, social workers and specialist workers. As with other sections in this report, preparation for maintaining contact needs to build upon the foundation of young people's whole care experience.

The leaving care planning process is the arena in which arrangements for continuing support and contact can best be developed. Positive planning, involving all of the potential supports that are available to young people, formal and informal, can identify the areas in which young people are most likely to need support and make clear arrangements as to who will meet those needs. Continuing links are likely to be enhanced where account is taken of young people's own perception of need and where they have choices about who they will receive support from (Biehal *et al.* 1995).

Arrangements for supporting and monitoring young people's progress ought to take account of the likely ambivalence of young people, their wish to try to survive on their own and their unwillingness at times to accept that they might need support (Department of Health 1997). Where young people resist help initially, arrangements should be in place to inform them of their future entitlements and to enable them to return at a later date for help without fearing the stigma of failure; a very real concern for many young people (Biehal *et al.* 1995).

Evaluation of different practice initiatives which work well suggests support should be based on the following principles (Frost and Stein 1995):

- support should be planned and negotiated with young people;

- support should be pro-active not just responding to a crisis;

- support should be flexible given the variety of needs of young people;

- support should address the practical, financial and emotional needs of young people.

Support of this kind can be delivered in a variety of ways – by individual carers or social workers, perhaps working in combination with families and/or specialist leaving care workers. Planned, flexible and negotiated support is likely to increase young people's engagement with the services on offer and the likelihood of them staying in touch with service providers, even if their involvement is periodic. Such an approach is also likely to help service providers track and monitor the myriad changes that are likely to take place in young people's lives in the early years after leaving care and adjust the levels of support offered accordingly.

Evaluations of specialist leaving care schemes by young people suggest that they can be successful in organising continuing support based on these principles (Stein 1990; Stone 1990; Biehal *et al.* 1995; Department of Health 1997; Smith (ed.) 1998). Scheme services tend to mix social and support activities, thereby helping to enhance young people's engagement with the project and other young people. Most also have an explicit commitment to provide support for as long as young people require it, although planned key worker support may be loaded towards those making transitions from care (Biehal *et al.* 1995). They tend to work in a flexible and responsive way to young people through individual and group-based support, drop-ins and/or duty systems, and tend to address young people's needs in a holistic way. Most schemes, working from a user-friendly project base, also tend to have an identifiable presence that makes it easier for young people to return for help at a later date.

Although staying in touch with all young people is never likely to be easy – young people are mobile and some may choose to disappear – the following pointers may be helpful.

- There is no substitute for a well-planned transition and clear support arrangements with which the young person is happy.

- At the point of leaving care young people should be fully aware of their future entitlement to support and who will provide it, even if they reject support at the time.

- Young people will need a clear link person responsible for co-ordinating support and resources for them. Young people ought to have a say in who this person is, given the importance of a positive relationship. The hurdles involved in negotiating SSD duty systems are likely to be off-putting to young people and therefore an insufficient arrangement.

■ Specialist schemes, working in partnership with other sources of support, tend to have a presence, a style of work and a social base that encourages young people's involvement and may be helpful to those returning for help at a later date.

■ Given the mobility of staff as well as young people, the recording and monitoring of contacts may help links to be retained, where young people approve of this.

■ Other strategies that may help to promote links might include: regular newsletters, especially where young people are involved in producing the; self-return change of address cards; birthday/Xmas cards; or fairly regular consultative feedback initiatives.

■ Most specialist schemes, in addition to individual work with young people, provide a range of social and/or support groups. These include preparation for looked after young people, life skills for care leavers, parent/toddler groups, groups that meet in supported accommodation, health and lifestyle, issues for young black people, education and careers, job clubs.

