THE UNIVERSITY *of York*

Social Work Research & Development Unit

Still A Bairn?

Throughcare & Aftercare Services In Scotland

Final Report To The Scottish Executive

Jo Dixon & Mike Stein

Still A Bairn?

"I'm only 16 and still a bairn and get a bit weepy at times."

(Heather, County)

Acknowledgements

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Throughcare & Aftercare Services In Scotland

1. Introduction

The University of York was commissioned by the Scottish Executive to undertake a two-year study of the way local authorities are discharging their duties and powers under the Children (Scotland) Act 1995 to promote throughcare and aftercare for looked after young people.

This final report is based on the findings of data from the national postal survey of thirty-one Scottish local authorities and other agencies involved in the provision of throughcare and aftercare. It also draws upon information gathered from young people and their support workers at two points in time to provide an insight into what it means to move on from care in Scotland and what works in promoting positive outcomes. We have also utilised information gathered from policy interviews carried out with senior managers and project leaders and representatives of organisations involved in the provision of throughcare and aftercare services.

Background To The Research

Over the past two decades accumulated research has highlighted the range of problems faced by young people leaving care and has made connections between these and the difficulties experienced by them prior to and during the time they have been looked after. Although many young people have valued time spent in public care, for others it has tended to create further problems. Disruption through placement movement and the erosion of family links have been a frequent occurrence (Millham et al., 1986; Berridge and Cleaver, 1987). Young people have tended to miss out educationally (Jackson 1988/9; Aldgate et al., 1993) and their basic health care needs have not been consistently met (Butler and Payne, 1997). Preparation for adulthood has tended to be variable, often poorly structured and with a focus on practical rather than psycho-social skills (Stein and Carey, 1986; Who Cares? Trust, 1993; Biehal et al., 1995).

In addition to this, young people's transitions from care tend to be accelerated when compared to the general population of young people. A majority will move to independent living before 18 years of age (Stein and Carey, 1986; Biehal et al., 1992; Garnett, 1992) and recent evidence points to a worrying trend for young people to be discharged at an earlier age. These patterns compare with a modal age of leaving home of 22 for males and 20 for females (Jones, 1987). Leaving care also tends to be final, the option to return in times of trouble are rare (Biehal et al., 1995).

Not only do young people leave care early, but also the main elements of the transition to adulthood tend to be compressed. Learning to manage a home, finding a foothold in education or employment and starting a family tend to overlap in the period after leaving care. The trend towards early parenthood and family formation is well documented (Garnett, 1992; Biehal et al., 1995; Corlyon and McGuire, 1997). In relation to education and employment, care leavers are particularly disadvantaged. Only a minority gain

any qualifications at school, around one half are likely to be unemployed and around two thirds are unlikely to establish a stable pattern of education, training or employment in the early years after care (Broad, 1994; Biehal et al., 1995; Broad, 1998). Evidence also suggests that the legacy of care is likely to be long lasting (Cheung and Heath, 1994). In consequence, the majority remain financially dependent (Broad, 1998).

Young people are unlikely to manage in adversity without a network of formal and informal support. However, research evidence suggests that many are unable to rely on consistent support from their families (Biehal and Wade, 1996) and that formal sources of support have a tendency to fall away in the period after legal discharge. Although around one third of foster carers appear to provide continuing support to young people who have moved on (Fry, 1992; Wade, 1997), the tendency for planned support from residential workers and social workers to decline has been highlighted in the literature (Biehal et al., 1992; Garnett, 1992). In this context, it is perhaps not surprising that young people with a background in care, although not necessarily care leavers, have been over-represented in samples of the young homeless (Randall, 1989; Young Homelessness Group, 1991; Strathdee and Johnson, 1994) and of the prison population (Prison Reform Trust, 1991).

Scottish Research

There is very little published empirical research on the throughcare and aftercare experiences of young people in Scotland (Bilson et al 2000).

In the early 1980's, Morgan-Klein documented the views of 55 young people leaving residential care, following up 30, in the former Strathclyde, Lothian and Central regions. Overall, this study presents a depressing picture of poor planning, preparation and aftercare support. At the time of leaving care most of the young people lacked confidence and self-esteem. They had few qualifications, experienced high levels of unemployment, lived in poor housing and most had to survive on benefits. Recommendations were made for improving the quality of care, involving young people more, better preparation, more interagency working and ongoing aftercare support (Morgan-Klein 1985).

Emond interviewed 34 young people, including a group about to leave residential care and a group who had left the residential care of a Scottish local authority between 1984 and 1994. Eighteen of these young people participated in a second interview. The research found that there was very limited time for preparation and after leaving care personal support was likely to drop off. Also, young people were unable to go back into care, and they were likely to be unemployed and living in poor accommodation. The main messages of the research were, first, to challenge the negative view of care so that young people do not see leaving care as being 'released', and, second, the need to prepare young people more gradually and realistically for life after care (Emond, 2000).

Fry's survey of the contribution of foster care to leaving care carried out in the early 1990's included 36 Scottish foster families. The research highlighted the significant contribution made by foster carers to

supporting young people after leaving care - although this was often informal and unrecognised by social work departments (Fry, 1992).

Analysis of data from the UK wide National Child Development Study (including a Scottish sample), comparing 12,128 young people who had never been in care with 372 who had experienced care, revealed that the latter group were far more likely to have no qualifications, be unemployed or be in unskilled work compared to the non care group (Cheung and Heath, 1994).

Triseliotis et al's study highlighted the need for improved throughcare and aftercare services (Triseliotis et al, 1995). This study, based on interviews with social workers, young people and their parents in two Scottish and three English local authorities, concluded that social workers overestimated the amount of preparation given to young people leaving care and that although many young people set out with high expectations they were soon disillusioned by mounting debts, unsuitable housing, lack of support, loneliness and the uncertainties of the benefits system. The research identified the difficulties these young people experienced in dealing with the agencies which might be able to help them with money, work, education or housing. It also pointed to the inconsistency and lack of continuity of support offered by social work teams and former carers - several young people felt that the system wanted to get rid of them before they were ready, especially in Scotland. The research concluded that care leavers were the most vulnerable, unhappy and dissatisfied group of young people from amongst the whole sample.

The Scottish Context

Since the fieldwork of the Triseliotis study was completed in 1993 there have been major developments in childcare law, policy and practice in Scotland, which have implications for care leavers. The most significant of these has been the introduction of The Children (Scotland) Act 1995, which fully came into force on 1st April 1997. The origins of the Act and the accompanying Regulations and Guidance stem from a wide range of influences including the Review of Child Care Law (1988), the Clyde Report (1991), the Skinner Report - A Review of Residential Child Care (1992), the Scottish Law Commission's Report on Family Law (1992) and the White Paper, Scotland's Children: Proposals for Child Care Policy and Law (1993). The Act, which both consolidates and develops the previous range of Scottish childcare law, is founded on principles derived from the UN Convention on the Rights of the Child, thus progressing young people's rights to welfare, protection and being heard. The publication of the Kent Report - Children's Safeguard Review (1997) is also part of the context within which the Act was implemented.

Contained within The Children (Scotland) Act 1995 and the accompanying Regulations and Guidance is a clear message that throughcare and aftercare are significant components of the local authority's corporate parenting role.

As regards throughcare, Section 17 of the Act includes providing advice and assistance with a view to preparing the child for when he or she is no longer looked after. Also, under Section 25(3) of the Act, the

local authority may provide accommodation for any person within their area who is at least eighteen years of age but not yet twenty-one if they consider that to do so would safeguard or promote his or her welfare.

In respect of aftercare, Section 29(1) of the Act extends the duty of the local authority to provide advice, guidance and assistance to young people who have left care up to the age of nineteen, and for some young people up to the age of twenty one.

The Act also stresses the importance of the corporate responsibilities of local authorities as well as working with other agencies - both are crucial to providing effective arrangements for care leavers.

Our research has been carried out against the background of major new policy developments and funding initiatives that have, or will, impact upon the provision of services for young people leaving care.

The **Children's Services Development Fund** has contributed to funding services for care leavers in a number of local authorities and the **Changing Children's Services Fund** will, from 2001-2, provide ring-fenced money for addressing drugs problems among young people.

The issue of most immediate concern to local authorities is the proposed **DSS Transfer**, when they will become responsible in providing financial support to eligible 16 and 17 year olds. However, it is also evident that the other main provisions of the English **Children (Leaving Care) Act 2000** and accompanying Guidance and Regulations are being widely discussed.

In this context **Section 55 of the Regulation of Care (Scotland) Act 2001** amends section 29 of Children (Scotland) Act 1995 introducing new duties to **carry out an assessment of need; establish a procedure for considering representation (including complaints); and change the definition of eligibility to include those previously looked after in England and Wales.**

As regards housing, the implementation of **Supporting People** is currently in its transitional phase. Its full introduction from 2003 will radically change the framework for the delivery of housing with support.

The implementation of the **Beattie Report's proposals** has provided funding opportunities to assist young people leaving care with further education, employment and training. And, linked to this, the urgent need to improve the education of children looked after away from home has been given priority by the joint HM Inspector of Schools and the Social Work Services Inspectorate report **Learning with Care** published in March 2001.

The ongoing **Youth Crime Review** may also have implications for the care leaving population, especially if more effective early intervention strategies are developed.

Finally, this range of initiatives can be located in the wider **Social Justice** context of **Promoting Social Inclusion among Children and Young People.**

Aims Of The Research

How are local authorities meeting their responsibilities under the Children (Scotland) Act 1995 and how effective are their arrangements? The current study will endeavour to answer these questions by providing a national description of throughcare and aftercare arrangements across Scotland and by studying in-depth in three authorities the experiences of young people moving on from care and the support they receive.

The study will investigate the way local authorities are discharging their duties and powers under the Act to promote throughcare and aftercare for looked after young people. It will reflect upon the effectiveness of these arrangements in preparing young people for and supporting them through the transition from care to community.

The research aims to:

- Describe existing throughcare and aftercare arrangements across all local authorities

- Examine the extent to which the principles and guidance enshrined in the Act are reflected in current local authority practice

- Explore throughcare and aftercare policy and practice in three local authorities

- Assess outcomes for young people moving on from care, based on the experiences of young people and the perceptions of their workers.

2. Research design and methodology

The study comprises two stages. The first stage involved a national postal survey of Scottish local authorities and other service providers. From this information we have been able to put together a picture of throughcare and aftercare services in Scotland and explore the different arrangements employed by distinctive models of service delivery.

The second stage involved three local authorities, selected to be representative of the main service models as identified by the postal survey. The aim of this stage was to reflect upon the arrangements of the different approaches to providing throughcare and aftercare services. This was based upon information gathered at two points in time by a questionnaire or interview administered to young people and a questionnaire for their support workers. Telephone interviews were also carried out with key informants drawn from senior management at Time 2 to reflect upon and update policy developments in the three research areas.

The findings contained within this report are based on stage one and stage two of the study. A detailed description of the methodology together with a discussion of the research procedures, limitations, difficulties encountered and ethical protocol is contained within the appendix.

<u>Stage 1 – National Policy Survey</u>

Data Collection & Response Rates

Policy Questionnaire

The policy questionnaire was distributed to all Social Work Departments on 17th March 2000 with a return deadline set for 17th April 2000. Eight authorities (25%) returned their questionnaire by the first deadline. Questionnaires continued to be returned during May and June in response to a further three rounds of reminder letters and telephone calls, until we reached a final response rate of 97% (31) with only one questionnaire outstanding.

Supplementary Questionnaires

The Children (Scotland) Act 1995 places responsibility on local authorities to provide throughcare and aftercare services for looked after young people and care leavers. The Act envisages that these services will be provided by the Social Work Department in collaboration with other statutory and voluntary agencies. It was therefore important that we obtained information from the perspective of other agencies

that may be involved along side the Social Work Department in providing services to young people who are preparing to leave or have left care.

Three short questionnaires focusing on the working arrangements between the Social Work Department and other agencies were designed for a range of statutory service providers, voluntary agencies and leaving care projects.

Access to statutory agencies was sought by the Scottish Executive on behalf of the research team. This included local authority Housing and Education Departments, DSS Benefits Agencies, Employment Services and the Scottish Children's Reporters Administration. Access was not agreed for DSS Benefits. Response rates for these other services are detailed in Table 1. below.

Table 1.   Response rates:

Agency	Questionnaires sent	Questionnaires returned	%
Children's Reporters	36	21	58%
Housing Dept.	31	18	58%
Education Dept	31	14	45%
Careers Companies	32	21	66%
Employment Services	13	9	69%
'Other' Agencies & Leaving Care projects*	35	16	46%
Total	178	99	56%

*Seventeen short questionnaires were sent out to other agencies such as Health Boards, Primary Care Trusts and other housing providers and a further eighteen abbreviated questionnaires were sent to a range of specialist and voluntary projects offering support to young people.

Stage 2 – Local Authority Study

Research Areas

From the results of the policy survey three areas were identified for participation in stage two of the research. These were selected on the basis of being representative of both the main models of service delivery and the geographical diversity of Scotland. The policy survey had suggested that the number of care leavers in each area was sufficient to sustain the research. Only one local authority area declined to participate. A comparable authority was approached and agreed to take part.

The second stage of the study began in July 2000 and involved contacting up to one hundred and fifty young people from across the three local authorities at two points in time. Time 1 (T1) questionnaires were administered to young people soon after they moved to independent living or ceased to be looked after. Time 2 (T2) interviews or questionnaires were administered six months after the first questionnaire. At T1 and T2, questionnaires for gathering corresponding information from a professional perspective were sent to the social worker or specialist leaving care worker who had responsibility for the young person.

Research Instruments

Development of the T1 questionnaires began in July 2000. Issues covered included a brief account of the young person's care experience, any throughcare support received, their current circumstances, contact with a social worker or leaving care worker and their hopes for the future. Supporting documentation and information leaflets for young people and their workers were also developed.

Structured interview schedules for young people at T2 were constructed to gather detailed qualitative information about their present circumstances and any help or support they had received during the intervening months between T1 and T2 (follow up study). A combined version of the T1 & T2 instruments was also developed for an additional group of young people who had entered the study late (as detailed below). In addition, postal questionnaire versions of the young person's interviews were constructed for those young people who were unwilling or unable to take part in an interview.

Eligibility, Recruitment & Participation Rates

Eligibility

Young people were assessed as eligible to take part in the study according to the following criteria:
- Between 15½ and 19 years of age;
- Legally discharged from care or moved to independent living between June 2000 and January 2001.

This included:
- Young people whose home supervision requirement had been discharged (whether they remained at home or not);
- Young people who had legally left care (whether they returned home, moved to independent living or remained with foster carers);
- Looked after / previously looked after young people who had moved to independent living.

Because of low participation rates at T1 (n=79), the eligibility criteria was extended to include young people who had left care or moved to independence outside of the original eligibility and recruitment timeframe. Young people recruited against the new criteria fell into two groups:

- Retrospective (R) Sample - those young people recruited retrospectively, who had left care or moved to independence since January 2000;
- New (N) Sample - those young people who left care or moved to independence up to June 2001.

Participation Rates - Young People

Two-hundred-and-twelve young people were contacted either by introductory letter or via their main support worker (social worker or specialist leaving care worker), half (51%) of these agreed to take part in the study. Young people who took part in the study received a small financial recompense for sparing time to help us. Table 2. provides a breakdown of the total sample:

Table 2.   Participation by authority and sample type

Sample type	County (n)	City (n)	Shire (n)	Total (n)
T1	16	47	16	79
R	9	11	4	24
N	2	0	2	4
Total Survey Sample	27	58	22	107
T2 (Follow up Study)	11	36	14	61

Contacting T2 Participants

All but 4 (5%) of the 79 young people who had completed a T1 questionnaire were traced at T2.   Each was sent a letter to let them know that an interviewer would be contacting them shortly to arrange a time for a T2 interview. Only 13 (16%) refused to either participate in an interview or complete a postal questionnaire. Despite a number of no-shows and postponed interviews we managed to achieve 43 interviews in just under four months. Together with 18 postal questionnaires, our participation rate at T2 was 77%.

Response Rates - Workers

Postal questionnaires were sent to workers who held or had held responsibility for each young person who participated in the study.

Most workers received reminder letters and telephone contact to follow up on non-responses. Although we eventually reached a 77% response rate for T1 workers questionnaires, most were received several months out of date (i.e. they no longer corresponded to the T1 information provided by the young person). For example, on average, workers took 6 weeks to complete the document. However, over a third (39%) took 2 months and over a tenth (14%) took 5 or 6 months. In some cases the return of T1 workers' questionnaires was delayed beyond the time that the young person had completed their T2 interview. To enable us to collect essential information for both points in time a single combined version of the T1 and T2 workers questionnaires was developed to gather limited background details and information on their present situation. In some cases where workers had failed to return a questionnaire, telephone interviews were negotiated as a final attempt to gather some information. Eight of these took place.

At T2, twenty young people reported having had no contact with a social worker or specialist leaving care worker during the follow up period. Questionnaires were designed to gather information on progress throughout the follow up study and were therefore only sent to those workers who had current or recent knowledge of the young person's situation (n=41). Our response rate for T2 workers' questionnaires is 58.5%, however, this only represents 39% of the total follow up sample.

<u>Analysis</u>

Given the nature and limitations of the data non-parametric statistical tests were utilised. This includes:

- Categorical by categorical (2 x 2): Fisher's exact test
- Categorical by categorical (larger than 2 x 2): Chi-square test
- Ordinal by categorical (2 categories): Mann-Whitney test
- Ordinal by categorical (more than 2 categories): Kruskal-Wallis test
- Ordinal by ordinal: Kendall's tau-b correlation

In general, a test result of $p = 0.05$ was considered statistically significant (i.e. a level of 95% confidence). To adjust for the small sample size, SPSS Exact Tests module (Monte-Carlo method) was used for all tests.

Reliability and factor analyses were used in the analysis and rating of attitudinal scales.

Qualitative data was explored using Access 2000, to identify common themes. Factual and descriptive information gathered during the course of interviews and questionnaires was analysed to gain an overall account of the processes and experiences of leaving care from the perspective of young people and their workers. This enabled us to reflect upon a number of key issues, including what young people found helpful and what makes a difference in terms of progressing positive outcomes.

Findings contained within this report are based on:

Stage 1

Social Work Department Questionnaire	97% of those contacted (n= 31)
Supplementary Questionnaire	56% of those contacted (n= 99)

Stage 2

Survey:

Young persons data	51% of those contacted (n= 107)
Workers data	77% of those contacted (n= 61)

Follow up study:

Young persons data	77% of those contacted (n= 61)
Workers data	58.5% of those contacted (n= 24)

3. Findings from national policy survey

This section of the report contains the results of Stage one - the national policy survey - and is based on analysis of the following issues:

3.1. Policy and procedures framework

Children's Services Plan

1. Section 19 of The Children (Scotland) Act 1995 requires local authorities, in consultation with other relevant service providers, to prepare, publish and review plans for the provision of services for children and young people. The Act also introduces important new duties and powers for local authorities to provide throughcare and aftercare services for looked after young people and care leavers. The Children's Services Plans present an opportunity to provide a strategic focus for outlining services, objectives and priorities for developing throughcare and aftercare provision. However, we found that overall, throughcare and aftercare were afforded relatively limited coverage in the first round of plans.

2. Of the thirty-one authorities that responded to the questionnaire, **90% (28) reported having made 'explicit reference' to throughcare and aftercare arrangements in their Children's Services Plan.** 29% (8) of these did not enclose a copy of the document. Only 10% (3) acknowledged that throughcare and aftercare provision had **not** been specifically referred to in the plans.

3. A more detailed consideration of the twenty documents supplied, indicated that in half (10) of the cases, reference to throughcare and aftercare was in fact implicit and often embedded within service provision for the looked after and accommodated population as a whole or in some cases, mainstream services for all children and young people. A more realistic estimate would be that around ten of the authorities that supplied documents made explicit reference to throughcare and aftercare arrangements.

4. We also found that the terms tended to be synonymous with each other, rather than distinct. For example, the term throughcare was used to refer to both throughcare and aftercare provision and vice versa. We also found that interpretations of what each service involved varied across authorities. There seemed to be a greater emphasis on aftercare provision (although the term throughcare may have been used) and within this, an over emphasis on accommodation issues. Practical living skills, health, identity, finance, education and training received only a modest mention, and were dealt with mainly within the context of developing links with the relevant agencies.

5. Just under half (45%) (9) of the supplied documents referred to the eligibility criteria for receiving throughcare and aftercare services.

6. Overall, we found that there was little or no detailed information on 'current arrangements' for throughcare and aftercare. The plans exist as fairly broad strategic documents setting down proposals for service development.

7. A small number of authorities however, did provide a comprehensive outline of aims, objectives and timescales for implementing and developing throughcare and aftercare services. For example, one of these authorities had included a clear definition of throughcare and aftercare, placing them within the legislative framework and local policy and demographic context. An outline of the policy objectives, action required and performance indicators had been set against a wide range of proposals for the development of their throughcare and aftercare provision.

Policies And Procedures – Throughcare & Aftercare

Written Policy Statements

8. **74% (23) of authorities reported having a written policy statement for throughcare and aftercare services**. Just over a quarter of these authorities (6) did *not* supply a copy of the document, two of which were in the process of development or revision. A further four of these authorities were in fact still in the process of developing policy documents, and were able to supply us with *provisional material* relevant to their throughcare and aftercare policies.

9. Of the thirteen authorities that supplied *current* copies, only 15% (2) had discrete policy statements. 31% (4) referred us to brief policy descriptions couched within operational guides and Children's Services Plans. Just over half (54%) (7) had joint policy & procedure documents one of which was a mission statement.

10. Eight authorities (26%) reported that they did not have a written policy statement. The main reasons pointed towards time and staffing constraints and the consequences of recent local authority restructuring.

11. Authorities have clearly applied the core principles of the Children (Scotland) Act 1995 to their policies. Documents illustrated in theory, a commitment to multi-agency collaboration; implementing a needs led approach by responding to the diverse and special needs of the target population; and involving and informing young people in respect of their own care planning and the planning and review of the service in general. Several authorities operated a return to care and open door policy in recognition of the tendency of the population to drift in and out of services.

12. The overall impression however, is that policy statements are general in scope, outlining the main principles of their approach without detailing the specifics of throughcare and aftercare provision and implementation. This has left many open to interpretation. Only a minority of authorities have actually

outlined the means of translating their policies in to practice. For example, to outline their policy for involving young people, one authority wrote:

> *'The department will continue to develop processes which directly involve the views of young people who are users of this service. These processes will include individual care planning or child in care complaints procedures, and the encouragement of forums for young people to collectively discuss issues affecting them. The Department will produce and regularly update an easily understood guide …. available and easily accessible by young people.'* (Policy Statement - Throughcare and Aftercare.)

13. In the course of examining the services provided, we found that in a number of authorities, policy has not always been observed in practice. Discrepancies tended to be more noticeable in respect of the eligibility criteria for receiving services. For example, although some authorities included young people looked after at home in their written eligibility criteria, in practice these young people were not offered throughcare/aftercare services.

Written Procedures

14. **74% (23) of authorities that returned questionnaires said that they had written procedures for throughcare and aftercare**. However, 9% (2) were unable to supply copies as they were in the process of development and 22% (5) did not enclose current copies.

15. Just over a quarter (26%) (8) of authorities said they did not have written procedures and highlighted limited time and resources as obstacles to devising or finalising such documents.

16. Of the sixteen documents enclosed most included procedures for referral to the throughcare team and the timing of reviews. However, there was very little reference to procedures for other areas such as staff responsibilities and training; liaison between departments and agencies (other than housing); and the monitoring of services and service users. The majority (81%) (13) tended to focus predominantly on procedures for applications and assessments for financial assistance and accommodation.

Lead Officer

17. It is suggested in the Children (Scotland) Act 1995 Regulations and Guidance, Vol. 2, that 'Responsibility for throughcare and aftercare services needs to be a senior level and one way of achieving effective management direction is to designate a senior officer in social work to be responsible for the development and maintenance of throughcare and aftercare services.' (Chapter 7. Paragraph 23.).

18. **77% (24) of authorities reported having a designated lead officer for throughcare and aftercare services.** Lead officers ranged from heads of social work services and service managers for children and families to specific throughcare officers.

19. Of the 23% (7) who did not have a lead officer, one commented that they were in the process of appointing one and one said that this was because they were a small rural authority.

Availability Of Written Guidance

Staff Guides

20. **71% (22) of responding authorities reported having written policy and practice guidance for staff with responsibility for throughcare and aftercare.** However, 11% (2) of these guides were in fact still in the process of being developed.

21. The remaining 29% (9) who said they had not yet developed written staff guidance, were either in the process of doing so or were about to appoint a new member of staff whose task it would be to develop one.

22. Staff guides varied across authorities. Some referred us to their policy and procedure documents whilst a small number supplied staff booklets and leaflets which give an outline of throughcare and aftercare policies, eligibility criteria, range of provision and referral procedures.

23. The extent to which written guidance is made available to relevant individuals is illustrated in the following table.

Table 3. Availability of written guidance. (n=31)

GUIDES MADE AVAILABLE TO:	NUMBER OF AUTHORITIES YES	NUMBER OF AUTHORITIES NO
Social worker	22 (71%)	9 (29%)
Foster carer	10 (32%)	21 (68%)
Residential social worker	20 (65%)	11 (35%)
Young person	12 (39%)	19 (61%)
Parents	3 (10%)	28 (90%)
Other	3 (10%)	28 (90%)

24. 71% (22) of authorities reported making written guidance on throughcare and aftercare available to social workers. However, there was less information available to other relevant individuals, such as parents and foster carers. This may possibly reflect the tendency of some authorities to focus their throughcare and aftercare services on young people who are or have been looked after and accommodated in residential settings rather than in the community.

Information Guides For Young People

25. **45% (14) of authorities had information guides on throughcare and aftercare service, for young people**. The majority of these consisted of a range of leaflets on various training and accommodation initiatives and booklets outlining the aims of throughcare/aftercare and the range of services available. The NFCA leaving care pack 'Stepping Out' was also used as a means of providing practical

information on a range of issues from finance, maintaining a home and employment related issues. Some authorities had developed their own information pack for young people which followed a similar format.

26. Most of the authorities who did not have information guides for young people did however, recognise it as a key task. Seven authorities said that they were currently developing guides and one reported that recent and imminent restructuring within the authority had delayed the publication of such a document.

3.2. Corporate and inter-agency framework

1. Under section 21 of the Children (Scotland) Act 1995, authorities have the power to request the involvement of other relevant agencies from the statutory, voluntary and private sector, in the provision of throughcare and aftercare services.

2. This represents an important step in recognising the pivotal role of multi–agency collaboration, in ensuring that young people receive an effective and efficient service. The needs of these young people may, and often do, cross departmental boundaries. It is important therefore, that joint working procedures and assessments are in place to provide as seamless a service as possible.

Corporate Partners

3. Whilst Social Work has been allocated the lead responsibility for throughcare and aftercare provision, it remains a corporate responsibility and as such it is envisaged that Housing and Education will have a role to play. Of the thirty-one authorities who responded to the questionnaire, **84% (26) reported that the Housing Department was involved in delivering or overseeing throughcare and aftercare services.** However, eight of these authorities indicated that they were joint Housing & Social Work Departments. Only 13% (4) indicated similar links with the Education Department.

External Partners

4. In terms of formal agreements with external agencies, a similar pattern emerged. As shown in the following table, local authorities were more likely to have links with housing providers than other service providers.

Table 4. *Formal agreements between Social Work and other agencies re: throughcare and aftercare* (n=31)
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AGREEMENTS	HOUSING PROVIDERS	CAREERS	EDUCATION & TRAINING	HEALTH	BENEFITS AGENCY	CHILDREN'S HEARINGS
YES	18 (58%)	9 (29%)	7 (23%)	7 (23%)	5 (16%)	4 (13%)
NO	13 (42%)	17 (55%)	16 (52%)	19 (61%)	20 (65%)	20 (65%)
MISSING / NO RESPONSE	0	5 (16%)	8 (26%)	5 (16%)	6 (19%)	7 (23%)

5. In addition to this, 29% (9) of authorities reported having agreements with SIPs and 32% (10) had agreements with a range of voluntary organisations such as Who Cares? Scotland and NCH. One authority reported having a formal agreement with the criminal justice department.

6. **Overall 68% (21) of the responding authorities reported having formal agreements with one or more of the external agencies**. One authority had agreements with all of the specified agencies, including a SIP. 32% (10) indicated that they did not have agreements with any of the agencies. This suggests that although a commitment to collaboration with other relevant service providers was a prominent theme in the Children's Services Plans, it has yet to be formalised in almost a third of authorities.

Inter-Agency Planning

7. **77% (24) of authorities reported having regular cross-agency/departmental meetings to facilitate the planning of throughcare and aftercare services.** Although there does not appear to be many specific throughcare/aftercare planning groups, two authorities mentioned the development of local branches of the national Throughcare Aftercare Forum, which cover several authorities in the area and involve representatives from benefits, housing, careers and health services.

8. We found that in most authorities, throughcare/aftercare planning comes under the remit of a range of groups including Children's Services Planning groups (6), housing or youth homelessness strategy groups (5), including a joint throughcare and youth homeless group and a youth housing and aftercare strategy group, SIPs meetings (3), joint committees for children and young people and a corporate parenting working group.

9. Seven authorities (23%) said they did not have cross-agency meetings for throughcare/aftercare planning.

3.3. Working arrangements - agency views

1. To complement and expand upon the information from the Social Work Departments on corporate and interagency partnerships, we sought the views of a number of statutory and voluntary agencies.

2. Just over half (56%) (99) of the agencies that were contacted, responded to the questionnaire. Chart 1. indicates those agencies who were contacted with a questionnaire and the number of questionnaires returned.

Chart 1. Supplementary questionnaires (Qs). (n=178)
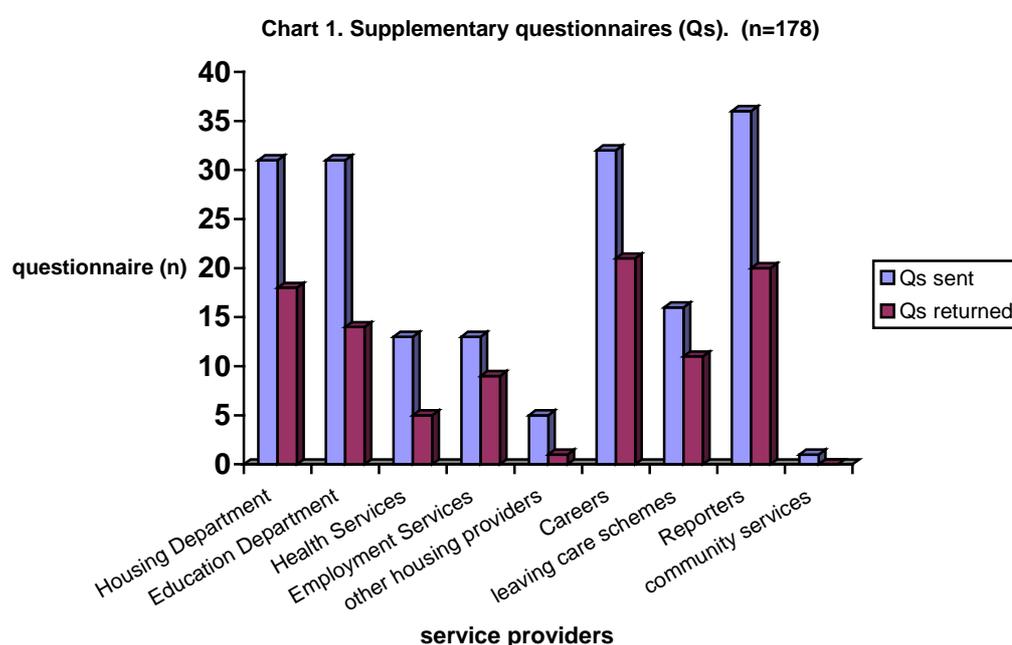
Formal Agreements

3. With the exception of the Children's Reporters and leaving care schemes, all other agencies were asked whether they had formal agreements with the Social Work Department in respect of services for young people who are preparing to leave care or who have left care. We also asked whether they had key members of staff to link with the Social Work Department.

4. Of the sixty-eight responses, we found that although **69% (47) of the agencies provided specific services to these young people**, only 9% (6) of them reported that formal agreements were in place. The majority (66%) (4) of these agreements were between the Social Work and Housing Departments.

5. Over half of the responding agencies (53%) (36) said they had a member of staff with responsibility for liaising with the Social Work Department, regarding throughcare/aftercare services. Link staff were

reported in 72% (13) of the responding Housing Departments, 71% (10) of the Education Departments 60% (3) of health service providers, 11% (1) of Employment Services and 38% (8) of the Careers Companies.

Cross Agency/Departmental Meetings

6.   Analysis of the Children's Services Plans indicated a strong commitment to multi–agency collaboration in providing and planning services for looked after young people and care leavers. This was reflected in our survey of *all* agencies (99) who responded to our questionnaire.

7.   Overall, we found that **70% (69) of the responding agencies were involved in cross agency meetings to plan or review throughcare/aftercare services.**

8.   Careers services, Health service providers, Housing Departments and Education were highly represented with 86%, 80%, 77% and 71% respectively, participating in these meetings.

9.   A fifth of responding Authority Reporters (20%) (4) had been involved in cross agency meetings, however the majority of these consisted of one-off or occasional attendance.   One Reporter commented that this was '*not very satisfactory.*'

10. All of the responding leaving care schemes (11) reported that they had taken part in cross-agency meetings.

Working Arrangements

11. Agencies were asked to comment on their current working arrangements with the Social Work Department and rate these arrangements on a scale of 'very good' to 'very poor'. Overall, we found that working arrangements were generally viewed positively with 13% (13) of responding agencies describing them as 'very good' and 37% (37) describing them as 'good'.

12. Over a quarter (29%) (29) viewed current arrangements as 'satisfactory', with over half of the responding Careers Companies (57%) describing their current arrangements as such.

13. However, 14% (14) of agencies indicated that working arrangements with the Social Work Department were less than satisfactory, with 9% (9) describing them as 'poor', 3% (3) describing them as 'very poor' and 2% (2) commenting that arrangements varied from satisfactory to poor.   This was particularly so for over a quarter of responding Careers Companies (29%) and 14% of responding Housing Departments.

14. Five agencies did not respond to this issue.

15. A more detailed consideration of the comments on current working arrangements in respect of throughcare and aftercare suggested that overall, agencies felt that improvements could and should be made in this area. For example:

16. **Housing** – The majority (61%) (11) thought that working arrangements were more than satisfactory and involved good communication and shared goals. However, several commented that although much progress had been made in developing joint working processes, there remained areas of weakness. For example, the exchange of information around client details; the problem of some young people 'slipping through the net'; the lack of staff and resources to address policy and procedure deficiencies; and the occasional conflict of respective priorities.

17. **Education** – Working arrangements with the Social Work Department were viewed very positively, with the majority of responding Education Departments describing them as 'good' (57%) (8) or 'very good' (29%) (4). A small number commented that although links between the departments were good, the area of specific services for looked after young people and care leavers needed to be developed. One Education Department commented that they had *'Good arrangements for mentoring children in care, but no real focus on aftercare.'* There was also a recognised need for 'consistent co-ordination' and the availability of 'time and personnel' to strengthen working links.

18. **Careers** - As the main avenue for providing information and access to employment, training and education for young people, the Careers Companies have a significant contribution to make in the preparation process and support of care leavers. However, only 5% (1) of responding Careers Companies reported having formal agreements with the Social Work Department with regards to throughcare and aftercare.

19. The majority (57%) (12) of Careers Companies described their working arrangements as 'satisfactory'. Most described informal arrangements which were only just beginning to strengthen.

20. However, some dissatisfaction at current working arrangements in respect of throughcare and aftercare was expressed by the Careers Companies.

21. 'Poor' or 'very poor' working arrangements were highlighted in 29% (6) of responses from the Careers Companies. Areas of concern focused on the ad hoc nature of the contact between the two services. Comments suggest that contact seems to be dependent on the willingness and knowledge of individual social/throughcare workers and can be somewhat one sided with the careers service taking the initiative. One Careers respondent reported that:

> '*We first raised concerns about this issue of joint guidance for young people leaving care in 1995. The recent focus on throughcare and aftercare arrangements has at last led to social work taking notice…although we are still waiting for a formal response.*'

22. Nevertheless, there was a significant amount of optimism for future progress, contained within the response of the Careers Companies. Many expressed their commitment to formalising and strengthening their involvement in services for young people who are preparing to leave or have left care. Several pointed towards the introduction of the LAC material as a means of introducing a more systematic, procedural basis for joint working. The recommendations of the Beattie Report was also highlighted as a means of taking this forward.

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23. **Employment Service –** The majority of responding employment services (55%) (5) described their working arrangements with the Social Work Department as less than satisfactory. It would appear that their was little contact between the two with regards to throughcare and aftercare issues although it was felt by several of the responding services that stronger links were needed '*to enable smother transition for care leavers into mainstream services'*. In some services, work to build greater communication and cooperation was underway.

24. **Reporters** – The majority (85%) (17) of responding Authority Reporters described their current working arrangements with the Social Work Department in respect of throughcare and aftercare as 'good' (70%) (14) or 'very good' (15%) (3). However within this, it was felt that improved procedures were necessary. The main areas of concern surrounded establishing and adhering to protocols. A number of Authority Reporters were critical of social work procedures. For example, it was suggested in one case that '*the reporter is often an afterthought.*,' whilst others felt that it was sometimes difficult to ascertain areas of responsibility and commented that despite agreed structures, social work do not always '*keep their part of the agreement.*' The issue of late reports was also raised.

25. It was generally acknowledged that these issues were in part a consequence of restructuring both within local authorities and the organising of Reporters. Regular meetings, a 'mutual respect' and understanding of respective roles and involvement on planning committees seemed to be indicative of 'good' working arrangements.

26. **Health Service Providers -** The majority of responding health services (80%) (4) described working arrangements with the Social Work Department as 'good'. However, one commented that this very much depended on good will, as there were no formal arrangements between them.

27. **Leaving Care Schemes** - All but one of the responding leaving care schemes were positive about their working arrangements with the Social Work Department. Half (5) described them as satisfactory, 30% said they were 'good' and 20% reported 'very good' working arrangements. However, two leaving care schemes expressed a desire to see improvements and one commented that 'they're [social work] not in touch with what young people want!' One leaving care scheme who felt their working arrangements with the Social Work Department were poor, felt that there was often a conflict of interests between themselves and the Social Work Department as their managing agent.

1. Eligibility for throughcare and aftercare services is outlined in the Children (Scotland) Act 1995 Regulations and Guidance, Vol. 2. This states that all looked after young people whether accommodated away from home or with friends or family, are eligible for throughcare services. In terms of aftercare, eligibility is based on a series of duties and powers towards young people who were looked after at school leaving age up to twenty-one years of age. In practice, authorities tend to operate their own interpretations of these criteria which is most likely based on resources, type of service provision and in some authorities, the size and needs of the looked after and previously looked after population.

2. Recording the number of young people who are eligible for throughcare and aftercare services does not appear to be a routine task for local authorities and though collected by some, figures are not always easily accessible.

3. **Most of the responding authorities (77%) (24) were able to tell us how many young people were currently eligible to receive formal throughcare services**, and 55% (17) knew how many had been in receipt of the services in the past twelve months.

4. In respect of aftercare, 68% (21) of authorities were able to provide figures for the number of young people currently eligible and 65% (20) knew how many young people had received aftercare provision in the past twelve months.

5. Based on the information provided from the thirty-one authorities it is possible to estimate that **at least 2222 young people are currently eligible to receive formal throughcare services and a minimum of 1474 young people are eligible for aftercare.**

Table 4.   Number of young people eligible for throughcare and aftercare across local authorities.

YONG PEOPLE:	FORMAL THROUGHCARE	AFTERCARE
total eligible for service	2222	1474
range	3 – 353 (24 authorities)	1 – 342 (21 authorities)
total in receipt of service in past 12 months	756	1006
range	4 – 171 (17 authorities)	2 - 330 (20 authorities)

6. The range in the number of young people eligible and in receipt of services reflects the variation in size of the local authorities.

7. It is important that these figures are placed in the context of eligibility criteria. Whilst preliminary analysis has not included an examination of individual cases, overall we found that a pattern did emerge across those authorities who responded to the questionnaire.

8. Local authorities were asked to indicate which groups of young people were eligible to receive throughcare and aftercare services from them. Only one of the responding authorities was unable to supply this information. The responses are shown in Table 5.

Table 5.   Eligibility for throughcare and aftercare across local authorities. *(n=30)*

GROUPS:	NUMBER OF LOCAL AUTHORITIES	
	ELIGIBLE	NOT ELIGIBLE
looked after at home- aged under 16	20	10
looked after at home- aged 16 or over	21	9
looked after in foster care aged under 16	27	3
looked after in foster care aged 16 or over	29	1
looked after in residential care aged under 16	27	3
looked after in residential care aged 16 or over	29	1
moved to independent living aged 16-18	28	2
moved to independent living- aged 19-20	27	3
moved to independent living- aged 21 or over	16	14
homeless young people - aged 16 or 17	16	14
other groups	8*	22
* other eligible groups include homeless young people aged 17 to 21 years old, young parents who have been looked after and young people in custody.		

9. It is interesting to see that in a third of authorities, young people looked after at home are not treated as eligible for throughcare and aftercare services. Some authorities did note that exceptions would be made in certain circumstances.

10. **Of the thirty authorities who supplied information for this section, 33% (10) treated all of the identified groups of young people as eligible to receive throughcare/aftercare services.** Eight authorities extended their services to include 'other groups'.

11. Only three authorities offered a service to less than half of the groups listed, however, both were small authorities in terms of population, and none had a specialist throughcare/aftercare service.

12. We also asked authorities to supply us with the total number of eligible young people in each group. However, few authorities were able to provide accurate numbers for all eligible groups. Some figures were ambiguous and may have reflected the number of all looked after children and young people in each of the groups.

13. It is clear from the comments of some authorities that collecting and collating this particular information can be problematic. Half of the authorities who returned the questionnaire experienced

difficulty in accessing and collating data on numbers of young people eligible for their throughcare and aftercare provision. The most common problems mentioned were:

- data not being routinely collected in the specified categories;

- data not being stored electronically or being stored on different databases, both of which necessitated manual counts;

- data collection forms are available but staff do not always complete them.

Models

1. In our research proposal we identified three different authority-wide models derived from our earlier research work carried out in England:

    i Non Specialist Service - in this model responsibility for delivering a leaving care service rests primarily with field social workers, sometimes in collaboration with other carers.

    ii Centrally Organised Specialist Scheme - in this model services are provided by a centrally located team of specialist workers who provide an authority-wide service.

    iii Dispersed Specialist Scheme - in this model individual specialist leaving care workers are attached to area based fieldwork teams.

2. In addition, our most recent research work, a survey of best practice in England carried out during 1999, identified a fourth model, *A Centrally Organised Integrated Service* - providing an integrated service to a wider range of vulnerable young people including care leavers, and other young people 'in need' - for example, homeless young people, young offenders, young people who run away from home or care (Stein & Wade, 2000).

Centrally Organised Specialist Schemes

3. Our Scottish policy survey reveals that just over two thirds of authorities (68%) (21) had a specialist team or specialist staff with direct responsibility for providing throughcare/aftercare services.

4. The numbers of specialist staff involved ranged in numbers from 1.5 to 40.5 reflecting in part the numbers of young people in receipt of throughcare and aftercare services within authorities.

5. Over half (57%) (12) of those who had a specialist team or specialist staff were centrally located, 71% (15) were managed by the Social Work Department and 76% (16) were funded by the Social Work Department. Funding exclusively by these Departments ranged from £26,000 to £610,000 depending on the number of specialist staff employed.

6. The remaining specialist schemes included those jointly managed and funded by Social Work Departments and the Voluntary Sector or other external agencies. All of these were centrally located. One Social Work Department had two specialist teams located within different localities. Joint funding arrangements varied from equal matched funding between Social Work Departments and Voluntary/External Agencies to 93% Social Work Department funding.

7. Just over half (52%) (11) of the specialist teams or specialist staff provided a service to all eligible young people within their authorities. One provided services to all eligible groups except young people under the age of 16 who were looked after at home. The others provided aftercare services for young people not able to live at or return home.

8. Over half (52%) (11) of specialist schemes reported having a written description of the services provided by the throughcare/aftercare team.

9. This picture points to the Centrally Organised Specialist Scheme as the main specialist model. There was no evidence of dispersed specialist staff within fieldwork teams although several respondents commented upon the links between their specialist teams and other carers. As detailed above the main variation in the model was in respect of joint funding and managerial arrangements with the voluntary sector.

Non Specialist Service

10. Just under a third (32%) (10) of Social Work Departments had no specialist team or staff with direct responsibility for providing throughcare/aftercare services. Most of these Departments responded that field social workers, residential social workers and foster carers were involved in providing these services. Most respondents however, were unable to state the numbers of staff formally involved in providing a throughcare/aftercare service - other than all! Less than half (40%) (4) had a written description of the range of throughcare/after care services provided.