One scheme describes its support and befriending role as follows:

■ aiding young people to access help from agencies;

■ identifying supportive individuals from family, friends, agency workers;

■ group work to share feelings associated with being in care, the process of leaving, maintaining contact and relationships after care;

■ allocation of team workers for individual support, especially if no other support is involved;

■ some authorities and specialist schemes produce regular quarterly newsletters which are sent to all care leavers as one means of keeping in touch;

> - some specialist schemes, in partnership with voluntary agencies, are piloting mentoring schemes in which supported and trained volunteers offer additional help to care leavers who want to participate.
>
> Evidence from a review of the USA literature on the use of mentoring schemes suggests that, where they are complementary to professional support services and do not attempt to stand alone, they can fill a significant need of young people for caring and consistent relationships with adults (Greim, 1995).
>
> *Source: Local Authority Best Practice Survey 1999*

5.10: Meeting needs for safe, affordable and supported accommodation

Young people leaving care are a diverse group whose accommodation needs will vary according to their care experience, ethnicity, gender, sexuality, contact with their families, degree of preparedness for leaving and any disability they may have. It follows that their accommodation needs will be equally diverse. The provision of an appropriate range of accommodation options will also present different challenges to local authorities depending on their size and the nature of the geographical area to be covered. For example, social services departments in large shire counties may need to think about accommodation options in more sparsely populated rural areas and may need to negotiate with several district councils over housing. The development of resources will require formal agreements with statutory and voluntary housing providers to plan services, ensure access to a range of tenancies and partnerships or joint ventures to establish a range of supported accommodation options. Individual planning and preparation with young people will also need to take place over time at the leaving care planning stage.

Personal planning for accommodation
Evidence suggests that when planning accommodation for young people leaving care the following areas will assist positive outcomes (Hutson 1995, 1997):

- assessing needs and preparing young people;

- offering a choice in the type and location of accommodation;

- not moving young people in an unplanned way, before they are ready;

- having a contingency plan in case the proposed accommodation breaks down;

- setting up a package of support to go with the accommodation;

- having a clear financial plan for the accommodation;

- providing information relevant to the type of accommodation.

Accommodation options

There is considerable evidence that specialist leaving care services have been successful in developing a range of accommodation for young people leaving care and flexible support packages to assist them in their homes (Stein 1990; Stone 1990: Biehal *et al.* 1995; Broad 1998). Examples from practice which worked well include the following kinds of options:

Supported Lodgings: Although supported lodgings schemes for care leavers have expanded in recent years, sometimes with a specialist worker attached to leaving care schemes to promote their development, inspection evidence suggests it to be an area where the shortage of places is acutely felt (Department of Health 1997). The ingredients for successful supported lodgings include the following (Hutson 1995):

- clarity about purpose and target groups – supported lodgings can be used for emergency, short stay or longer stay and may suit young people with different support needs;

- staff time and expertise, usually achieved by being directly managed by a leaving care team;

- a thorough approval system – for example, by specialist workers undertaking an assessment of all applicants including a home visit, references, police checks and a health declaration, and preparing a report for an appropriate panel;

- ongoing training and support for providers;

- clear funding arrangements – which may include some combination of housing benefit, social services finance and/or income support;

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- planning move on accommodation from supported lodgings;

- and reviewing and monitoring outcomes (Hutson 1995).

Staying On: As the research outlined earlier has shown, very few young people remain in care placements beyond 18 and a majority leave at just 16 and 17 years of age. The importance of stability and continuity to positive outcomes has been demonstrated by research yet very few authorities enable young people to remain in placements, even when they are settled and wish to stay. One way in which this has been successfully achieved is by allowing young people to remain with foster carers when settled through re-designating placements as supported lodgings. Simple but very effective (Fry 1992).

Schemes Offering Accommodation and Support: Both the voluntary and statutory sectors have pioneered the provision of accommodation and support for care leavers. This has included projects managed directly by leaving care schemes in partnership with housing associations, local councils and voluntary agencies (Stein 1990; Biehal *et al.* 1995; Broad 1998). Initiatives that have been evaluated as providing positive outcomes for young people include the following:

- Trainer flats: Shared flats usually managed directly by specialist leaving care schemes and offering intensive remedial support to young people lacking the confidence and skills for independent living. Move-on accommodation is planned and after care support usually provided.