11. Non Specialist Services were generally being provided in larger rural areas, or in geographical areas where either the numbers of young people currently eligible to receive formal throughcare and aftercare or those who had been in receipt of throughcare and after care services in the past twelve months were lower.

3.6. Throughcare – leaving care planning

'Throughcare is the process by which the local authority plans and prepares the young person they are looking after for the time when he or she will cease to be looked after.'(The Children (Scotland) Act 1995 Regulations and Guidance, Vol. 2.)

1. At some point the preparation for each looked after young person will usually become more structured and formal. Of the thirty-one authorities who responded to the questionnaire, most authorities (**77%**) **(24) reported having a planned throughcare programme for young people.** Almost a quarter (23%) (7) did not.

Eligibility

2. As already outlined, some authorities tend to operate their own eligibility criteria and as such throughcare provision is restricted to certain groups of the looked after population.

3. We found that young people looked after in children's homes were eligible in all authorities who operated a planned throughcare programme and **young people in foster care were eligible in as many as 83% (20) of these authorities**. Young people placed with parents or family however, were eligible for planned throughcare in less than half of the authorities who had planned throughcare programmes (46%) (11). The pattern of eligibility across local authorities is illustrated in Chart 2 below.

Chart 2. Throughcare Eligibility Critieria

looked after young people (yp).
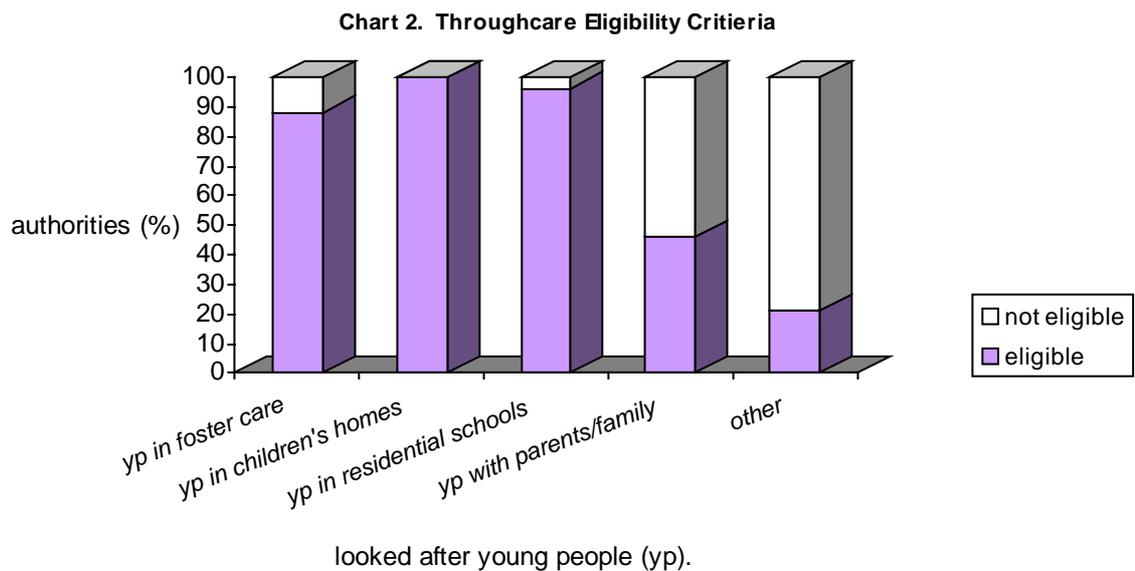
4. Just under a quarter of the authorities who offered a planned throughcare programme extended it to 'other groups' of young people, including those looked after in secure units or in youth custody, homeless young people and young people referred from other regions and authorities. One authority added that in '*in cases of extreme vulnerability tc will be allocated to other groups including looked after at home.*'

5. Almost half (46%) (11) of those authorities with a planned throughcare programme treated all four of the specified groups as eligible.

6. **The modal age for young people to begin a planned throughcare programme was 15 years old** (58% (14) of authorities). In 21% (5) of authorities the planned programme began at 14 years old and in 13% (3) it began at 15 ½. One authority said it depended on the circumstances of the young person. One authority did not supply information for this question.

7. The programmes tend to be incorporated into young people's care plans via throughcare plans and reviews and LAC reviews. Timing of reviews varied from weekly or fortnightly to every three months.

The Programme

8. Evidence indicates that preparing young people for the transition to adulthood and independent living should be holistic in approach attaching equal importance to practical, emotional and interpersonal skills (Biehal et al 1995).

9. The following five elements have been suggested as integral to an effective preparation programme: self care skills (personal hygiene, diet and health, including sexual health); practical skills (budgeting, shopping, cooking, cleaning); interpersonal skills (managing a range of formal and informal relationships, including sexual relationships); education (planning and supporting positive progress); and identity (knowledge of and links with family and community, sexuality, cultural knowledge/skills for young people from ethnic minorities). (Stein & Wade, 2000).

10. We asked authorities to outline the main areas covered by their throughcare programme. We then matched their responses to the five areas described above. This provided us with some indication of how comprehensive their throughcare programmes were. Chart 3. illustrates those areas which were specifically mentioned in the programme outlines.

11. Of the twenty-four authorities who said they offered planned throughcare programmes, three did not supply us with details of the areas covered. Of the twenty-one who did supply an outline, only one authority mentioned all five preparation areas. Three authorities mentioned 4 areas whilst the majority of local authorities with a planned preparation programme (71%) (17) mentioned three areas or less.

12. In six authorities additional areas such as leisure, benefit entitlements, accessing help/social support, accommodation, personal safety and counselling were covered in the throughcare programme. Also, a number of authorities did report that they were in the process of implementing the Looked After Children material and would be addressing the seven dimensions contained within it.

13. Overall, we found that practical skills and interpersonal skills were covered by most authorities; however, identity was mentioned by only one.

Chart 3. Throughcare Programme. (n=21)
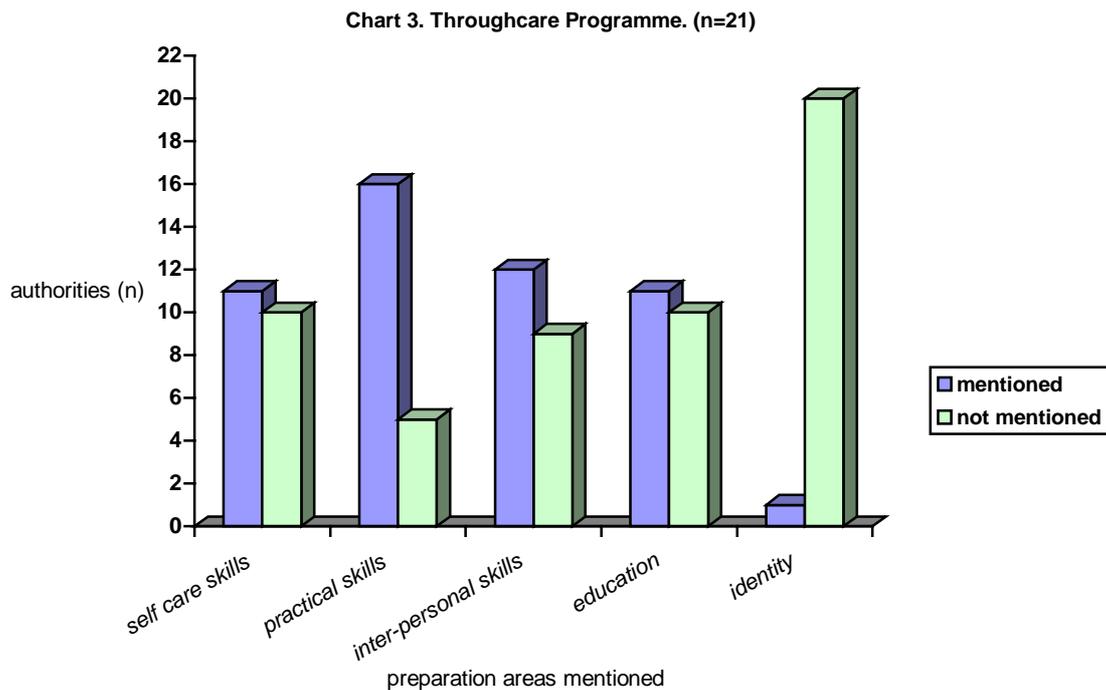
Special Needs

14. Some young people will have specific needs which should be addressed in their throughcare planning. In some cases special provision may be necessary. We found that 55% (17) of the thirty-one authorities who responded to the questionnaire, offered specific provision to one or more groups of the looked after population, who may have particular needs. (See Table 6.)

Table 6. ***Number of authorities with & without specific throughcare provision.*** *(n=31)*

LOOKED AFTER SUB-GROUPS	NUMBER OF AUTHORITIES WITH:	
	SPECIFIC PROVISION	NO SPECIFIC PROVISION
Young people from minority ethnic backgrounds	3	28
Young parents	10	21
Physically disabled young people	6	25
Learning disabled young people	7	24
Young people with mental health problems	11	20
Young people with substance misuse problems	10	21
Young offenders	12	19

15. Some of the authorities who did not have specific throughcare provision, stated that special needs were addressed on an individual basis and staff would attempt to identify relevant support.

Leaving Care Planning

Looking After Children Records

16. The Looking After Children Assessment and Action Records provide a framework for approaching throughcare planning and review. **We found that 42% (13) of the responding authorities were currently using the LAC material**. A further 23% (7) reported that they were either in the process of implementing the records or were planning to implement them. Eleven (35%) authorities said they were not using the records.

Leaving Care Review

17. **84% (26) of authorities said that their leaving care policies and procedures included a requirement to hold a leaving care review.** A further two commented that there was no specific requirement to hold a review but it was normal practice to do so. Of the remaining authorities, two said that they had no specific leaving care reviews '*rather they are incorporated into normal Reviews.*' One authority did not comment.

18. Most authorities said that all relevant persons were invited to attend reviews. The general consensus was that reviews should be sensitive to who should attend by balancing the young person's wishes with the relevant contribution of others. This could include specialist workers or representatives from relevant agencies such as education or health services. Several authorities mentioned the involvement of workers from Who Cares? Scotland. We also found that leaving care reviews (and child care reviews in general) were used as a means of promoting and encouraging family contact, where appropriate.

Areas Covered In The Review

19. 'The planning and review process prior to a young person leaving care is the foundation upon which good aftercare support can be built' (Stein & Wade 2000). It is important therefore, that a wide range of issues is addressed during the leaving care review. It has been suggested (First Key 1996) that the following areas should be considered during the leaving care planning and review:

   - area 1 - safe 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;
   - area 2 - education, employment and training options; financial assistance where required;

- area 3 - assistance with claiming entitlement to welfare benefits where appropriate;

- area 4 - provision of general and specialised health care;

- area 5 - leisure options;

- area 6 - maintenance of informal networks of support, including family members and friends; creation of new networks of advice and support where appropriate;

- area 7 - introduction to specialist services where appropriate (counselling, advocacy, health);

- area 8 - clear signposting of sources of assistance in the future, including out of hours in emergency.

20. Authorities were asked to *identify* the main areas covered in their leaving care reviews. Their responses where matched to the above category areas. Table 7 shows which of these categories were mentioned by the twenty-eight authorities who held leaving care reviews and supplied details of their review areas.

Table 7. **Areas mentioned in review outlines** *by* **number of local authorities.** *(n=28)*

NUMBER OF AUTHORITIES	REVIEW AREAS							
	AREA 1	AREA 2	AREA 3	AREA 4	AREA 5	AREA 6	AREA 7	AREA 8
Mentioned	15	18	12	12	2	14	2	9
Not mentioned	13	10	16	16	26	14	26	19

21. Other areas mentioned in the outlines included recent progress and work required, issues related to offending, future plans, the seven LAC dimensions, welfare rights, risk assessment, emotional matters, throughcare plan and objectives achieved.

Monitoring And Recording Decisions

22. Twenty-seven authorities outlined their procedures for monitoring and recording review decisions. 41% (11) of these mentioned the use of LAC material to monitor decisions and 7% used throughcare monitoring forms. Decisions tended to be recorded via the process of taking minutes and distributing them to relevant parties.

> 'Aftercare is the provision of advice, guidance and assistance when a young person ceases to be looked after.' (The Children (Scotland) Act 1995 Regulations and Guidance, Vol. 2.)

1. Under Section 29 of the Children Scotland (Act) 1995, local authorities have a duty to provide aftercare to those young people looked after at school leaving age up until they reach nineteen years of age. Authorities also have the power to provide aftercare up to twenty-one years of age.

2. It has been well documented that the transition to independent living can be a difficult and isolating process for looked after young people. Whilst effective 'throughcare' may prepare the young person for this transition, they will require continued support through a range of accessible and flexible aftercare services.

Personal Support

3. Continuity and consistency of service can offer a safe and familiar environment in which young people can begin the transition to independence.

4. **In our survey we found that in 94% (29) of authorities, young people were able to continue in foster care placements after legally leaving care.** (Two of these authorities however, noted that this would be in exceptional circumstances only.) This approach represents a positive step in helping to promote continuity and stability for young people at this important stage in their lives.

5. We also found that 32% (10) of authorities reported having formal policies in relation to providing a continuing care role for foster and residential carers. Examples included financial recompense appropriate to the level of continued input (e.g. travel expenses and revised fees) and the use of residential units as designated contact points for care leavers. Of the twenty authorities who said they did not have formal policies, 10% (3) said that arrangements could be made on an individual basis to facilitate a continued care role. For example, residential workers may provide continuing outreach work.

6. One authority who did not have a formal policy for facilitating a continuing care role highlighted the problems of an unplanned 'open to return' approach. They commented on the potential disruption caused to other residents by allowing young people to return to residential units and noted that *'support via Through care team is preferred method of response. Staff and Carers are not disinterested but do have a recognisable 'new focus'.'*

7. One authority did not respond to the question.

8. An important part of ensuring consistency in support is the allocation of a named person to continue contact with care leavers. **87% (27) of the responding authorities provided young people with a named person for contact after they leave care**. Most authorities (22) used specialist leaving care workers to maintain contact with care leavers, although field social workers (18) and residential workers (11) were also widely used. In over a quarter (9) of these authorities all three were used to provide ongoing contact depending on the most appropriate for the individual young person. Other specialist staff who were involved in continuing contact included a SIP mentor, project worker and a homemaker.

9. We found that in addition to providing named contact staff, authorities employed a variety of strategies to continue contact with care leavers. Arrangements included: referring to the throughcare teams or formal packages of support; drop in centres were mentioned in five authorities; proactive staff/approach e.g. planned and unplanned visits, phone calls, letters and invitations to outings and Christmas celebrations; holding group work/activities; and advising young people on how to access required services. Two authorities mentioned developing more effective tracking systems. One of these suggested employing an incentive for yearly contact such as a birthday present or meal.

Ending Personal Support

10. We asked local authorities to outline their policy on ending personal support services. **Around 80% of authorities operated a flexible approach to ending personal support**. The majority commented that support generally ended by mutual agreement or at the young person's request. Around half operated an open door policy in that young people could self refer or be re-referred for support and in some cases return to care. Drop in centres were also mentioned as a means of continuing *informal* support and contact.   Only three authorities outlined more formal procedures.   These included decisions to end support being taken by social workers and line managers, the arrangement of an exit interview and ending support six months after the young person's move to independence. One authority simply stated 'age'.

Aftercare Support For Special Needs

11. Many care leavers will have needs which extend beyond the level of general provision for young people leaving care. Specialist support services may be required to address these needs.

12. Authorities were asked to indicate whether they provided specialist support initiatives or specialist accommodation to those young people who may have particular needs. Table 8 indicates the level of support available across thirty-one local authorities.

Table 8. ***Number of authorities which offer specialist services for care leavers.*** *(n=31)*

CARE LEAVER - SUB-GROUPS	NUMBER OF AUTHORITIES WHO:	
	PROVIDE SPECIALIST SUPPORT	PROVIDE OR ARRANGE SPECIALIST ACCOMMODATION
Young people from ethnic backgrounds	0	1 (3%)
Young parents	7 (23%)	13 (42%)
Physically disabled young people	3 (10%)	8 (26%)
Learning disabled young people	5 (16%)	12 (39%)
Young people with mental health problems	7 (23%)	11 (35%)
Young people with substance misuse problems	5 (16%)	5 (16%)
Young offenders	8 (26%)	7 (23%)

13. Several authorities who did not have specialist support initiatives for these young people commented that specialist support would be identified and addressed on an individual basis.   This was reiterated by a small number of authorities who reported that providing specialist initiatives for these groups was not viable because of the low number of care leavers in their area.

14. In some cases, specialist accommodation was not specific to care leavers only, but rather specific to the sub-groups mentioned and open to young people who are leaving or have left care. For example, one authority noted that a:

> *'Voluntary agency provides shared supported accommodation for young women with babies which will accept care leavers …. SWD provides staffed supported accommodation for young people with mental health problems who may be care leavers.*'

Accommodation

15. The considerable work undertaken by local authorities to address the accommodation needs of care leavers reflects the high priority afforded to the area of aftercare.

16. **74% (23) of authorities reported having formal agreements with the Housing Department or housing providers in respect of accommodating care leavers[1].**

17. Strategies include:
   - provision of supported flats for care leavers or in some cases, other vulnerable young people;

   - multi-agency involvement in committees, and the review and evaluation of care packages aimed at young people's housing needs;

   - involvement of Housing Department in care reviews to assess 'special needs points' early to ensure continuity of service (e.g. joint assessment protocols);

   - joint homelessness strategy to target care leavers and other vulnerable young people.

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[1] Eight authorities reported having joint Housing and Social Work departments.

18. Two of the authorities who did not have formal agreements, did have informal working arrangements with the Housing Department or housing providers in respect of accommodating care leavers. Also, one authority was in the process of negotiating a formal agreement involving the voluntary sector and Housing.

19. One of the 'milestones' set out in the Scottish Executive's Social Justice document is:

> 'All our young people leaving local authority care will have achieved at least English and Maths Standard Grades and have access to appropriate housing options.'

Another states:

> 'No-one has to sleep rough.'

20. Young people leaving care will have diverse accommodation needs according to their individual circumstances and their ability to cope independently. Overall, we found that authorities were able to offer a good range of accommodation *options* to young people. Availability was not explored in this survey. **84% (26) of authorities provided four or more options (including 'other').** 13% (4) currently had three accommodation options for care leavers, and 3% (1) offered only two options.

21. As the following table indicates, the most common types of accommodation for care leavers in Scotland are independent tenancies (94%), supported lodgings (90%) and young people remaining with foster carers on a supported lodgings basis (90%). Foyers were not so widely used with only 10% of authorities offering this type of accommodation.

Table 9.   Accommodation options for care leavers. (n=31)

ACCOMMODATION TYPE:	NO OF AUTHORITIES OFFERING ACCOMMODATION TYPE
foster carers becoming supported lodgings providers	28
supported lodgings	28
supported hostel	20
floating support schemes	22
semi-independent flats (with 24hour support)	21
independent tenancies	29
Foyers	3
Other	10

22. 'Other' accommodation options included semi independent flats with eight hour support, student flats for care leavers who attend college, a mother and baby unit, bed & breakfast and a range of supported accommodation tied to particular initiatives.

23. Ideally, a young person's personal preference should be considered along side their assessed needs and level of ability. Almost all authorities indicated their commitment to observing the wishes of young people in the provision of accommodation. Although somewhat limited in detail, responses suggest

that views were generally sought via the care plans and the review process. One authority stated, '*unfortunately we are seldom in a position to offer choice. Where we can the young person is the decision maker*'. Another outlined their approach to ensuring that young people were able to make an informed choice.

> *'Young people are involved from the start in the selection. They are taken to visit a range of accommodation options and get information from staff and young people who have already moved on.'*

24. A number of authorities indicated their objective to reach a compromise based on the young person's preference, needs and abilities weighed against the availability of suitable accommodation in the local area.

Accommodation Contingency Plans

25. Most authorities reported that accommodation breakdowns would be dealt with under homeless person legislation and that care leavers would be treated as priority homeless. However, in some cases contingency arrangements seemed somewhat ad hoc, possibly due to the availability of options.

26. Arrangements included the option for return to residential or foster care or re-admittance to the independence flat/unit or residential options, depending on availability. A number of authorities provided emergency accommodation via the Housing Department or voluntary schemes, or had access to hotels as a temporary measure. Bed & breakfasts tended to be used as a last resort.

27. Three authorities mentioned an out of hours resource, where young people were offered advice and support from either a duty social worker or throughcare worker. In one authority emergency throughcare response involved arranging temporary accommodation and financial assistance and exploring long-term options with the young person. Another operated a crisis team and emergency hostel accommodation.

Finance

28. Research highlighting poor educational attainment and low participation in training and employment amongst care leavers, suggests that this group of young people is likely to be financially dependent for some time after leaving care (Biehal et al., 1995; Broad, 1998). In order that young people moving from care to independence do so with the full financial resources available to them, certain measures should be in place. For example:

Clear Policy

29. Local authorities have specific powers under sections 29 & 30 of The Children (Scotland) Act to provide financial assistance to care leavers. The discretionary features of these powers necessitate the development of a clear authority policy in respect of financial assistance. This should outline the

eligibility criteria, assessment and application procedures and the range and extent of provision available under section 29 & 30 payments as well as from mainstream sources.

30. Of the thirty-one authorities, who responded to the questionnaire, 26% (8) supplied detailed accounts of policy in this area, which addressed these issues. Almost a quarter (23%) simply stated that policy was in accordance with section 29 and provided no further details. Several authorities reported that financial assistance was based on individual need but gave little or no indication of how this would be assessed.

31. The paucity of information made it difficult to ascertain the extent to which policy across authorities varied. It seems however, that a common theme was to explore all existing mainstream sources before allocating section 29 or 30 funds.

32. A number of authorities commented that they would conduct a 'maximising income' check to ensure that young people were accessing their full entitlements and would provide top up payments to subsidise or fill in gaps between mainstream sources.

A Range Of Provision

33. **68% (21) of authorities said that they offered four or more types of financial assistance to young people leaving care (including 'other')**. Only one authority reported that they did not offer any of the types specified in the questionnaire (see Chart 4). Financial provision for the small number of care leavers in this authority, took the form of '*material provision chosen by the young person.*' One authority did not respond to the question.

34. As indicated in Chart 4, the most widely available form of financial assistance was leaving care grants with 90% (28) of the authorities who returned questionnaires, reporting that they provided this type of assistance. A small number of these (13%) appeared to make a *standard payment* to young people leaving care. In one case this consisted of a £2,500 start up payment for moving into their own home and in another, a grant of £1000 was given to young people who had been looked after by the authority. In the latter case some of the amount may be repayable if the young person went on to receive a community care grant.

Chart 4. financial assistance (n=30)

authorities (n)

31
26
21
16
11
6
1

leaving care grant · income top up · education assistance · employment assistance · accommodation subsidies · other

types of assistance
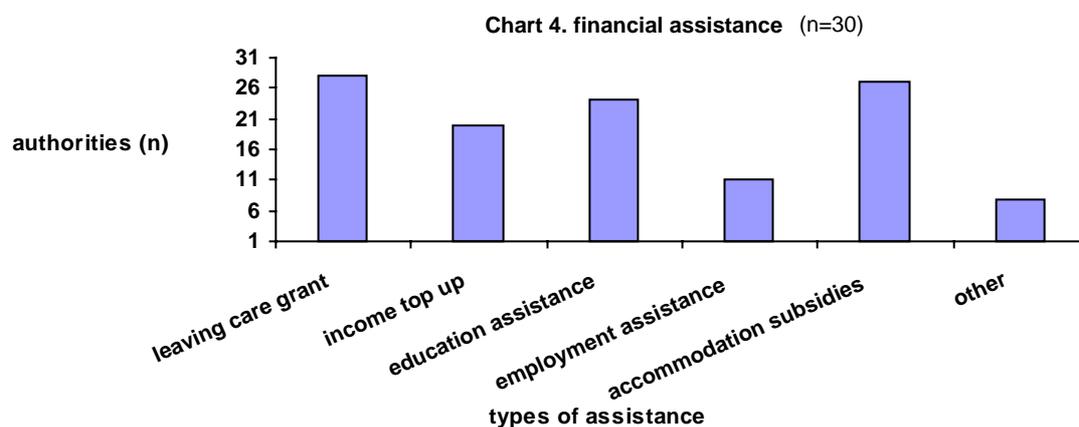
35. 'Other' forms of assistance consisted of crisis/destitution payments, food parcels, clothing, items required for young people in custody, money for driving lessons and leisure activities, and in one authority, holidays.

36. Overall, this provides a clear indication that Social Work Departments are playing a significant role in providing financial assistance to care leavers in several areas of their lives.

37. The Social Work Department total expenditure on financial assistance ranged from £6,000.00 in one of the smaller authorities to £1,935,030.00 (based on information from 55% of authorities). Most authorities were unable to provide breakdowns of spending on each of the specified types of financial assistance.

Information

38. Young people should be equipped with information about their financial and income entitlements. We found that the level and means of information varied across local authorities from providing clear and easy to understand leaflets on accessing and managing an income to relying on verbal information from staff.

39. Two authorities supplied comprehensive information as part of a leaving care pack, which outlined entitlements, explained the range of benefits available to care leavers and provided useful numbers and addresses for accessing further information.

40. 16% (5) of authorities reported that they carried out income/benefit maximisation checks with individual young people leaving care, to ensure that they were receiving their full entitlements.

41. Other methods of providing information included: access to the welfare rights team and money advisors; advising young people during the course of preparation work on what was available to them through the Social Work Department and other sources; and the dissemination of printed material from relevant agencies.

42. Several authorities commented that they were in the process of addressing this issue or developing information.

Working Links

43. Previous research suggests that the encouragement of formal links between relevant agencies can promote financial assistance to care leavers by facilitating an awareness of entitlements and speeding up the claims process. (Department of Health 1997).

44. In our study we found **that over half (52%) (16) of authorities had no formal working arrangements in respect of income entitlements.** One did not respond to the questions. Of the fourteen authorities who reported having formal working arrangements with one or more agencies, eight had links with the Benefits Agency, thirteen had links with Housing and three had links with Education.

45. Under half (39%) (12) of the authorities who responded to our questionnaire had a designated member of staff responsible for financial assistance.

Careers, Education, Employment And Training

46. Another of the 'Milestones' outlined in the Scottish Executive's Social Justice document is: 'Halving the proportion of 16-19 year olds who are not in education, training or employment.' This has particular implications for looked after young people and care leavers, who research indicates, are particularly disadvantaged in terms of educational attainment and participation in training and employment.

47. **61% (19) of the authorities who responded to our questionnaire said that they had a strategy for helping care leavers into education, employment and training**. Arrangements included accessing advice and assistance from careers or education services as part of throughcare or preparation work; offering financial assistance for further or higher education; and specific agreements with the careers service, such as ring fencing skill seekers placements with support or providing specialist employment related support for 15 – 24 year olds who have been in care.

Strategy

48. Just over a quarter of authorities (26%) (8) offered specialist projects providing basic skills and employment related support for looked after young people and care leavers. Provision varied from voluntary schemes such as the Princes Trust, to SIPs initiatives and in-house projects run by the throughcare team or Social Work Department. Although not all of these projects were exclusive to care leavers, the majority adopted a holistic approach to developing skills and whilst the main focus was on employability, wider issues such as accommodation, substance misuse and health and emotional well being and development were addressed.

Formal Arrangements

49. In relation to assisting young people to acquire new skills and increase access to education, employment and training, **55% (17) authorities said they had formal arrangements with education, careers, employment or training providers**.

50. Five of these consisted of input from relevant agencies in the preparation process or as part of SIP initiatives. Twelve involved linking up with these agencies to provide training programmes or to

arrange placements. Examples include college taster courses and vocational or pre-vocational training run by various council schemes or voluntary agencies, such as the Princes Trust, NCH and Apex Trust.

51. The majority of authorities (61%) (19) said that they provided young people with information on education, training and employment although this varied across authorities. In some, information was provided in specific sections of leaving care packs. For example, two authorities reported using the NFCA Stepping Out material whilst a further three authorities had developed their own leaving care resource packs.

52. Information was also supplied through direct contact with either staff from careers companies or the various training schemes. Pamphlets, newsletters and college prospectuses from careers, education and other relevant agencies were also widely used. Only one authority mentioned the use of IT facilities as a means of accessing information.

53. Almost a quarter of authorities (23%) (7) relied mostly on verbal information from social work or throughcare staff as part of the care planning and preparation process.

54. Only two authorities said they had no specific information at present and one authority commented that it was an ongoing task to develop this area. Seven authorities did not provide a response to this issue.

Health

55. Evidence indicates that care leavers have significant heath care needs. It is reported that as a group, they have high levels of smoking, alcohol and drug use and high levels of chronic physical conditions and mental health problems. The high incidence of early parenthood also indicates a need for advice on sexual health (Stein & Wade, 2000).

56. The Children (Scotland) Act 1995 Regulations and Guidance, Vol. 2 suggest that:
    'When a young person ceases to be looked after, an assessment should be made of their health needs and clarification of whether any special services need to be in place for them.' (Chapter 7. paragraph 58).

It also suggests that young people should be encouraged to follow a healthy lifestyle and to access the services offered by the primary health care team.

57. In our survey we found that 42% (13) of the local authorities who responded to the questionnaire reported having formal agreements with health organisations to promote the health and development

of young people who had been looked after. Arrangements were mainly with the local health promotions unit.

58. We also found that just under half (48%) (15) of authorities reported having a strategy for promoting a healthy and stable lifestyle for looked after young people and care leavers.

59. Approaches to health included one to one support, group work on specific health issues, the provision of funds to facilitate sport and recreational activities, and information on healthy eating and exercise contained within throughcare/leaving resource packs. 19% of authorities appeared to rely solely on the care planning process or the LAC material to address this issue. Only three authorities outlined specific health programmes. These consisted of: a specific project to target young people looked after and previously looked after, to work on health development and to promote and increase access to health services; a healthy living project which was a joint initiative run over thirteen weeks in a homeless unit, and input from a health visitor during support work sessions.

60. Interpretations of what such a strategy should involve varied considerably across authorities. For example, some of the authorities who said they did not have a health strategy, did in fact have some input from health staff either directly (e.g. group talks) or through the SIPs.

61. Several authorities indicated that the development of strategies with health promotion and other services such as psychiatry, were being pursued at present.

62. In terms of specific health and personal development needs, just under half (48%) (15) of the authorities reported that they had initiatives for working with care leavers on specific issues. 35% (11) of authorities had programmes for dealing with sexual health and/or sexuality, 32% (10) had projects for drug and alcohol related issues and 26% (8) addressed leisure activities.

63. Of the sixteen authorities who did not report specific initiatives, several pointed out that health and personal development issues were nevertheless dealt with as part of the preparation process prior to leaving care.

1. Involving young people in the planning and review of throughcare and aftercare services is important on several accounts: it engenders a sense of ownership amongst services users; it presents service providers with a means of identifying need and assessing the effectiveness of services in meeting those needs; and it uphold the rights of young people as outlined in the Children (Scotland) Act 1995.

2. Overall, we found that local authorities in Scotland were committed to facilitating the participation of young people in all aspects of the service planning and review process.

Development Of Policies, Procedures And Guidance

3. **77% (24) of authorities said that they had arrangements for involving looked after young people/care leavers in the development of their policy, procedures and guidance**. Young people appeared to play a significant role in the consultation process for the Children's Services Plans and three authorities reported that recent surveys of young people had been conducted as a means of evaluating throughcare/aftercare service. Further examples include: young persons consultation groups; working groups which include service user involvement; youth forums; youth groups linked to the SIPs; and close links with Who Cares? Scotland.

Throughcare Process

4. Young people were encouraged to participate in the planning of their own throughcare process through consultation and attendance at care planning and review meetings. Several authorities reported that advocacy via children's rights officers and Who Cares? workers, was available to facilitate the process.

Reviews

5. Ensuring that young people were fully involved in the review process involved similar measures across all authorities. Most highlighted the importance of preparing the young person for the review and making them feel comfortable with the procedures. Some examples include: providing them with a 'user friendly' review report prior to the review; providing easy to understand information leaflets which outline the purpose of the review; assistance in writing their own reports either by staff, Who Cares? workers or children's rights officers; and informal discussions between young people and relevant workers to ensure that their needs and wishes were identified.

Monitoring And Evaluation

6. Over two thirds of authorities (68%) (21) said that young people's views were incorporated into the monitoring and evaluation process for throughcare/aftercare services. This was largely achieved by consultation in the preparation of Children's Services Plans, involvement in focus or screening groups,

routine consultation on various issues; 'client' questionnaires and participating in youth forums. Two of the authorities who do not currently have such procedures in place, commented that progress was being made in this area.

Collecting Information On Throughcare And Aftercare

1. In our survey of local authorities we found that **42% (13) routinely collected statistical information on throughcare and aftercare services.** 23% (3) of these authorities collated the information electronically, 46% (6) collected it manually but said it may be collated electronically in the future, and 31% (4) expected to collate it manually for the foreseeable future.

2. A further 45% (14) of authorities said that statistical information was currently collected but not routinely. All of these authorities collated the material manually.

3. Some examples of the type of information that is routinely gathered by authorities include:

    ▪ data collected on discharge, referral and closure forms.
    E.g. - age, areas of concern/vulnerability, whether the young person is a parent, occupation, accommodation, income at time of discharge and reason for closure.

    ▪ data from throughcare project information system.
    E.g. - number of young people accommodated by age, gender and placement; and percentage of young people who have throughcare plans and their initial destinations.

    ▪ information from intervention referral forms.
    E.g. - number of young people receiving 1:1 intervention or involved in group work and outcomes for these young people including last known residence.

    ▪ information from throughcare referral forms.
    E.g. - date of birth, ethnic group, final in care placement, total number of care placements prior to aftercare, number of moves during aftercare, whether young person is a parent, employment status, disabilities and health issues.

4. Authorities were asked to indicate which data items they thought were appropriate for monitoring and evaluating throughcare and aftercare services and whether this data was or would be collected by them. One authority did not complete this section. The responses of the remaining thirty authorities are illustrated in Table 10.

Table 10. **Data collection on throughcare & aftercare**. *(n=30)*

DATA ITEMS	*APPROPRIATE MEASURE OF ACTIVITY*	*COLLECT AT PRESENT*	*IF NO TO PRESENT COLLECT IN THE FUTURE*
Number of young people aged under 16 in receipt of throughcare services	25	16	8
Number of young people aged 16 or over in receipt of throughcare/aftercare services	24	17	9
Number of young people in receipt of throughcare/aftercare services by type of service	18	12	10
Initial destinations of young people ceasing to be looked after and accommodated at age 16 or over	22	12	13
Length of time each young person has been receiving throughcare/aftercare	21	5	19
Numbers of young people entitled to throughcare/aftercare who are in receipt of this service:			
When they cease to be looked after	22	10	14
six months after they cease to be looked after	21	5	18
one year after they cease to be looked after	21	4	20

5. Suggestions for 'other' appropriate measures for monitoring and evaluating throughcare and aftercare include:

   - the number of young people in receipt of a service two years after ceasing to be looked after;

   - details on offending, youth custody and substance misuse;

   - information on the quality of service received against the type of service delivered;

   - number of planned and emergency moves.

6. Authorities were also asked to indicate which information specific to accommodation was currently collected and which information may be collected in the future. Of the thirty-one authorities who returned the questionnaire, the following responses were given.

Table 11. **Collection of accommodation data.** *(n=31)*

Data type	*Collected at present*	*IF NO TO PRESENT possible to collect in the future?*
number of care leavers offered accommodation in supported housing project and offer accepted	12	14
number of care leavers offered accommodation in supported housing project but offer refused	4	21
number of care leavers offered mainstream accommodation and offer accepted	9	20
number of care leavers offered mainstream accommodation but offer refused	5	23
number of care leavers not offered housing option with support	6	18

7. One authority commented that collecting data on first destinations was not adequate as this often breaks down. It was suggested that tracking accommodation until the young person reached the age of twenty-one would be more useful.

8. Two authorities were in the process of implementing specific databases to monitor accommodation.

Collecting Information On Outcomes

9. Authorities were asked to comment on the difficulties they anticipated or had experienced in collecting outcome data for care leavers.   From their responses the following common issues emerged:

   ▪ Outcome data is dependent on the young person's willingness to stay in contact and share information. Several authorities commented on the 'notoriously' difficult task of maintaining contact with young people. As well as the practical problems of maintaining contact, issues of respecting the young person's wishes if they chose not to co-operate with data collection, were raised. One suggested that the transfer of DSS benefits to local authorities would facilitate contact.

   ▪ The need to implement adequate IT and tracking systems to monitor care leavers and record outcome information. 23% of authorities indicated that they did not have such systems for collecting and collating this information.

   ▪ Staff and time constraints meant that some authorities lacked the 'administrative manpower' to collect and process this information.

   ▪ Several authorities raised concerns over the type and reliability of information. For example, one authority noted that:

   '*one difficulty is the reality that unsettled patterns of living may occur over prolonged timescales. Some young people achieve positive outcomes but their circumstances deteriorate at a later stage.*' (Sla08e)

   Another thought that the outcome categories were too vague and needed to be broken down into further 'hard areas'.

Outcome Data

10. **29% (9) of the authorities who responded to the questionnaire, reported that they routinely collected information on the outcomes achieved by young people** in receipt of throughcare and aftercare. 8% said that some outcome data was collected but not routinely and 61%(19) of authorities indicated that they did not collect outcome data.

11. We found that the absence of adequate data systems and failure to implement formal strategies for gathering outcome information were the main reasons for not collecting this data.

Table 12. ***The categories of young people for which outcome data is collected.*** *(n=31)*

TYPE OF DATA COLLECTED		NUMBER OF AUTHORITIES ROUTINELY COLLECTING DATA
Looked after at home	aged under 16	3
	aged 16 or over	3
Looked after in foster care	aged under 16	7
	aged 16 or over	9
Looked after in residential care	aged under 16	8
	aged 16 or over	10
Moved to independent living	aged 16 - 18	6
	aged 19 - 20	6
	aged 21 or over	4
Homeless young people	Aged 16 or 17	4

12. The areas for which data was collected reflect the main focus of current aftercare provision. Just under half of the thirty-one authorities **(48%) (15) who responded to the questionnaire collected data on accommodation outcomes.** Data collection on other areas such as health and social networks, was less common. For example 23% (7) of authorities collected data on health and 19% (6) collected data on social networks.

13. Chart 5. shows the percentage of authorities collecting specific types of outcome data, whether routinely or otherwise.

Chart 5. Outcome data collection (n=31)

48
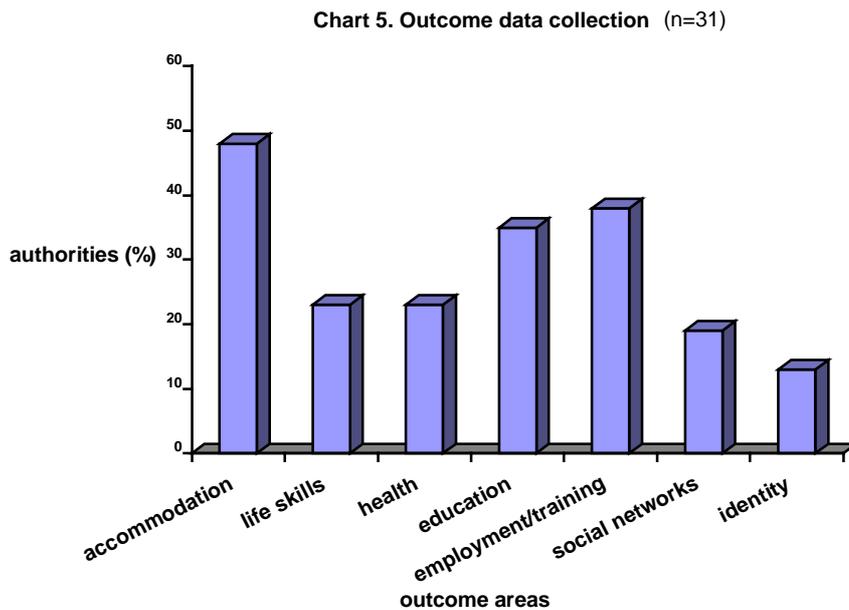
Service Evaluation

14. Local authorities were asked to outline their procedures for monitoring and evaluating throughcare and aftercare services. Of the twenty-two (71%) authorities who provided information we found that services were assessed via a number of means.

15. Just under a quarter (23%) (5) of these authorities used the Children's Service's Plans and reviews to *monitor* and evaluate services. 18% reported that recently conducted or planned 'Best Value' Reviews had provided a vehicle for this. Monitoring and evaluating services was also conducted via the LAC material, quarterly or annual reports and annual performance reviews. One authority indicated that the SIP initiative was in the process of identifying a means of monitoring and evaluating the services in their area.

16. The following table shows the number of authorities who have procedures for monitoring and evaluating throughcare and aftercare services to *sub-groups* of the looked after population.

Table 13. Procedures for monitoring and evaluating throughcare/aftercare services to sub-groups. *(n=31)*

LOOKED AFTER POPULATION - SUB-GROUPS	NO OF AUTHORITIES WITH PROCEDURES
Young people from minority ethnic backgrounds	4 (13%)
Young parents	7 (23%)
Physically disabled young people	5 (16%)
Learning disabled young people	6 (19%)
Young people with mental health problems	6 (19%)
Young people with substance misuse problems	5 (16%)
Young offenders	7 (23%)

17. Responding authorities provided very little information in respect of procedures for monitoring and evaluating these services. Some reported that care plans or LAC material were used as a basis for monitoring the services and one made reference to joint evaluation procedures with other relevant providers, e.g. health services. Several authorities acknowledge the need to develop monitoring and evaluation systems and suggested that time and resource had so far hindered progress in this area.

4. Findings from local authority study

This section of the report contains the results of stage two analysis based on the descriptive survey and the follow up study.

4.1. Throughcare & aftercare in three authorities

The three local authorities selected to participate in stage two of the research study were chosen to represent the main models of services provision as identified by the policy survey and the geographical diversity of Scotland. Demographic and policy specific information was gathered during the initial policy survey, the area selection process and policy interviews at T2. A brief outline of each of the participating areas is presented below.

1.   County

Background

County has a total population of 349,200 people with 99.2% of the population classified as white, 0.25% Pakistani, 0.1% Black, 0.1% Indian, and 0.2% as other. Just under a quarter of the population are aged 18 or less.

Southern and western County are predominantly large urban areas with an industrial economy - a mix of traditional industries, electronics and precision engineering combined with a large service sector - while the east is mainly agricultural and has a small tourist industry.

The overall unemployment rate is just under 9%. However, the heritage of the industrial past has left significant areas of high unemployment and social deprivation. Nearly 25% of school age children are living in families receiving financial support to provide school clothes and 16.5% of school age children live in households dependent on income support or Job Seekers Allowance. A further 12.5% of children are in families in receipt of Family Credit or Disability Working Allowance. In County as a whole, the rate for looked after children is 5.4 per 1000 compared to a Scottish average of 10 per 1000.

Throughcare and Aftercare Services

Organisational Framework and Approach

County's specialist Throughcare Project was set up in 1995 as a planned response to the new throughcare and aftercare provisions contained within the Children (Scotland) Bill. It is a specialist service within the council's Social Work Department. During the period of the research the project employed a team manager, three social workers and two part time home carers and covered the whole of the area.

At the time of the policy survey (April 2000) the Throughcare Project's staffing costs were £114,000. More recent data gathered at the time of the policy interviews (September 2001) showed the overall budget for April 2000 - March 2001 to be £174,607, and estimated Unit Costs per young person per year £1559. This excludes the Link Up project costs.

The main approach is to offer a specialist service to young people aged 15½ to 21 years who are in care or who have left care to live independently. For young people who live at home who are eligible for services, these, where agreed in advance, will be provided by the local Children and Families team.

In January 2000 the Link Up project started and has, in effect, become another arm of the same service. It is managed by the throughcare team manager and works with excluded young people who face multiple barriers in accessing the local labour market, or in making sustainable progress towards education, employment or training. It targets young people in the process of leaving care; those in receipt of aftercare and young people living away from home in supported accommodation. It employs a careers advisor, a senior youth worker and two employability advisors.

The dedicated Throughcare Project and Link Up are seen as offering an integrated and specialist approach. This work is set in a wider policy framework of Corporate Parenting -*'the responsibility carried by the Council as a whole in relation to children and young people who are looked after in the public care system. Within this it was recognised that priority also needs to be given to young people leaving care or who have previously been accommodated in the care system.'*

Eligibility for Throughcare and Aftercare
In the twelve-month period up to May 2000 (questionnaire completion) 111 young people received throughcare and aftercare services from the Throughcare Project. 35 young people were in receipt of throughcare services and 76 young people were in receipt of aftercare services.