- Supported hostels: These usually provide a one-to two-year stay for young people and have support on site, often on a 24 hour basis. Often managed by housing associations or voluntary agencies in partnership with social services; the latter providing funding for staff and/or a quota of places. Hostels may provide for a broad range of vulnerable young people, including care leavers, or specific groups such as those with learning or physical disabilities. Again, move-on accommodation is usually arranged and after care support may be provided.

- Floating support schemes: For young people better prepared for independence but still wanting a supported environment, 'floating support' initiatives can have advantages. Flats provided by the council and/or housing associations are issued under licence and peripatetic support offered for as long as

young people require it. Once young people are able to manage, the support can be reduced and a standard tenancy agreement offered. Smith (1994) outlines some of the advantages of this type of provision. It can avoid problems of behaviour 'contamination' and built-in movement for young people. There is neither a requirement to share nor move-on blockages as tenancies are permanent. Support can be needs-led and flexible and, for the housing provider, it should mean that tenants are only handed back when ready for independence.

Independent Tenancies: Accommodation of this type includes council, housing association and private tenancies. It is often the most desired or aspired to by young people, seen as offering the advantages of privacy, self-esteem and a feeling of independence, of having arrived. Successful examples point to three key factors (Stein 1997):

- the need to develop positive links and agreements with housing providers including priority access and nomination rights – this often involves considerable and sustained negotiation;

- the importance of preparation and assessment to determine whether the young person is ready and able to cope financially, practically, socially and emotionally;

- arrangements to support the young person living in their own tenancy.

Foyers: The foyer initiative in the UK, based on the system of 'Foyer des Jeunes Travailleurs' in France, is a response to the dual problem of homelessness and unemployment among young people. Anderson and Quilgars, (1995) evaluation of the foyer pilot initiative identified a foyer as being characterised by:

- the provision of accommodation for young people (usually in a hostel);

- a management ethos which is pro-active in encouraging the development of young people;

- the use of personal action plans and individual activity programmes to help young people identify and attain personal, career and housing objectives;

■   the provision of practical support services to help young people work through their action plans.

Their research showed that pilot foyers provide many young people, who had experience of both long-term unemployment and rooflessness, with a range of opportunities to improve their chances of gaining employment and finding more permanent housing – although it was not an initiative which created any additional jobs or permanent housing. It is still too early to assess their suitability for care leavers. However, it has been suggested, on the evidence from France, that because of the low levels of staffing, they are not designed for young people with special needs, vulnerable care leavers or homeless people who have multiple problems, (Hutson and Liddiard, 1994; Hutson 1995).

Contingency planning
Leaving care planning will require consideration to be given to contingency arrangements at two levels. First, as has already been suggested, plans need to be in place to assist young people in the event of crisis. Depending on the scale of difficulty, the option for young people to return to a more supported form of accommodation ought to be available to limit the risk of subsequent homelessness. Second, at a departmental level, agreements should be in place between social services and the relevant housing authorities to reconcile 'in need' as defined in the Children Act with the 'vulnerability' criteria laid out in housing legislation. Such an agreement would not just serve care leavers, should they present as homeless in the future, but also other vulnerable 16 and 17 year olds lacking stable accommodation for whom the local authority has responsibility. These agreements ought also to cover joint assessments of housing need by social services and housing at the leaving care planning stage, as recommended in the Code of Guidance accompanying the Housing Act 1996 (Brody 1996).

- Some local authorities have established protocols between social services and housing for assessing young people's housing need when leaving care and when homeless. Many also have agreements in place to 'fast track' secure tenancies for care leavers.

- Although resources vary considerably, many local authorities have some partnership arrangements with the council, housing associations, voluntary agencies and local foyers to provide a range of supported options.

- One local authority has contributed funds into researching appropriate models of accommodation to tackle youth homelessness in rural areas.

- One authority has a cross-department officer group to co-ordinate housing developments for care leavers. The group works in partnership with a range of housing providers and voluntary agencies with the aim of offering an integrated service.

- Some authorities have established multi-agency housing forums for young people. Partners may include social services, the housing authority, housing associations, the youth service, probation and voluntary advice agencies. Services for care leavers may be integrated with those of other vulnerable groups of young people seeking stable accommodation.

Source: Local Authority Best Practice Survey 1999

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