Policy and Procedural Framework
There is a designated lead officer responsible for throughcare and aftercare services. The arrangements for providing throughcare and aftercare are contained within the Children's Service Plan and there are Authority wide policies and procedures. Guidance is provided for social workers. A care leavers guide 'The Biz' is distributed to young people - although this is currently being updated.

Throughcare
Preparing young people for leaving care is based on meeting each individual's needs as distinct from the provision of a formal programme approach targeted at children's homes or foster care.

Identifying throughcare needs is carried out as part of the care planning and review process when young people reach 15 years of age. The work required, the workers responsible and the target dates for tasks are documented at the outset in an Initial Action Plan. Ongoing work is recorded in the Review Action Plan. The Looking After Children Materials are not currently in use in County.

Young people are involved in the whole process, by participating in the preparation of the care plan, attending reviews and completing their own reports, and in the construction of the Initial Action Plans.

Aftercare

Personal Support

Eligible young people are referred to the project usually through the care planning process detailed above. In addition the project also considers referrals from other agencies and young people can refer themselves. They will then be allocated a specialist key worker who will be responsible for offering personal support and guidance in relation to a range of areas: accommodation, finance, practical living skills, emotional support - and anything else in which the young person seeks assistance!

Accommodation

As part of its corporate parenting strategy, the Social Work Department works collaboratively with Housing. Young people leaving care are recognised as a priority group for housing needs assessment and two Homeless Officers from County's Council Housing Service act as link workers for the Throughcare Project. Also, there is a Supported Lodgings Scheme, currently offering 21 places to young people, aged 16-21, who leave care to live independently. Landlords and landladies offer home comforts as well as some additional support.

Other available accommodation options include a supported hostel, semi-independent flats and council tenancies.

Financial Assistance

Financial help provided includes: income 'top up' payments, assistance with employment, further and higher education; accommodation subsidies; and meeting emergencies.

During 2000 the Throughcare Project budget was £30,500 and an additional £5,850 was held by the nine Children and Family teams.

Education, Employment and Training

As part of the Corporate Parenting Strategy, the Link Up project creates individual pathways for young people into education, employment and training. Following on from individual assessment young people are offered a wide ranging programme which includes: one to one counselling; careers open drop in sessions, focused group work sessions covering confidence building, personal presentation, employability skills, job search skills, assertiveness skills and interview techniques; a young mothers education initiative group; outdoor education courses and a young people's consultation group.

An evaluation of the project (for the year 2000) based upon 55 young people, showed that 35 (64%) 'achieved desired progress'.

Health and Personal Development

In the main, advice on health and development is part of the key worker role. In addition, the project is involved in a specific initiative to improve sexual health by participating in the condom distribution scheme, whose primary goal is to prevent the spread of HIV.

Also, it has been acknowledged that the mental health needs of young people (aged 15-25) in County need to be a greater priority and there are proposals to set up a multi agency group '*to establish drop-in facilities for young people... which would be developed along similar lines to the model pioneered by Penumbra following the needs of young people who use them.*'

The model of service delivery in County is of a central specialist service, providing primary support to young people unable to return home, at the hub of intra-Departmental throughcare and aftercare services, and wider inter-agency networks.

Monitoring and Evaluation

County have developed an electronic database, which is used to collect and collate data on throughcare and aftercare services. By September 2001 this has been used to contribute to Performance Review Information by providing essential data on throughcare and aftercare services. This included outcome data at two points in time: the time of discharge from care and the time when the case was closed. At both these times data is collected on age; areas of concern and vulnerability; occupation; accommodation; and at time 2 only, reasons for closure. It is intended to develop the database further in order to collect more outcome data.

2. CITY

Background

City is Scotland's largest city with a population of 611,440. 169,000 (27%) are children and young people under 21 and approximately 9200 (5%) of these are from ethnic minority groups largely consisting of Pakistani, Indian, Chinese, Asian and Black groups.

City is an urban area and one of the UK's major manufacturing centres. Its industries include engineering, clothing, publishing and food and drink. City has the highest unemployment rate of any council in Scotland, male unemployment is 16.1% and female 5.45%, compared to a Scottish rate of 9.8% and 3.3% respectively. Almost 70% of those unemployed are aged 20-24.

Poverty has a wide impact upon the lives of families, children and young people. The Scottish Office family stress indicator for City (derived on a combination of data on lone parents, unemployment, occupancy norms, large families and long term illness) at 221 is the highest in Scotland (compared to a national average of 34). These levels of stress are also reflected in the numbers of young people looked

after by local authorities in Scotland. City has 17 children per 1000 of the population looked after compared to a national average of 10.

Throughcare and Aftercare Services

Organisation and Approach

Throughcare and Aftercare services are the responsibility of City Council's Social Work Department. A specialist leaving care team (Leaving Care Services) is the organisational centre with responsibility for assessing all young people in City who are looked after and accommodated at 15 years of age. If the young person's care plan indicates that they are unable to return home the team will be responsible for primary support services. If the young person's care plan indicates an alternative plan, such as rehabilitation, then the specialist team will monitor this after six months and review future needs.

The team has a central office and employs 40.5 specialist staff. A careers advisor and two nurses are also based at the office. At the time of the policy survey (April 2000) the service cost just under £1M (£989,444), 93% funded by City and 7% from external sources. No data on Unit Costs for throughcare and aftercare services was available.

In its primary support role the team is directly responsible for a group work programme, supported carers and supported tenancies. The team is also responsible for formal links with the Department's nine area social work teams and residential services.

There are corporate links with City's Housing Department to provide emergency accommodation for care leavers. In terms of inter-agency links, the voluntary sector is also contracted to provide services through Barnardos 16+ project as well as a range of accommodation and residential care projects.

The City's Social Work Department are also partners in the Big Step, City's Social Inclusion Partnership (SIP) 'working for young people leaving care in the city'. The Big Step aims through partnership approaches to improve services for young people leaving care. It is currently working on four fronts: research and information; education, training and employment; independent living; and health and well being.

Eligibility for Throughcare and Aftercare

All young people who are looked after and accommodated in City - at home, in foster care and residential care (children's units, residential schools and secure accommodation) - aged 15 are referred to the specialist Leaving Care Services team to decide what throughcare and aftercare services they need.

In April 2000 (policy questionnaire), 301 young people were eligible for throughcare and 342 for aftercare. The number of young people leaving care aged over 16 is approximately 130 each year. As detailed above, the specialist leaving care team works mainly with young people who are not returning home. In

April 2000, they were in contact with 330 young people and in April 2001 364 including both new and ongoing young people, aged 15-24.

Policy and Procedural Framework

There is a designated lead officer for throughcare and aftercare services and the Children's Services Plan and annual review outlines the arrangements for providing throughcare and aftercare services. Operational guidance and procedures are issued to staff. A 'Welcome to Leaving Care Services' leaflet is given to young people.

Young people's views are actively sought by the Department. They have been consulted on major reviews and policy developments including departmental policy (children's services); new funding bids (youth arts programme; mental health development fund); new activities (sports group) and service reviews (Best Value Reviews; tenancies and carers services).

Throughcare

Young people aged 15 living in foster care or residential care and planning to move to independence are allocated a worker from Leaving Care Services who, in consultation with the young person, their family and relevant workers, prepares a Throughcare Assessment Report. This identifies their preparation and support needs, including a plan for implementation, time scale and resourcing. The throughcare assessment is carried out using a life skills pack, *The Stuff - the young person's transitional guide to independence*. Identified needs are met through one to one work or group work. The Looking After Children Action and Assessment Records are not currently being used.

Aftercare

Personal Support

Young people receive personal support from a specialist leaving care worker if they are moving to independence or an area team social worker if they are going home. In addition, Leaving Care Services provide a daily duty system for care leavers who are facing particular difficulties or emergencies - destitution, evictions, homelessness, addiction problems, emotional trauma and mental health emergencies.

Also personal support is provided by drop-in groups for care leavers and a weekly group specifically for care leavers with their own children. Both groups have life skills and problem management approaches along with leisure and recreational features.

Accommodation

Leaving Care Services provide and purchase a range of supported accommodation.

First, 48 supported carers who provide a full time family support setting for 34-40 young people and a respite, emergency resource for up to 5 young people.

Second, 17 supported tenancies which provide accommodation with external support for 23 young people.

Third, Leaving Care works in partnership with 9 supported accommodation units and a range of voluntary organisations including Barnardos 16+, to provide approximately 35 places for care leavers.

Financial Assistance

Young people receive £2500 start up grant when moving to their own home and a further £500 for each child. In addition, discretionary assistance may be given to 'top up' income, meet accommodation costs, assist with employment or further and higher education, or meet any emergencies. The annual budget amounts to just under £2m - but this includes accommodation subsidies for all homeless young people.

Education, Employment and Training

Leaving Care Services provide specialist employment and training support for young people through the Launchpad Project of individual and group work support. In addition, Social Work Services and City Building have collaborated in the development of a joint training programme for care leavers, which provides employment, training and apprenticeship opportunities.

Health and Development

In addition to individual work undertaken arising from the throughcare assessment, Leaving Care Services provides an emergency destitution and duty system. Also, during the course of the research a number of new initiatives have been developed: six new drug worker posts were created to work with young people in care and care leavers to help them address their addictions; working with young prostitutes; and the provision of a nursing service for care leavers.

Monitoring and Evaluation

During the period of the research an electronic database was set up to collect statistical information on throughcare and aftercare services. Currently data is collected on young people aged 15-24 who are in contact with Leaving Care Services This includes data on placements, age and gender and accommodation after leaving care. There is no information collected in respect of young people leaving care who are not supported by either the area team social worker or residential social worker. However, City and the SIP are planning to set up a City wide tracking system for all young people leaving care. This is due to be piloted in Spring 2002.

3.   Shire

Background

Shire is a predominantly rural area in the North East of Scotland with a population of 226,260. 99.5% of the population is white and just over a quarter live in the five main towns. 7% of the population are pre-school age, 16% school age, 62% working age and 15% retired. The population has a significantly higher proportion of younger age groups than the rest of Scotland, reflecting recent employment driven in-migration.

Traditionally, its economy has been dependent upon agriculture, fishing and forestry and related processing industries. However, since the mid-1970's, the emergence of the oil and gas industries and the development of tourism have broadened the Shire's economic base and led to rapid population growth. The service sector currently accounts for over half of employment (54%), manufacturing, construction, oil and gas (23%), and the primary sector - agriculture, fishing and forestry 5%.

Unemployment stands at 2.6%, lower than either Scottish or UK rates. Shire also scores lowest on the Scottish Office family stress indicator (derived from a combination of data on lone parents, unemployment, occupancy norms, large families and long term illness). Shire's rate for looked after children is 7 per 1000 compared to a Scottish average of 10 per 1000.

Throughcare and Aftercare Services

Organisation and Approach

Since 1998 Shire has had a joint Housing and Social Work Department. All childcare services, including throughcare and aftercare, are provided by children and family social work teams. These are located in the North (1 Senior Social Worker and 5 Social Workers) and Central and Southern (1 Senior Social Worker and 7 Social Workers) divisions of the County.

Shire is not able to provide unit costs specifically for throughcare and aftercare services.

The main approach during the period of our research was non-specialist, social workers having responsibility for the range of child care work within their caseloads. However, although this was the main approach there were differences within the Shire. Whereas in Central and South divisions throughcare and aftercare were entirely non-specialist at the outset of the research, in the North, aftercare was carried out by the Barnardo's 16+ team. Also, during the course of the research, the Southern Division employed a half time specialist aftercare worker and the Central Division appointed a full time leaving care worker.

In this hybrid model, during the period of our research, all eligible young people from the Central Division and the majority from the Southern Division were receiving non-specialist services, whilst most of those

from the North received specialist services provided by Barnardos 16+ project. In all three Divisions, the team social workers held case responsibility.

There are two distinctive features of the approach. First, the development of individual tailor made responses, especially through the use of the Looking After Children Action and Assessment Records. Second, the commitment to involving young people both at an individual and a wider policy level.

Eligibility for Throughcare and Aftercare

Young people looked after at home, in foster care and living in children's homes and those moving to independent living were eligible to receive throughcare whilst they were looked after and aftercare services up to the age of 21.

However, during the period of the research there was no central collation of data for this age group - although this is planned from 2002 when the service is due to be re-organised. In response to the policy questionnaire, it was estimated that 105 young people had been in receipt of aftercare services in the twelve-month period up to the end of May 2000 (including new and ongoing cases).

An independent IT consultant employed by the authority identified 217 young people, aged 16 and over who ceased to be looked after since April 1996, comprising 101 young people leaving foster or residential care and 116 from being looked after at home. On this basis, and assuming equal year divisions (between April 1996 - May 2000) this would suggest 54 young people each year, 25 from foster or residential care and 29 from home were eligible for aftercare services.

Policy and Procedural Framework

Shire employs a lead officer with responsibility for throughcare and aftercare services. The arrangements for providing throughcare and aftercare are contained within the Children's Services Plan and written policy, procedures and practice material are provided separately in each of the three areas. Guidance is made available to staff, foster and residential carers, young people and the voluntary sector.

There is a strong commitment to involving looked after young people on an Authority wide level. This has included a young person's reference group for the Children's Service Plan; commissioning the Children's Rights Officer and Who Cares? Scotland to consult with young people on the Best Value Review on residential childcare; Who Cares? Scotland surveying educational issues for young people living away from home; and exploring the setting up of local support groups for looked after young people.

Throughcare

Preparing young people for leaving care combines both individual and programme approaches. The Review process and the use of the *Looking After Children Assessment and Action Records* are central to planning and meeting individual needs. In addition, there is a planned throughcare programme for young

people aged 14-16 living in children's homes. Although not described as a formal process, preparation is seen as part of the foster care role in relation to young people of this age group.

Young people are seen as active participants in the throughcare process - by their involvement in the planning process with their social worker and in attending reviews. This is part of a wider commitment to empowering young people through the employment of a Children's Rights Officer by the authority and the involvement of young people in Who Cares? Scotland.

Aftercare

Personal Support

Young people leaving care in the Central and South areas will continue to be the responsibility of their area team social worker. In the North, the Department have contracted Barnardo's 16+ to provide a specialist support service - although case responsibility is held by the social worker. In addition, reductions in the number of young people living in children's homes provided an opportunity for residential social workers to offer aftercare support to a small number of young people they had been looking after. In the Shire as a whole, area team social workers, specialist workers and residential workers are involved in providing individual personal support.

Barnardo's 16+ provides an outreach service in North Shire to young people who have been looked after or accommodated as well as other vulnerable young people referred by the Department. They employ a project leader, four outreach workers and a housing development worker. As well as providing individual personal support they have a project base, a Drop In service and offer Short Assured Tenancies in partnership with a housing association. They receive 80% of their funding (£164000 a year in 2000 – 01) from Shire Council.

Accommodation

As a joint service, Housing and Social Work work collaboratively, and with other housing providers, to provide a range of accommodation options for care leavers. It is Departmental policy that those in foster care can remain with carers beyond 18 if this is agreed by all key parties.

Other provision throughout the county includes supported lodgings, a staffed hostel and staff supported semi-independent flats, independent tenancies and a foyer. Young people's choices of type of accommodation and location are taken into account when planning accommodation but it is not always possible to meet preferences given limitations on availability and locality including accessing support.

Contingency arrangements include keeping beds available in foster and residential care on a short term basis and integrated Housing and Social Work policy and procedures in relation to all 16 and 17 year olds presenting as homeless.

Financial Assistance

Shire provide a leaving care grant of up to £1700 when young people leave care (cease to be looked after) and up to £40 per week income supplementation for those aged 16 and 17. They may provide financial assistance to young people for further or higher education, accommodation subsidies or income 'top up' payments. During 1999/2000 this sum totalled £75,185.50.

Education, Employment and Training

Helping young people with education, employment and training is built into the throughcare planning process and aftercare personal support.

Health and Personal Development

There are no specific initiatives targeted at young people leaving care in relation to sexual health and sexuality, drug and alcohol use, and leisure. However, during the course of the research a Child and Adolescent Psychotherapy service dedicated to looked after children including young people receiving aftercare was introduced.

Monitoring and Evaluation

Shire do not routinely collect statistical information on their throughcare and aftercare services but are intending to do so in the future.

At the time of the research they were implementing the Looking After Children Materials which has the potential to provide outcome data for all looked after young people.

Outcome data is not collected on young people receiving aftercare services.

Evaluation of throughcare and aftercare services includes Inspection Unit reports, Best Value Reviews, annual reports from Shire's Children's Rights Service and Who Cares? Scotland.

Most young people, whether they are living with their own families or in foster care or a children's home, experience some problems during their journey to adulthood. Care leavers share a lot in common with other young people, but research evidence points to some important differences.

In comparison to their peers in the general population, young people leaving care have to cope with the challenges and responsibilities of major changes in their lives, e.g. 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. (Stein, 1997)

This chapter aims to provide a descriptive account of moving on from care in three different local authorities, County, City and Shire. Information on the general characteristics of the total sample of young people including the process of leaving care, family ties and social support, health, offending, leisure activities and educational attainment, starting points in terms of accommodation and employment, was explored to put together a picture of what it means to move on from care.

Information was gathered from young people who were at different stages of moving on so we have used both T1 and T2 information for certain issues to give as complete a picture as possible for the sample as a whole. The majority of the information is based on young people's perceptions.

<u>Describing The Sample</u>

Analysis was carried out on data from up to one hundred and seven young people who took part in the current study. Over half of the sample (n=58, 55.1%) came from City with 24.3% coming from County and 20.6% from Shire. The average age of young people entering the study was 16.6 years and ranged from 15 to 20 years old (sd 0.94). This varied slightly across the areas with County having the lowest mean age (16.19) whilst City and Shire were similar with means of 16.83 & 16.86 respectively. (p = 0.005). Gender was evenly represented with 50.9% of the total sample being female and 49.1% being male.

The vast majority (99.1%) of our sample described themselves as white whilst the remaining 0.9% described themselves as being of mixed origin. This was echoed in the worker's perception of young people's ethnic background with 96.3% being described as white and 2.5% being described as other white background. Ethnicity was not explored further in subsequent analysis.

Over a tenth (12.1%) of young people in the survey reported having a long-term physical health problem and 4.7% reported having a disability that affected their daily life. Almost a third (31.1%) said they had a learning difficulty.

Information provided for 97.2% of the total sample (n=104) showed that young people entered the study within 1 to 24 months of 'legally' leaving care or moving to independent living. Most young people (62.5%) entered the study within six months and all but 2% entered within 18 months (mean = 6.62 months, mode = 3 months, sd = 5.10). Young people were therefore at various stages of their transition when they joined the study.

Support workers (i.e. social workers or specialist leaving care workers) were asked to specify the looked after status of young people at the point of their referral to the study. Due to the incidence of delayed referrals and failure to return or fully complete referral forms we were unable to gather consistent information for a number of cases. We also found that some of the supplied information did not correspond with subsequent details provided by the young person and/or worker. An indication of the young person's status was therefore obtained by sorting through data provided by young people and their worker at T1 and T2, and matching it with the information given during the initial referral of the young person to the study, where available.

Information on the looked after status of young people at the point of entry to the study, as detailed in chart 6 below, shows that over a third (n=41, 38.3%) of young people entering the study were care leavers (either looked after at home or away from home) who had moved to independence. 'Other' status included being homeless and remaining with grandparents.

Chart 6   Status Of Young People Entering The Study (n=107)
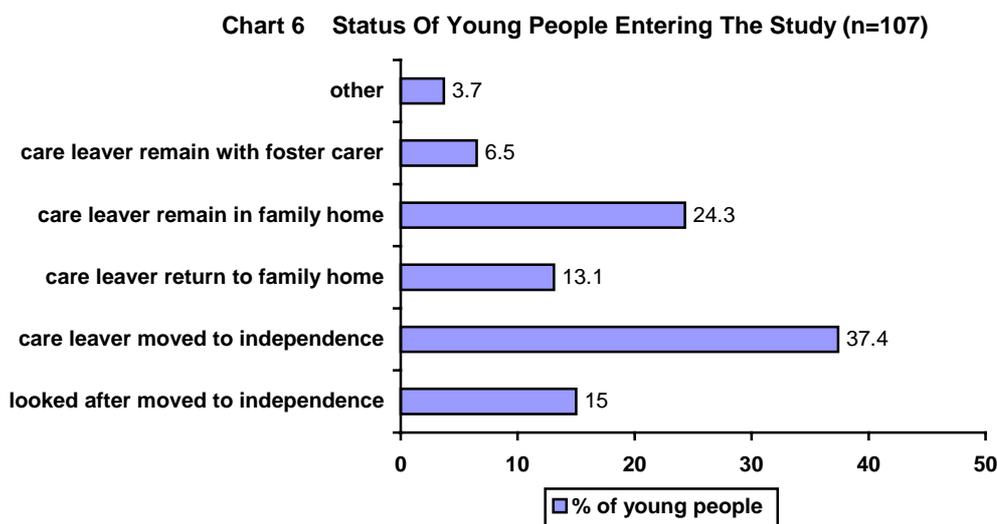
An area analysis was carried out to provide an indication of the make up of each of the area samples and to see whether certain status types were more prevalent in any of the three local authorities. Bivariate analysis revealed a significant relationship between the young person's status at entry to the study and the local authority area from which they were recruited (p = 0.003). As chart 7 below shows, whilst very few young people from Shire had remained in the family home (7.5% of the status group and 9.1% % of the

area group) and none had returned home, just under half (44.1%) of young people from City had either remained (30.5%) or returned (13.6%) to the family home. Remaining with foster carers after legal discharge accounted for 8.5% of City young people and 9.1% of those from Shire. However, no one from County had done so. As explained earlier, most young people had entered the study within a few months of leaving care or moving in independent living. However, extended recruitment in all three areas had introduced a group of young people who had left care almost 2 years prior to joining the study. When this group (R) was removed from the analysis the relationship between status and area remained significant (p >0.001). The chart below provides a breakdown of the total sample in each of the three areas, by looked after status at entry to the study.

**Chart 7.   Status At Entering The Study By Local Authority Area**
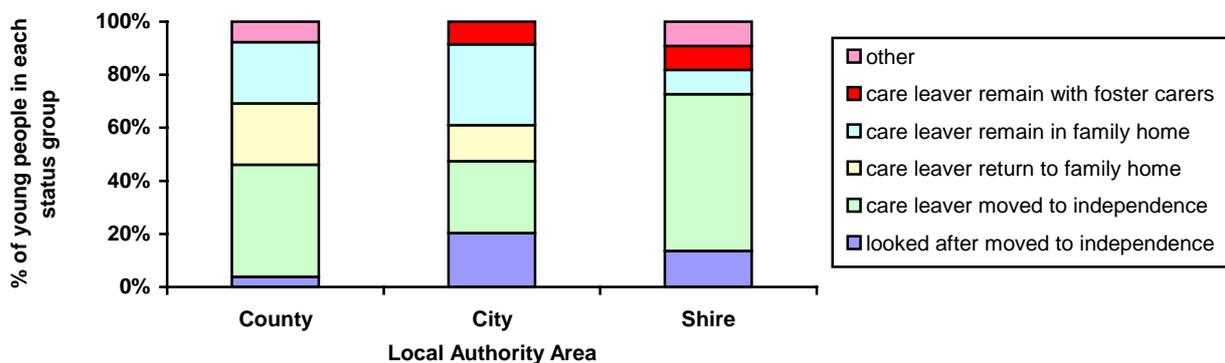
Looked After Young People

Legal Status

Background information on young people's last care episode was gathered from workers at T1. Information on the type of order was supplied for 78.5% of the sample as detailed below.

Chart 8.   Legal Status of Young People - Last Care Episode (n=84)
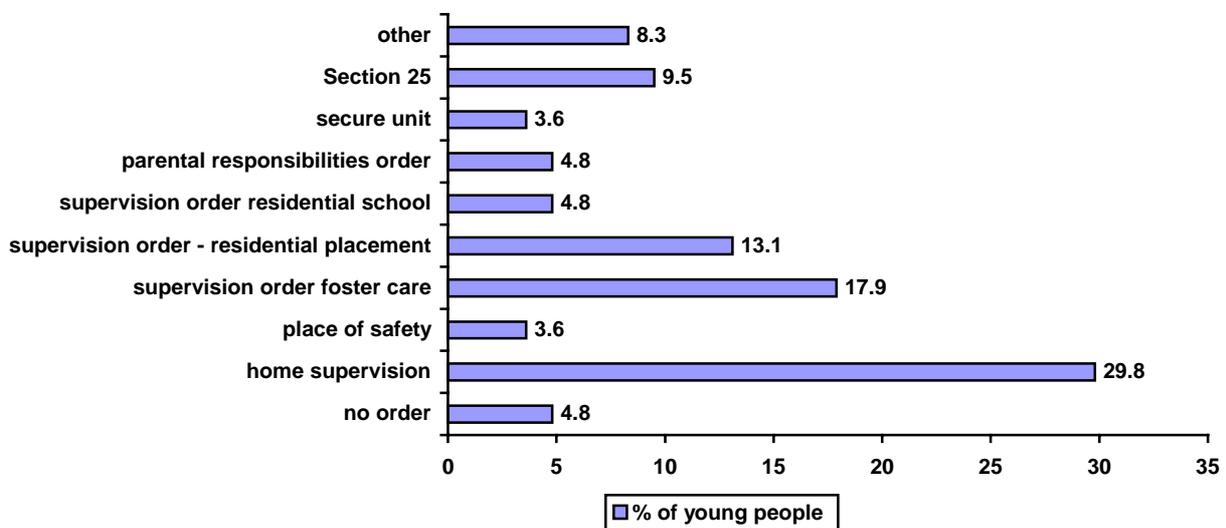
National figures for the year up to March 2000 indicated that almost half (48%) of currently looked after young people were on a supervision requirement at home. (CLAS, Scottish Executive, 2001). In our survey of young people who had left care or moved to independence, just under a third (29.8%) of those for whom we have information had been looked after on a home supervision requirement during their last care episode. There was no significant relationship between the young person's legal status and local authority area (p = 0.054).

Workers were also asked to indicate the main reason for the young person becoming looked after during their last care episode. The most common reason, as shown below, was 'parents unable to provide care' (24.3%). 'Other' reasons included death of parents, family rejection, and sex offences committed by the young person.

Chart 9.   Main Reason For Being Looked After - Last Episode. (n=84)

Reason	% of young people
other	5.6
substance misuse	0.9
offending	6.5
school non attendance	11.2
moral danger	9
beyond control	17.8
schedule 1 offender in home	9
victim of sexual abuse	10.3
parents unable to provide care	24.3
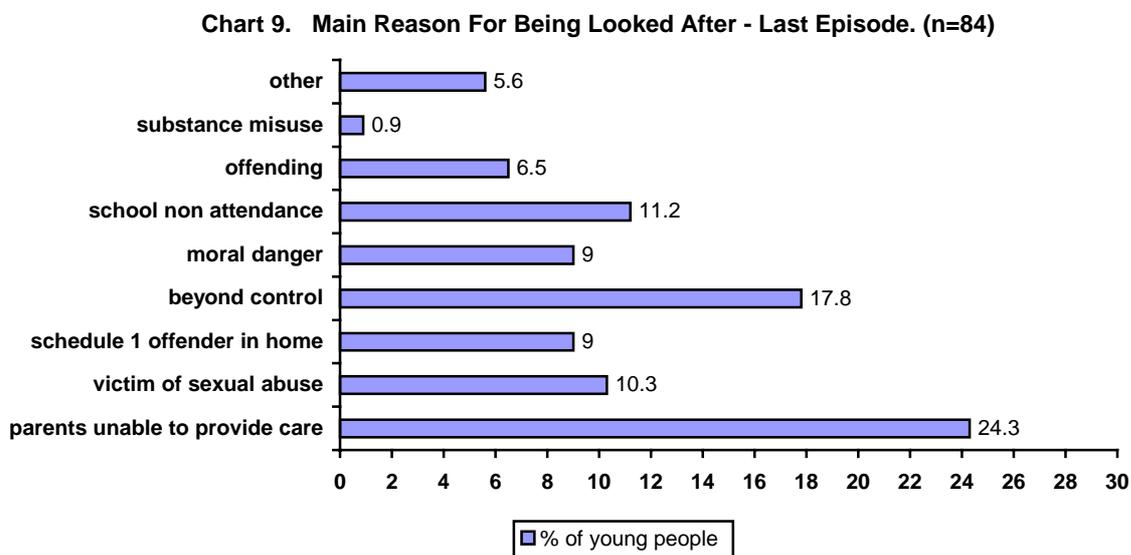
Care Placements

Information on *initial* placements was supplied for 69.2% of the sample (n=74). **The majority had been placed away from the family home** with 32.4% being placed in foster care, 21.6% in children's homes, 6.8% in residential schools and 5.4% placed with other relatives. A small proportion (1.4 % each) were placed in secure units, independence units and supported lodgings. Over a quarter (27%) were placed in the family home.   'Other' placements, including an assessment centre and a residential reception unit accounted for 2.7% of those young people for whom we had information.

Most young people from County and Shire had been placed in foster homes (41.2% and 68.4% respectively) in comparison to a tenth (10.5%) of young people from City. Family placements accounted for around a third of young people from County (35.3%) and just over a quarter of young people from City (28.9%).   Residential placements meanwhile, were far more apparent in City with a third of the area sample being placed in a children's home (34.2%) compared to 5.9% in County and 10.5% in Shire. Additionally, all young people who had been initially placed in a residential unit came from City.   The relationship between local authority area and initial placements of young people during their last looked after episode was highly significant (p >0.001).

Information on the *last* placement for young people was supplied for 76.6% of the sample as detailed in chart 10 below.

Chart 10. Last Placement Prior to Leaving Care/Moving to Indepedent Living (n=82)

Placement	% of young people
other	4.9
independence unit	3.7
secure unit	1.2
residential school	11
children's home	9.8
foster home	29.3
other relatives	8.5
family home	31.7
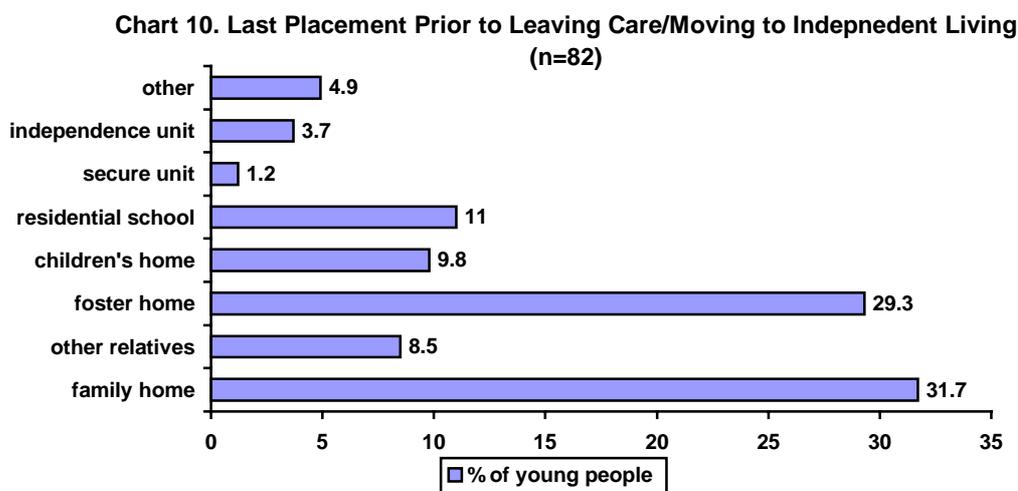
Time in Care

Young people in the sample (for whom we had relevant information (n=80)) had been looked after between one month and sixteen years prior to moving to independent living or being discharged from care. The average length of time they had been looked after was 32.9 months (sd = 35.38). This varied across the three research areas and ranged from 18.8 months in County to 34.3 months in Shire and an average of 40.9 months in City. The difference in the average number of months across the three areas was not statistically significant (p =0.098) nor was there any significant difference between males and females in the sample (p =0.786).

Placement Moves

Previous research has highlighted the tendency for looked after young people to experience movement and disruption in their lives (Stein 1990, Biehal et al, 1995) and has emphasised the importance of continuity and stability in providing a basis for positive life chances. Placement stability has been associated with improved outcomes in education, career and relationship skills (Biehal et al, 1995).

In the current study, the average number of placement moves during the last care episode of those for whom we have information (n=81) was 2.47 (sd = 2.97). The number of placements moves ranged from none to fifteen moves although the majority (65.4%) had experienced two moves or less.

When those young people who had been looked after at home were removed from the analysis the average number of placement moves for the remaining cases (n=57) rose to 3.07 (sd=3.12) and we found that **only 7% of young people who had been placed away from home had remained in the same placement** throughout their last care episode. The majority of these young people as chart 11 shows, had experienced less stable placements with a third having moved on at least four occasions.

Chart 11. Placement Moves During Last Care Episode (n=57)
for young people placed away from home
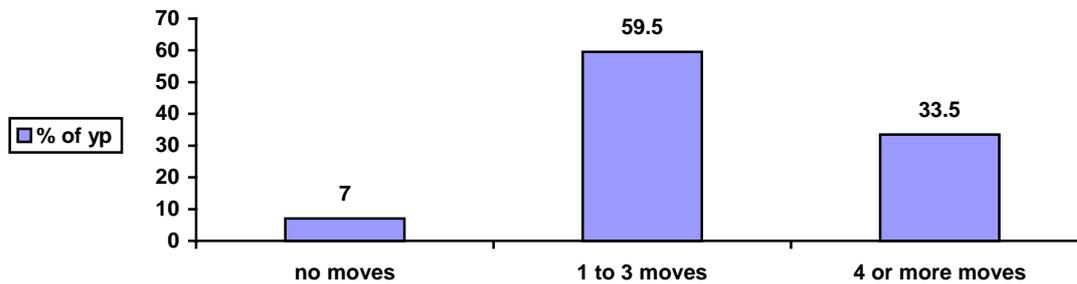
There was no significant relationship between the number of placement moves experienced by young people placed away from home and either their local authority area (p=0.072) or gender (p=0.400). There was however, evidence of a moderate positive correlation between the number of placement moves experienced by young people placed away from home and the amount of time they had been looked after during their last care episode. (Kendall's tau b = 0.238 p=0.017, N=55)

On average, young people placed away from home had been looked after for thirty-eight months during their last care episode. With the average for this group totalling three moves, some of these young people may have moved on average at least once per year.

Young People's Views: good and bad things about being in care

Young people who had been looked after away from home were asked to sum up some of the good things and bad things about 'being in care'. Experiences were mixed, both within and across individual cases.

The **positive** aspects of care encompassed issues of company and comfort such as having someone to talk to who understood and had similar experiences, as highlighted in some of the following responses to '*what are the good things?'*

> *"Having people there when I needed them."*   (Lewis, County)

> *"I could speak quite freely, there was always someone to talk to."* (Ellie, City)

> *"[Having] people I could talk to, people who understood me who could listen to me and help me."*   (Alan, City)

Feelings of safety, belonging and being supported were also common:

> *"The good things were a bit of security with staff there all the time and I could relate to the other young persons in the unit."* (Susan, City)

Tony from City whose last placement was with foster carers, summed up the good aspects as follows:

> *"I was safe, I could talk about my problems. I was looked after properly. I was loved."*

And Laura from Shire, who had had two foster placement moves told us that the good things included:

> "Having a very stable environment where you can be at ease and have people to talk to when you need help. Also the longer you stay in care the more you feel part of the family."

 The idea of escape from family or a troubled situation also emerged:

> "It's really good, escaping one situation and going into a more stable home environment. Foster carers are brilliant and treat you as one of the family." (Emma, County)

> "When I was in care I was well away from that bastard of a stepfather my mother had the misfortune to marry."   (Jay, City)

Material advantages and socialising were also mentioned, such as having holidays or day trips out, getting money for new clothes or following hobbies, or educational opportunities.

Amongst some of the **negative** aspects of being looked after were feelings of isolation and being cut off from family and friends. Many young people expressed similar sentiments to Emma from County:

> "No matter who your family are you are going to miss them from time to time. .no matter you feel rejected and you resent that. At times you wonder whether they [foster carers] want you or is it just a job, not that mine were like that, but some."

The feeling of being labelled or discriminated against also came up:

> "Being accused of things I hadn't done by the public, getting hassled by them.   [The] assumptions they made."   (Lewis, County)

As did lack of privacy and feelings of being restricted, punished or imprisoned such as Andy from County who felt he was being *"held like a prisoner"* or Brian from City who said the bad things were being "restrained by staff" and told us "*even if it was the best place I would still have hated it because it was not home."*

Not having the freedom to make decisions or have contact with relatives and friends and ' keeping to rules' were common issues:

> "The most bad thing about being in care was being so far away from home and not being able to see your friends and family when you wanted. You were only allowed to contact them when they said you were." (Rona, County)

Sharon from City who had moved five times summed up her experience of care in terms of the good and bad aspects:

> "You know you will be looked after if your own parents can't look after you properly. Leaving care [staff] and social work try to make sure you don't have a hard time of it [but there's] not a lot of choice about where you go and a lot of moving around. Children's homes can sometimes get overcrowded [and] people tend to discriminate against you when they find out you were in foster care…previously I was in a children's home and it was staff's choice to move me on."

Moving On

"From the age of 7 I always dreamed of being 16 so that I could leave care. I never thought it would be like this." (Brian, City)

"I like the way things went from moving. I think things moved smooth from moving from my foster parents to here [supported lodgings]. I'm happy with the amount of support I got…my link worker has been the most, and my landlady. Now and again if I can't get the advice from them my foster family are always there." (Lucy, City)

Leaving Care

For many young people who are looked after, reaching the age of sixteen signifies a turning point in their lives. For too many it is the first chance of independence and they take it whether or not they are ready.

The majority (85.1%) of young people in the study had legally left care by T1, just over a tenth (14.9%) of the sample were still looked after but had moved to independent living. Most had done so at 16 years of age.

Information on the age at which young people left care was provided for 96.7% of the care leaver group and is presented in Chart 12 below. The mean age for young people leaving care was 16.15 years old and **the majority of young people (94%) had legally left care before their 18th birthday**.

Chart 12.   Age at Leaving Care (n=88)
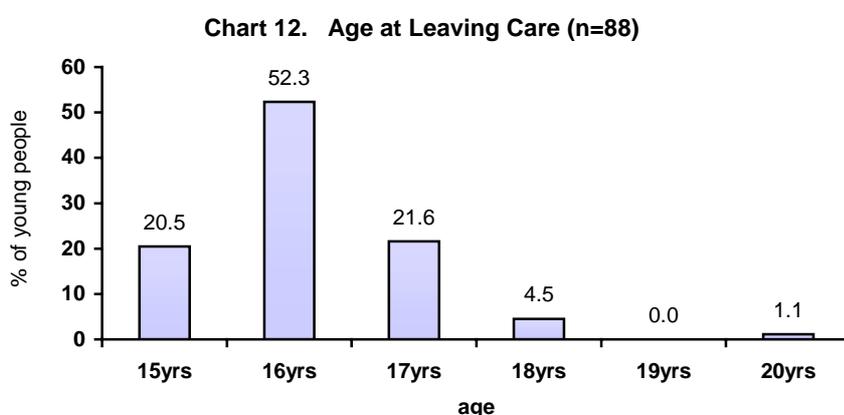
An area analysis suggested that young people moving on in City appeared to be older on average (mean 16.32 yrs, sd 0.96) than young people in County (mean 15.80 yrs, sd 0.58) and Shire (mean 16.21 yrs, sd 0.92). However this difference was not statistically significant at the 95% confidence level (p=0.059).

Similarly, there was no significant difference in the age at which males and females in the sample moved on (p=0.726).

We were aware that some young people who had been looked after for school non attendance were likely to have come off their order when they left school (15½ years old being the first point at which they are able). Analysis was carried out to see whether the main reason for young people being looked after made

a difference to the age at which they left care. We found no statistically significant relationship between the two (p=0.474).

We also looked at the last placement type prior to young people leaving care to test whether or not this made a difference to the age at which they moved on.

As illustrated in chart 13 below, young people who had been placed with family or relatives tended to be discharged from care sooner than young people placed away from home. Placements within the 'other' category included Bed and Breakfast and a Barnardo's satellite flat and secure unit. Analysis revealed that the difference between the mean ages at which young people moved on from each placement type was statistically significant at the 95% confidence level (p=0.015).

Chart 13.   Mean Age At Moving On By Last Placement Type

Last Placement	mean age
other	16.5
independence unit	17.4
residential school	16.5
children's home	16.7
foster home	16.9
other relatives	16.2
family home	16.2
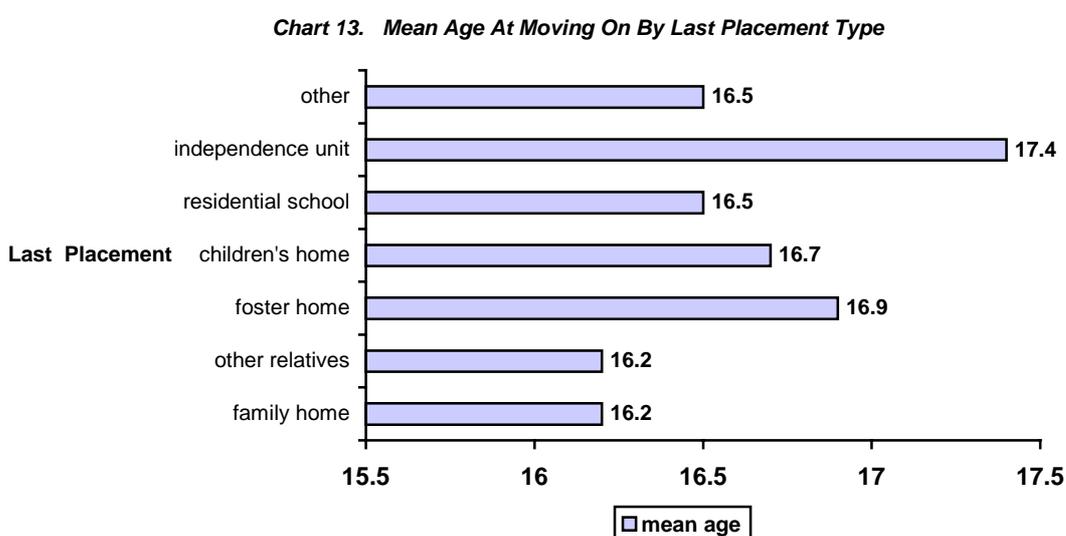
Young people who had been looked after away from home were asked to state whether or not they felt that they had a choice about when they left.   Of the seventy-two young people who responded just under half (40.3%) felt that they had not had a choice about when they left compared to those who felt they 'could choose' (33.3%) or had 'some choice' (26.4%).

Reasons for leaving care were varied although it was possible to identify some common themes. For example, age was significant for many although whilst some felt that it signalled the right opportunity to take responsibility for their own life: *"I left care because I was 16 and wanted to move on and become independent."* (Sally, Shire) and *"I felt ready, I was 17. I felt as though I needed to move on with my life (*Deb, City), others felt that they had outgrown the provision and facilities provided through the care system as illustrated by the following comments.

"[I] was out of place, one of the oldest in the residential school."   (Stephen, County)

"[I was] too old for care and foster parents had new kids."   (*Tony, City)*

"I was older than all the other residents and staff thought it was time for me to move on. I agreed because I was getting fed up with being in a home with younger kids." (Ivan, City)

" I had turned 16 and none of the rules had changed [such as the] time to be in…this leaded to arguments until the point I felt unwanted and chose it would be best for everyone if I moved out." (Tracey, *Shire*)

Some young people felt they were being 'pushed out':

"Got told I was leaving!" (Tom, City)

"I left [residential school] because they didn't want the responsibility of me falling pregnant in their care." (Angela, City)

For a small number of young people, leaving care had coincided with other life changes such as going to college or university, having a child or wanting to set up home with a partner.

Moving to Independent Living

Young people leave care to live independently at a much earlier age than other young people leave home (Biehal et al, 1992; 1995, Jones 1987). In Jones's study of young people in Scotland the median age for leaving home was twenty two for young men and twenty for young women in the general population (Jones, 1987). In comparison, an English survey of 183 young people showed that two thirds of young people left care before they were eighteen and just under a third did so at just sixteen. This contrasts starkly with the 87% of 16-18 year olds in the general population who were still living at home.

As discussed earlier, just over a tenth (13.1%) of young people in our study had returned home after leaving care whilst over a third (37.4%) had moved to independent living (whether they had been looked after at home or away from home). Additionally, 15% of the sample were young people who had moved to independence whilst still legally looked after.

Of those who had moved to independent living (n=56), the majority (53.6%) had done so at sixteen and most **(89.3%) had moved before the age of eighteen**. The age at which young people moved to independent living did not appear to be affected by local authority area (p=0.287) or gender (p=0.698).

In our study we have used the term independence to mean a move to a council or housing association tenancy, a private flat or bed-sit, to supported lodgings or a hostel, to friends or other temporary arrangements (without 24 hour staff cover). Young people, who remained with foster carers on a supported lodgings basis however, were treated separately and not included in the category of having moved to independent living. Unlike some other forms of independent living, remaining with foster carers after legal discharge (i.e. as supported carers) is seen a means of offering a 'flexible needs led approach to the timing of leaving care' (Wade, 1997) which may provide stability and continuity at a crucial stage in the lives of care leavers. In the current study, remaining with foster carers accounted for 6.5% of the young people in the total sample, 9.1% of the Shire sample and 8.5% of the City sample.

Education

 "It is unacceptable if that by being in care children get a poorer start in life …. some of our most vulnerable young people are not being supported by the formal education system." (Jack McConnell, Minister for Education, Europe and External Affairs, March 2001).

Young people leaving care have lower levels of educational attainment and participation rates than young people in the general population. This may be the result of the complex inter-relationship between social deprivation (structural and cultural factors), damaging pre-care family experiences and the failure of care to compensate young people (Coleman, Hofler & Kilgore, 1981; Stein, 1994, Jackson, 2001).

That looked after young people are persistently failing to reach their full potential has caused many to question whether the care process itself has served to exacerbate pre-care educational difficulties rather than compensate for them. There has been a growing awareness that placement instability and the lack of emphasis placed upon education by workers and carers have reinforced the barriers to education faced by these young people (Jackson, 2001).

Recent studies undertaken by Barnardo's across England, Scotland and Wales (Barnardo's, 2001) and by the HM Inspectors of Schools and the Social Work Services Inspectorate in Scotland have highlighted the need for better working structures and cooperation between agencies to promote and support the education of looked after young people. In '*Learning with Care'* findings confirmed that compared to their peers, young people looked after away from home in five Scottish local authorities tended to be behind in their attainments, leave school with fewer qualifications and have a greater risk of being excluded. (HM Inspectors of Schools and the Social Work Services Inspectorate, 2001.)

Information on the educational attainment and achievement of young people in the current study was sought from workers and young people themselves. Over a quarter of workers who returned a questionnaire for the follow up sample stated that they did not know whether or not the young person had any qualifications at the point of moving on from care. The following information is based solely on young person's data.

At the point of entry to the current study only six (5.4%) young people were still at school. Two of these were fifteen, three were sixteen and one was seventeen years of age. The vast majority of the sample (94.4%) had left school.

Most young people (62.6%) in our sample said that they had some qualifications or certificates. Many had included certificates for sports and recreational activities, which, whilst not indicative of academic accomplishment, nevertheless represented a sense of achievement.

Attainment

Evidence from previous research suggests that the educational outcomes for looked after young people are universally poor (Stein, 1997). *Learning with Care* reported that up to 75% of looked after young people leave school without any qualifications and in Biehal's survey of care leavers, half of their follow up sample had no qualifications (Biehal et al, 1995). Previous to that, Garnett found that three quarters of care leavers left school without any qualifications (Garnett, 1992). In comparison, figures released by the Scottish Executive show that in 1998 only 6.6% of all school leavers in Scotland had no SCE qualifications (National Statistics, 2000).

Just over a third (39.2%) of young people in the current study reported having one or more standard grade qualifications. The majority (60.8%) did not list any. Compared to the national average of seven standard grades at any level, the average number of standard grades in our survey was two, however, for those who did have standard grades, the average was four. Almost half (45.2%) of those with standard grade qualifications had between one and three, 26.2% had four to six and 28.5% had seven to nine standard grades. Almost a fifth of the young people who had standard grades had achieved eight. Additionally, a small proportion of young people (2.8%) had between one and three Highers, compared to 30.2% in the general population of Scottish school leavers (National Statistics, 2000). Other qualifications included SVQs (n=8), National Certificates (n=3) and NVQs (n=1).   Almost a tenth of the survey were unsure whether they had any qualifications.

Ministerial concerns about educational attainment of those leaving care are reflected in the social justice milestones, which have set the target that '*all our young people leaving local authority care will have achieved at least English and Maths standard grades.'* In the current study just over a third of the sample said they had achieved standard grade maths (34.6%) and in English (38.8%).

Although statistically there was no significant difference between the research areas in terms of the number of standard grades (p=0.105), we found that Shire had a greater number of young people achieving eight or more.

The emerging pattern within our sample suggests that females had more qualifications than males (63.3% and 35.7% respectively), although this finding was not statistically significant (p=0.114). And significantly, 51.6% of those who had one or more standard grades had been placed in foster care (p=0.014). This does have some resonance with *Moving On* which found that young women who had been looked after in stable foster care placements tended to do better educationally than other looked after young people.

One of the primary factors to arise from research into some of the difficulties facing looked after young people is the disruption and interruption of schooling caused by placement moves. Stability of placement may therefore be a factor in enhancing the educational chances of these young people. Analysis carried out on the sample as a whole implied no relationship between educational attainment and placement moves during last their last care episode (Kenall's tau b = 0.031, p=0.748). However, when we focused specifically on those young people who had one or more standard grades we found a negative correlation

between the number of qualifications achieved and the number of placement moves they had experienced (Kenall's tau b = 0.316, p=0.018), suggesting that **those with more standard grades had experienced fewer placement moves.**

Exclusion

Learning with Care reported that looked after children account for 1% of the school population and yet they make up 13% of all school exclusions. **Almost three quarters (71.4%) of young people in our survey reported having been either temporarily or permanently excluded**. Many young people told us they had lost count of the number of 'suspensions' they had had but most said it was for 'daft things' such as spitting in the playground or not doing homework. Lyn, a young woman from City who had been suspended about four times told us:

> *"[I] didn't take school seriously, I was a wee rebel… [but] half the things you got suspended for were just stupid. I've learned obviously. It wasn't until 5th or 6th year that I started thinking about my education. I struggled a lot, I think because of my past. I didn't like adults speaking back to me so was cheeky back."*

Truancy

Truancy was common amongst young people in the survey with 83% having stayed off school and 50.9% having done so 'often'. As noted earlier however, around a tenth of the survey had become looked after because of school non-attendance. As Rory from City commented: *" I went for weeks without going, that's how I got stuck in a home."*

Some young people truanted because of problems they were experiencing at school. Lyn from City explained *"[from] 2nd to 4th year, I found the work difficult and didn't want to be at school….it was difficult coz I'd missed a lot of schooling."* Another told us *"I was new at school and didn't feel comfortable."* (Amanda, City) and Gordon from County who truanted *"all the time"* indicated the lack of support he had received to overcome his learning difficulties:

> *"I was Dyslexic. It was hard in English being told to stand up and read when you couldn't read or write properly …it was known since I was in primary school but when I went to high school I didn't get any support."*

Several young people expressed regret at having truanted, as in the following comments.

> *"[Truanted] sometimes a couple of days at a time sometimes 2 weeks. I regret it now and wish I'd stuck in at school… [but I] couldn't spell properly and had difficulty with reading, not sure how to pronounce a lot of words."* (Ivan, City)

And
> *"I regret it now [truanting]…if I'd gone to school I'm sure I would have achieved really good grades. I'm not stupid."* (Jessica, City)

None of these young people had achieved any qualifications at the time of providing the information. However, on a positive note one young woman from Shire told us that she had truanted whilst living at home but *"never did it in care…school attendance improved when I was in care".* She had gone on to complete eight standard grades all at grades 3 and 4.

Being Bullied

The majority (57%) of young people in the sample said that they had never been bullied. However, over a quarter (29%) told us they had been bullied sometimes and for 14% this had happened often. Most of these young people described instances of name-calling and intimidation. Unsurprisingly, experiences of being bullied were often linked with truanting and subsequent exclusion, and for some it was linked directly to being in care. Josh, who had attended a residential school in City told us:

> *"I was bullied often, when I was younger …it's part of it really, when you go in till you get a bit bigger. I was in two residential schools, I would say the first one I was 13….it happened for about 4 months."*

Amanda, who had been suspended for not wearing a school uniform added*:*

> *"When I was in homes they didn't buy me good stuff to wear so I got bullied for that… I was suspended 6 or 7 times within a couple of years. "*

Young people in the follow up study (n=61) were asked about their education again six months later at T2. Only 5% reported that they were in education at that point although 19.7% were studying for qualifications. (These included SVQs, HNDs, NVQs, Highers, national certificates and health and safety certificates.) Just over a fifth of the follow up sample had gained qualifications in the six months since completing T1. These ranged from standard grades and highers to city & guilds, national certificates and SVQs. Several young people mentioned certificates of achievement from organisations such as the Princes Trust and various basic skills initiatives.

Work & Training

Poor schooling and low educational attainment have repercussions for many aspects of adult life, but perhaps most crucially for young people leaving care it can perpetuate a cycle of disadvantage which may already be in motion. The increased likelihood of unemployment and with that dependency on welfare benefits, can conspire to maintain their over representation on the margins of society. For some the financial and practical support of family and social networks may have been lost and the gaps in the benefit system for young people can make poverty and exclusion a plausible reality.

Many studies have highlighted the changing nature of the labour market over the past two decades and the difficulties faced by young people attempting to enter employment. The decline in traditional industry, rising demand for an educated and specialised workforce and increase in temporary or part time employment have resulted in limited career opportunities and make it financially difficult for young people generally to live independently.

In addition to these general issues, young people leaving care may face further obstacles to entering the job market such as stigma, not having the opportunity to use informal networks as a source of finding

work, and for many, the need to find a level of employment that will provided them with the means to facilitate and sustain their early transition to independent living.

Although youth unemployment has been on a downward trend since the mid eighties, evidence of unemployment amongst care leavers is well documented. Analysis of the National Child Development Study UK data revealed that young people leaving care were much more likely to be unemployed or be in unskilled or semi-skilled work, and were less likely to be in managerial work than their peers who had never been in care (Cheung and Heath, 1994). Stein and Carey (1986) reported that 80% of their sample was unemployed, as were half of the 16 - 19 years olds in the follow up sample in Biehal's study (Biehal et al, 1995.). A survey of leaving care projects working with 2905 young people showed that 51% of young people were unemployed - two and a half times the unemployment rate for this age range (Broad, 1998).

At the point of entry to the current study (1 to 24 months after moving on from care) **half of the young people in the survey were unemployed**. As chart 14 indicates, only a quarter of 15 – 20 years olds were in education or training and just over a tenth were working.

***Chart 14.   Occupational Status of Young people (n=103)***
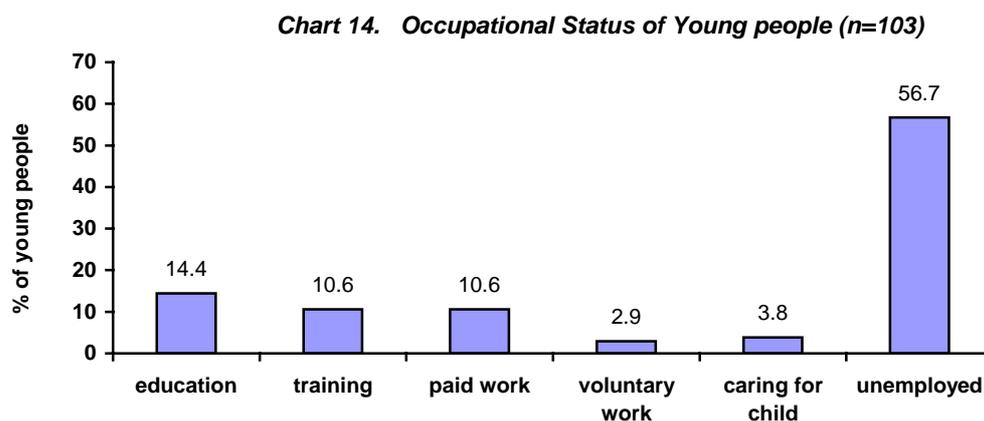
This pattern remained fairly consistent across the three research areas with just over half of young people in County and City and over two thirds (68.2%) of young people in Shire being unemployed. Slightly more males than females in the survey were unemployed (57.6% & 42.4% respectively) although males accounted for just over half of those engaged in paid work (54.5%). There were more females (60%) than males in education and those in education accounted for less than a fifth of young people in all three areas. However, this was not statistically significant (p=0.259).

Young people in the follow up study (n=61) and those completing a retrospective (R) interview (n=24) were asked about any changes in their employment status since first moving on from care (i.e. between 5 and 24 months ago). Information based on eighty two young people showed that less than a tenth of the sample had moved from unemployment to either paid work (7.3%) or education or training (8.5%) whilst over a quarter of the sample had been unemployed throughout. 'Other changes' include one young person who went from training to caring for her mother and two young people who went on 'the sick,' one from unemployment and one from paid work.

Chart 15. Changes in Employment Since Moving On

Category	% of young people
other change	3.7
paid work to unemployed	2.4
paid work to voluntary work	1.2
education/training to paid work	4.9
remain in voluntary work	1.2
unemployed to voluntary work	2.4
voluntary work to unemployed	2.4
other to childcare	6.1
education/training to unemployed	11
remain in paid work	6.1
remain childcare	3.7
remain in education/training	11
remain unemployed	28
unemployed to education/training	8.5
unemployed to paid work	7.3

Income

For young people in the general population the extended transition from school to work to independent living may be cushioned by the financial support of the family. For young people moving on from care such support systems are not always in place and as we have already discussed, a higher number tend to embark on this transition far sooner than others of a similar age. The impact of poor educational and employment outcomes leaves many care leavers ill prepared for an increasingly competitive youth labour market. A consistent finding from UK studies completed since the mid 1970's has been that the vast majority of care leavers live at or near the poverty line (Stein, 1997; Broad, 1999; Pinkerton and McCrea, 2000). Barriers to employment and changes to the benefits system in recent years, have served to increase the risk of financial hardship amongst this group.

Young people in the current survey were asked to state how much money they had to live on each week. Many young people lived on an income below the benefit level. **The majority (58.9%) survived on less than £35.00 a week**, with 11% reporting that they had no money. Table 14 illustrates the responses of the total sample.

Table 14. Weekly income

Amount per week	Number of Young People	% of sample
Less than £35.00	63	58.9
£36.00 to £50.00	24	22.4
£51.00 to £80.00	14	13.1
£80.00 or more	6	5.6

The main source of income for young people in the current survey was benefits (42.1%) with wage being the second most common source (13.1%). Education grants and training allowance accounted for 3.7% and 10.3% respectively. A small proportion (4.7%) relied on payments from the social work department. Several young people (16.9%) did not provide information (some because they were not in receipt of any money) and 9.3% identified other sources such as parents, babysitting money, bridging loan and the proceeds of selling drugs.

Young people were asked about any contact they had had with the benefits agency since leaving care. Of the 79% who supplied information almost half (44.7%) had not had contact. Of those who had, most (42.4%) said that they had found them helpful whilst 12.9% said they were no help.

Young people in the survey were asked about any financial problems they may have experienced since leaving care. The majority (85.4%) of those who supplied information (n=89) said they had been short of money and over a quarter (28.1%) said that this was always the case.

Whilst the majority (64.7%) of these young people told us that they had not had a problem with debt over a third (35.3%) reported having debts which they were unable to pay off.

Financial Assistance

Information on section 29 and 30 payments was supplied by workers at T1 for half of the sample (50.5%) only. In over half of these cases young people had received financial assistance under section 29 & 30. A third had received leaving care grants ranging from £300 to £1700, and almost half (45.5%) had received accommodation subsidies, most on a regular basis. Income top ups had been made to a third of these young people, half receiving one off payments and half receiving regular top ups, and just under a tenth (8.8%) had received payments to help with debt and employment assistance (5.7%).

Accommodation

As detailed earlier, 42.4% of young people in the sample had moved onto independent living at the time of entering the study. Compared to young people in the general population, young people who have been looked after tend to move to independent living sooner, may be more likely to be without family support and the option for return and have less choice about the timing and nature of the move.   Evidence also

suggests that not only are these young people likely to experience insecure housing careers and transitory accommodation but they are over represented in the homeless population (Biehal et al 1995; Stein et al 2000; Randall 1988;1989).

This section looks at the housing experiences of young people in the current survey in terms of the type of accommodation they were living in soon after leaving care, their ability manage and sustain their accommodation and any difficulties they have faced. Whilst it is recognised that housing opportunities are ultimately determined by social factors such as local housing provision and local authority housing policies we have focused on individual circumstances to explore the process of movement and choice.

At the point of entering the study **just over a third (38.3%) of young people between the ages of 15 and 20 were living at home with one or both parents** however, 62.5% of these had been looked after on a home supervision requirement. The majority of young people in the survey (51.5%) were living in some form of independent or semi independent accommodation, the most common being supported lodgings (13.1%) and hostels (13.1%). Just over a tenth were living alone in their own tenancy and 14.1% were evenly distributed amongst friends, foster/supported carers and living with a partner. A tenth of the survey either lived with other relatives (4.7%) or lived in 'other' types of accommodation such as bed & breakfast, a rough sleepers initiative and staying with a boyfriend's parents.

Area analysis showed that young people from Shire were far more likely to be living in their own tenancy (either alone or with partner) than young people from County and City (40.9% of young people from Shire compared to 10.2% from City and 7.6% from County p=0.006).   The most common types of accommodation (other than family home) for young people living in County and City were supported lodgings in County (15.4% of young people) and hostels in City (16.9% of young people).

Moving

As Biehal et al point out, some degree of movement is normal for young adults and maybe brought about by positive influences such as finding a job, going to college, moving nearer to family or setting up home with a partner. For young people in the wider population housing mobility generally progresses towards better quality and more secure accommodation during their early housing careers (Jones, 1987). However, where movement is brought about by negative reasons such as crisis, debt or inability to manage this may not always be the case.

Previous research has suggested that young people who have been looked after tend to experience a high rate of movement. In *Moving On* nearly a third of the sample had at least two *additional* moves within a few months of leaving care (Biehal et al, 1995).

In the current study, information on housing mobility was gathered at T2 for the follow up sample and at the point of entry to the study for the R and N sample. Young people were asked to estimate how many times they had moved accommodation since leaving care. Responses from eighty-nine young people showed that over half (60.7%) had moved within 1 to 24 months of moving on from care. The average

number of accommodation moves (subsequent to the initial move from care) for those that had moved was four, with **the majority (61.1%) of young people experiencing three moves or more**. Young people from Shire appeared to have fewer moves than those from County and City (mean of 3 compared to 4) however, this was not statistically significant (p=0.727).

Those who reported several accommodation moves tended to have experienced insecure and transitory accommodation types such as friends, hostels, bed and breakfasts and returning to unsatisfactory family accommodation through necessity. An illustration of this is provided by the following young person who summarised his experience of independent living over the twelve months since leaving care as follows:

> " I left foster care because I was 16 years old [and] went to live with an associate... I then presented as homeless and lived in a B&B till I got thrown out and went to live with my dad. I got thrown out and went to live with my mum till I got thrown out for giving cheek. I went to live with my sister [but] I was asked to leave there for fighting with her boyfriend. I then went back [to local authority] and presented as homeless and put in a B&B till [I was] referred to Barnardo's who helped me find supported lodgings." (Adam, Shire).

Brian from City, meanwhile, told us that he had moved ten times in ten months, mostly moving from one hostel or homeless unit to the next and intermittently returning to his mum.

Reasons for movement were varied but fell into four distinct categories. The most common issues precipitating a move were

- Relationship breakdown either with family, friends or carers.

  I moved from foster care to homeless hostel because I was no longer getting on with my foster parents" (Robert, Shire)

  "[I moved] back to mum's [but] things didn't work out, still treated me like I was a wee lassie. From friends to homeless accommodation eight or nine times, arrangements kept breaking down. [Now] living with boyfriend [but] not getting on so well…accommodation is not secure, council don't known I'm living here and my boyfriend is afraid he'll get chucked out…I'm going to have to go back to homeless accommodation." (Gill, City)

- Crisis. E.g. experiencing intimidation from other residents, fleeing violence, or an unsafe area.

  "I'm staying with mum at the moment because I can't stay at my own flat because it isn't safe" (Rachel, Shire)

- Eviction or being asked to leave.

  "I got chucked out of my first house. I also got chucked out of my mum's. [I] stayed with friends then moved back to mum's. I was also in a homeless unit..for about three weeks. No one helped" (Carol, County)

and

  " I was put out of carers when I told her I was pregnant. I had no where to go and felt I must have done something wrong." (Amanda, City)

- The desire to improve living conditions whether towards more stability, a better/safer area or better accommodation.

" I moved to a private rent with my girlfriend. The state of the house and dodgy landlord made us move." (Craig, Shire)

Two issues which particularly stood out amongst the reasons for moving, were the frequency with which a move home to family (either from care or intermittently during the young person's housing career) broke down and also the incidence of homelessness. The latter issue was explored in further detail.

Homelessness

Young people in the survey were asked if they had been homeless since leaving care. **Over a third (38.2%) of the eighty-nine young people who supplied information reported that they had been or were currently homeless.** A further 3.4% of young people were unsure. A greater proportion of the Shire sample appeared to have experienced homelessness, when compared to County and City young people (65% compared to 33.4% and 29.2% respectively) and although there was no statistical association between homelessness and gender in the survey (p=0.781), the pattern of responses suggested that slightly more females than males (40% compared to 35%) had been homeless since leaving care.

For most young people homelessness had involved staying with friends or in homeless hostels or units. Few mentioned sleeping rough. Josh from City, who had moved nine times and had been homeless on several occasions said *" I was fortunate really not to be sleeping rough. I always had a kip on somebody's floor though it wasn't exactly the ritz or nothin."*

Difficulties with Accommodation Arrangements

Over a quarter (27.1%) of young people in the survey said they were experiencing problems with their current accommodation. There did not appear to be any relationship between having problems and the type of accommodation they were living in (p=0.490). However, the types of problems young people described tended to fall into accommodation specific categories. For example, when asked to describe some of their housing problems young people living at home described having difficulties with parents and siblings as in the case of Brian from City:

"[My] parents' drinking and brother's drug habit. My life's not good..[it] would be better if I could have my own flat. That's all I want. "

More commonly, young people told us about arguments with parents or having to re-adjust to family life as in Rachel's case:

" I argue with my mum a lot. I would rather have my own flat."
and

"I'm not happy here as I've not lived with mum since I was 13, I only visited." (Jessica, City)

Those living in their own tenancies meanwhile were more likely to describe feeling lonely, unsafe and isolated:

> *"It's really difficult when you leave a [residential] school that's full of lassies and go and live by yourself. I still find it difficult. And coping with the bills, that I find difficult.*" (Deb, City)

And for one young woman who had recently moved in to her own tenancy with her partner and their baby:

> *"Local gangs were causing problems to us in the middle of the night when we first moved in, kicking our door, hammering on windows. By the time the police arrived they'd moved on." (Anna, County)*

and

> *"It's too far away from mum and dad."* (Lois, County)

Finally, for Heather from County, who was otherwise coping well in her own tenancy the downside was:

> *"Being away from my mum, I'm only 16 and still a bairn and get a bit weepy at times."*

Alongside the problems and difficulties that young people were experiencing were many positive comments. One young man who was living with friends told us *"I get on with the people I'm living with. [I] do some babysitting for them. I'm treated like one of the family."* (Barry, County) and for a young woman living with supported carers:

> *"Usually if things go bad then I'm the kind of person who wants to move on. But when things go bad here as it does everywhere, I want to talk it through and get it sorted right away…I know that even if things are bad I still love them and I want to be here, no matter what." (Lyn, City)*

And for a young woman who had moved into her own tenancy after leaving home and being placed in a B&B when she became homeless:

> *"[I] feel more relaxed, more good tempered. I enjoy my own space and have a better relationship with [my] mum and sister now that I have left home." (Carrie, Shire)*

Changes in Accommodation

Young people in the follow up study (N=61) were asked about their living circumstances and their ability to manage at both T1 and T2.

Information represented in chart 16 below shows the change in accommodation types over a six-month period. Although this is a relatively short time-span in which to monitor change we found that **45.9% of young people had experienced between one and six moves during the six month follow up period** and that there was an emerging pattern of movement away from family, friends and transitional accommodation towards living either with a partner or alone in a tenancy. In the case of the latter, the percentage of young people living in this type of accommodation had almost doubled. The majority of young people living in the family home were those who had been looked after on a home supervision

requirement. It would appear that most had remained in the family home over the follow up period. Other types of accommodation included bed-sits and bed and breakfasts.

Chart 16.   Accommodation At T1 & T2 (n=61)
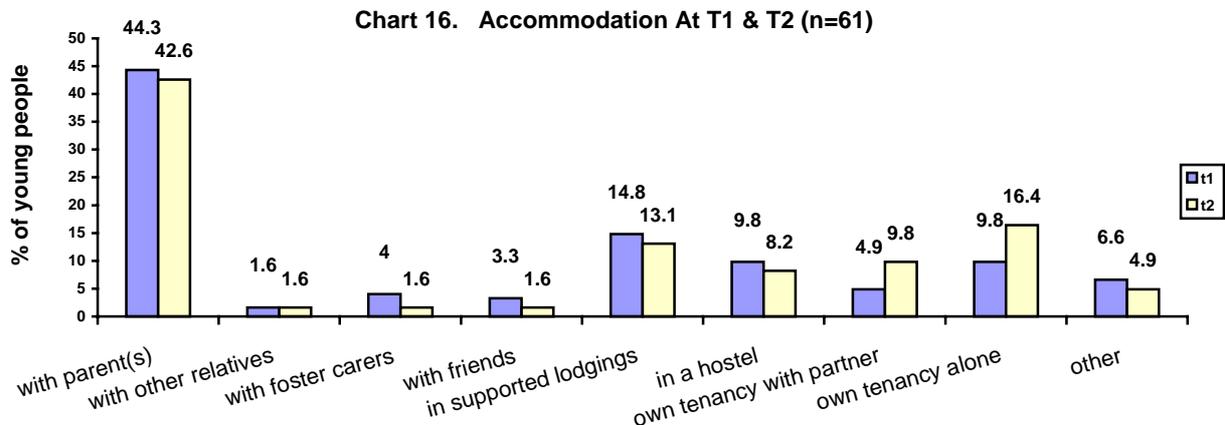
A similar pattern emerged when we focused on the housing careers of young people looked after *away* from home. As Chart 17 indicates, the movement away from transitional accommodation towards a potentially more secure housing situation was still evident. However, the numbers living in *insecure* accommodation (for example, with friends and in other forms such as bed sits and B&Bs) remained constant over the six-month period.

Chart 17. Accommodation at T1 & T2 (n=37)
For Young People Who Had been Looked After Away From Home
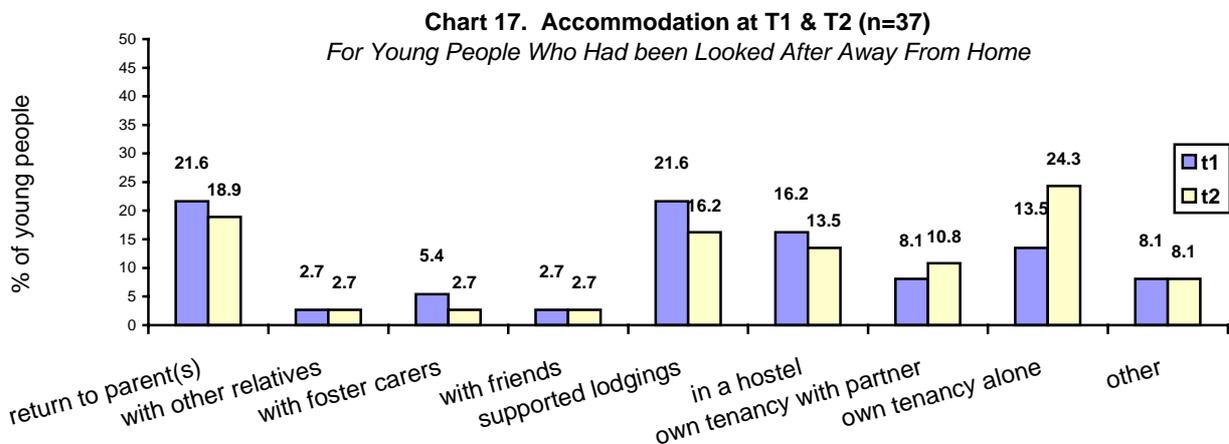
Information on the suitability of housing (from both the young person and their worker's perspective) and ability to 'manage' was sought at T1 and T2 for the follow up sample.

Most young people seemed happy with their accommodation arrangements at T1 with over a third (36.1%) saying they liked it all of the time and over half (52.5%) saying they liked it some of the time. However, a tenth of the follow up sample were not at all happy with their accommodation. Most of these (42.9%) were living with parents, although over a tenth (16.7%) of those living alone in their own tenancy said they did not like where they were living.

The situation at T2 was much the same although more young people (49.2%) said they liked their accommodation 'all of the time'. The majority of those who were not happy with where they were living were again those living with parents (66.7%).

Information on whether T1 accommodation was suitable for young people's needs was provided for just over two thirds of the follow up sample. Workers reported that the housing arrangement were less than suitable for almost a quarter (21.4%) of these young people. In most cases this was a result of the young person's inability to manage their accommodation rather than the type of accommodation. For example 66.6% of those who workers felt were living in unsuitable accommodation were considered to have poor or very poor living skills (p=0.026).

Health and Behaviour

Some young people who have been looked after will have 'special needs' over and above those of other looked after young people. These needs, whether physical or mental health difficulties, learning difficulties or problems with drugs or alcohol should be identified and addressed as part of the throughcare and aftercare process. The Children (Scotland) Act 1995 Regulations and Guidance emphasise the role of local authorities in considering special needs and identifying the necessary services and resources for meeting these needs.

Research acknowledges that young people with disabilities or learning difficulties are over represented amongst those not participating in education and training and that economic activity is significantly lower amongst disabled people (Tomlinson Report FEFC, 1996).

Evidence also suggests that young people with disabilities have a greater likelihood of being in care than other young people. Gordon et al's re-analysis of the OPCS disability survey found that 5.7% of children with disabilities in England & Wales were in care compared with 0.5% of the under eighteen population as a whole. Young people who have been looked after are also likely to have a greater vulnerability to learning difficulties, emotional and behavioural difficulties and mental health issues. Indeed, as Koprowska and Stein (2000) point out, some of these issues may have been brought about by the experiences and conditions that led to the young person entering care. It is likely therefore that young people leaving care with 'special needs' face increased disadvantage as they attempt to embark upon independent living.

Although research into physical health issues is limited, there have been several studies which have addressed mental health difficulties amongst young people with a care background. McCann et al (1996) found that over half (57%) of young people in foster care and nearly all (96%) of young people in residential care had some form of psychiatric disorder. Similarly, Saunders and Broad (1997) found that 48% of young care leavers in their study had a long term mental illness.

In our study, information on young people's health and behavioural issues was gathered from young people and workers. As shown in chart 18, **over a tenth (12.1%) of young people in the survey reported having a long term physical health problem, whilst almost a fifth (18.7%) reported having other health problems** such as asthma, eczema, hearing impairments or problems associated with drug or alcohol misuse. Only 5.6% of young people reported having mental health problems (including depression, agoraphobia, eating disorders and self harm) however, it is possible that the extent to which these difficulties were present in the survey is more accurately reported in terms of emotional and behavioural difficulties as assessed by workers.

Chart 18. Young People with Special Health Needs
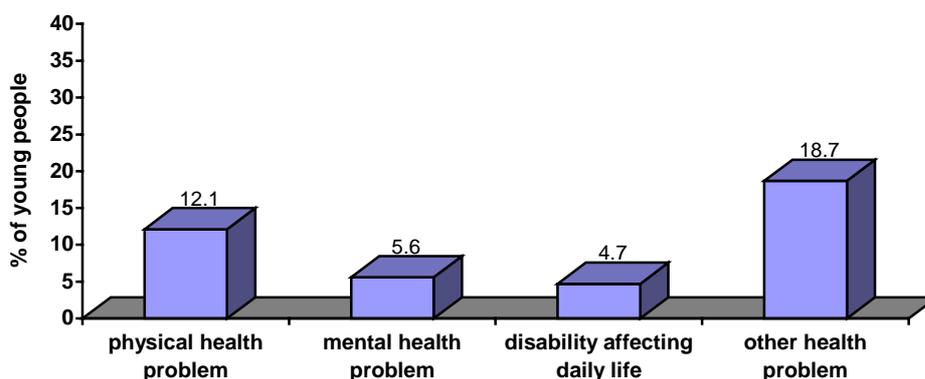
Information from workers on seventy-five young people suggested that **41% had emotional or behavioural difficulties**. These included verbal, physical or sexual aggression, threatening or volatile behaviour, alcoholism, offending, mood swings, depression, eating disorders, ADHD, self harm and emotional issues related to past experiences of abuse, bereavement or rejection. Information on sixty-nine of these young people indicated that 7.2 % had a statement or registration of difficulties.

Health needs had been assessed during the leaving care planning and review process for 24.3% of the young people for whom we have received workers' information (n=69) and in 7.5% of cases the need for specialist therapeutic services had been identified. Just over a quarter of young people in the sample provided an indication of the help and support they had received in relation to health and behaviour issues. Many referred to contact with GPs and mental health specialists. However, some young people described the support they had received from family, friends, residential staff and social workers. In most cases this involved help with setting up appointments and being accompanied to GP appointments. In a few cases support workers had referred young people to specialist projects or units, for drugs and alcohol problems.

Learning Difficulties

Almost a third (31.1%)of young people in the sample said they had a learning difficulty, 9.4% were not sure. One young person told they were dyslexic but did not receive any support "M*y mum went off her head trying to get me support but I still didn't get any."* (Donald, County) and one young man from City said he had trouble with writing but didn't know how to get any help, he added "*[I] was scared of what people thought.*" (Justin)

Drugs and Alcohol Misuse

Recent statistics suggest that experimenting with drugs and alcohol is increasingly common amongst teenagers. Recent statistics show that over a quarter of young people aged between 16 and 19 years of age have tried drugs and almost half of males aged 20 to 24 have done so. (2000 Scottish Crime Survey and Office For National Statistics). Teenage drinking is also increasingly common for almost a quarter (21%) of 12 to 15 year olds. (National Centre for Social Research, 2000)

Relatively few young people in the current survey reported having a problem with drugs or alcohol at the point of entering the study (4.7% & 2.8% respectively) and 4.6% said they were unsure. Of those who did, more females than males reported problems with drugs (66.7% versus 33.3%) (p=0.936) whilst more males than females said they had a problem with alcohol (80% versus 20%) (p=0.017). There is of course the issue of reliability in self-reporting on sensitive issues, so these figures should be treated with caution. Information was also sought from workers but was only provided for forty-nine cases, of which over a quarter (28.6%) were described as having moderate to serious problems with *substance* misuse.

Offending

There is some evidence that young people who have been looked after are over represented in the prison population (Prison Reform Trust, 1991) and indeed some young people enter care because of offending.

Over a quarter (28%) of young people in our survey reported that they had been convicted of a criminal offence in the past twelve months. Offences included burglary, fighting and shop-lifting. One young person described how he had stolen for an 'associate' in return for accommodation and another told us he made a living from selling drugs. Under a tenth (6.5%) of the survey had become looked after because of offending and at least two young people who had taken part in the study had received a custodial sentence by T2. Males in the survey were three times more likely than females to have been convicted of an offence (21% compared to 9%) (p= 0.005). Half of those who reported being convicted of an offence came from City however, proportionally a greater amount of young people from County had done so, (37.5% compared to 26.3% of the City sample and 27.3% of the Shire sample) although this was not statistically significant (p=0.590).   Half (50.6%) of those for whom workers had provided information (n=77) were described as having moderate to serious problems with offending during the time they were looked after. A tenth were described as persistent offenders. Information on whether young people had carried this behaviour through to their post care situation (i.e. at T1) was only supplied for forty five cases and indicated that just over a third had problems with offending with only 4.4% being described as a persistent offender. Almost a fifth (17.8%) of workers said they did not know whether the young person they were working with had a problem with offending.

Young people in the follow up study (n=61) were asked about health and behavioural issues (including offending) at T1 and T2. During the latter contact issues surrounding support were explored. The following sections deal only with young people who supplied information at T1 and T2.

Health

The majority (88.5%) of the follow up study had been registered with a GP at the point of leaving care although this had dropped slightly to 82% by T2. As one would expect, long term physical health problems remained fairly constant over the follow up period (8.2% at T1 and 9.8% at T2) however, **there was a four fold increase in those reporting mental health problems at T2** (6.6% at T2 compared to 1.6% of the follow up sample at T1).

A quarter of young people who reported having mental health problems said they had received help or support from their social worker and 75% said they had received help from their specialist leaving care worker. Just under a tenth (6.6%) of the follow up sample said they would have liked more information on health issues from their social worker or specialist leaving care worker.

Substance Misuse & Offending

There appeared to be an increase in the number of young people in the follow up sample reporting problems with drugs and alcohol at T2 however, this only represents two young people. Unfortunately we received insufficient information from workers at T2 to cast any further light on these findings.

Chart 19.   Substance Misuse & Offending at t1 & t1 (n=61)
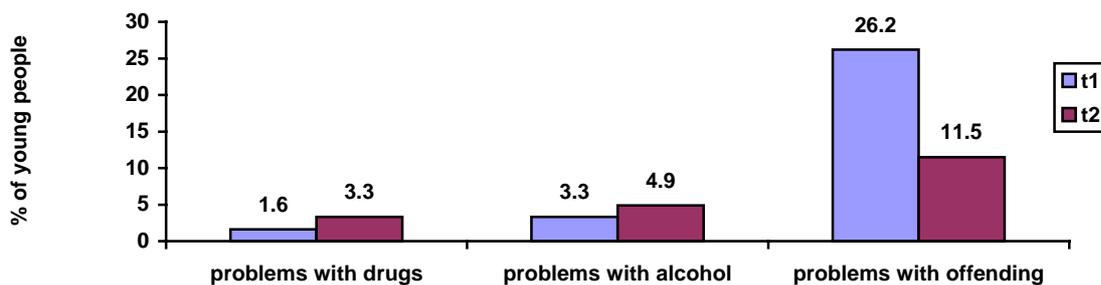
In relation to offending we found that almost half the number of people who reported at T1 having been convicted of a criminal offence (in the past 12 months) had been convicted during the follow up period (11.5% compared to 26.2% at T1). Again this may not necessarily suggest that such a decrease had occurred as six months may not be long enough for offenders to have been convicted. However, anecdotally we were told by several of those young people who had problems with offending that they were attempting to steer clear of crime. However, one young man highlighted the importance of a stable lifestyle for staying out of trouble:

> *"Causing trouble and being in jail that's in the past,I just hope I will stay out of trouble a bit longer by getting a proper job and my own home."* (Donald, County)

Help to overcome problems with addiction and offending was explored with young people during their final interview. One of those who reported having a drug problem at T2 had received help from a drugs counsellor. The other had not received help or support.   Six young people told us that whilst they no longer considered themselves to have a drugs problem, it had been a problem in the past. Three of these young people had received help, including support from drugs and alcohol counsellors and leaflets and

support from support worker. All of the young people who reported having a problem with alcohol at T2 (n=5) had received support. This ranged from being referred to AA, counsellors or psychiatrists by support workers and receiving information via 'quiz sheets' and leaflets about the effects of alcohol.

Of those who had been convicted of a criminal offence since leaving care (n=7) all had received some form of support. Over half mentioned the help of solicitors although 42.8% mentioned the practical support they had received from support workers who had accompanied them to court, explained procedures or provided transport to and from hearings or meeting with solicitors. One young woman who had received help from her specialist leaving care worker with anger management told us she had not committed any offences for almost nine months.

Parenthood

Research suggests that teenage pregnancy is particularly prevalent amongst young people from disadvantaged backgrounds and previous research into young people leaving care has highlighted the high incidence of teenage parenthood within this group (Garnett, 1992, Biehal et al, 1992, 1995 and Corlyon and McGuire, 1997). In *Moving On* one half of all young women in the follow up sample had become parents between the ages of 16 and 19 (Biehal et al, 1995). Recent statistics published by the NHS in Scotland show that 6.7% of young women in the 16 to19 age group living in Scotland experience pregnancy (NHS Scotland, 2000).

Young people in our sample were asked whether or not they had a child of their own. The follow up sample were asked at T1 and again at T2 whilst the R and N groups were asked only once.

Information gathered at T1 indicated that 8.9% of the seventy-nine respondents had a child. Each had one child only. Just over a quarter (28.7%) of these young people had become a parent at 15 whilst over half (57%) had become a parent at 16 years old. **Almost a tenth of all female and male T1 respondents (9.8% and 7.9% respectively) had a child.** Just under half (42.9%) of these young people described themselves as a 'lone parent' whilst over half (57.1%) said that their child did not live with them. In addition to this, 3.8% of T1 respondents were currently pregnant, although at T2, only two of these young women reported having a child.

Analysis of T2, R and N data shows that within 5 to 24 months after moving on, 13.6% of those who supplied information (n=88) had one child, and 6.8% were either themselves or had a partner who was pregnant. Two thirds of these young people (66.7%) said that their child lived with them whilst a third said their child lived elsewhere, most often with the young person's parents or with the child's mother. Half of the young people, who had a child, described themselves as a lone parent. Two young people in the sample were co-parents living together with their child.

The majority of young people who had a child came from City (66.7%) although proportionally County had the highest incidence of teenage parenthood (19% compared to 16.7% in City). Whilst Shire had no teenage parents, 16.7% of the area sample were either pregnant or had a partner who was pregnant.

Informal Support - Family & Friends

Previous research has highlighted the importance of family contact for positive post care outcomes whether it be successful reintegration into the family unit or the provision of an emotional, practical and financial support network (Marsh and Peel, 1999; Morgan Klein, 1985; Stein and Carey, 1986). The Children (Scotland) Act 1995 seeks to reinforce the idea of joint-parenting by promoting the continued role of parents and family for children who are looked after, through the rights and responsibilities of parents towards their children and by emphasising the role of social work services in encouraging and maintaining family links, where appropriate.

Family

Information gathered for all young people (n=107) at the point of entry to the study showed that 89.7% (n= 96) of young people reported having *contact* with their birth family. However, 42.7% (n=41) of these young people were living with one or both parents at the time of reporting. A further four young people were living with other relatives (although one reported having no contact with their birth family). Of those young people who lived away from their family (n=61) most (83.6%) reported having contact with them.

No relationship was found between contact with birth family and the young person's gender (p=1.000) or local authority area (p=0.961).

Young people in the sample were asked to indicate which family members they *saw* at least every two weeks. Chart 20 below illustrates the responses.

Chart 20. Young People Who See Family Members At Least Fortnightly (n=102)
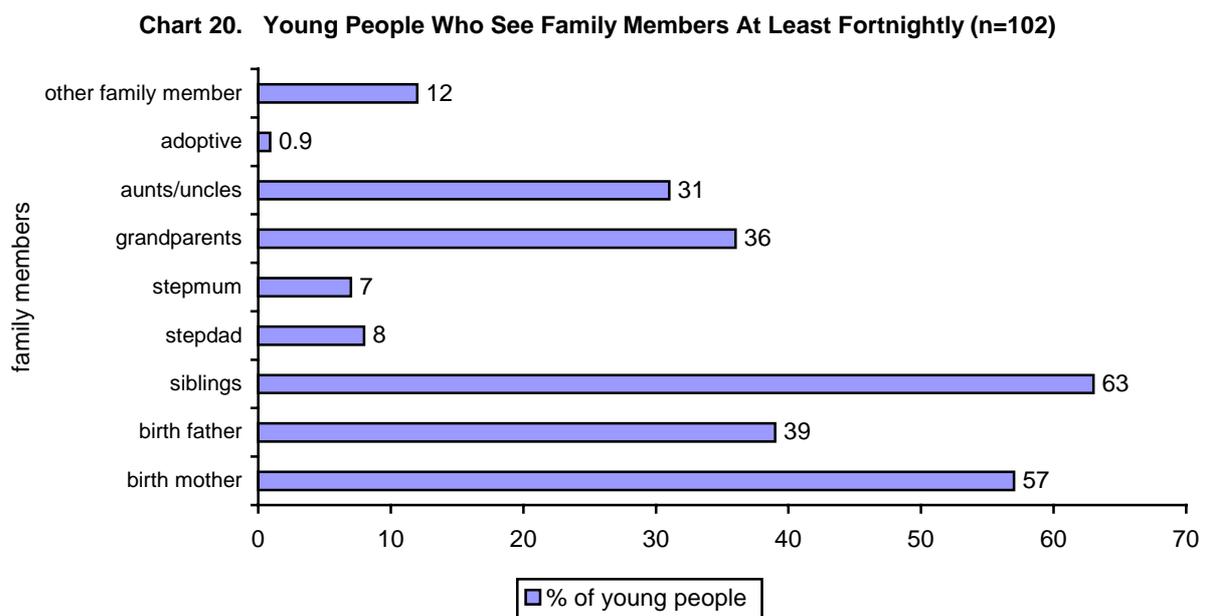
Most young people (n=61, 57%) saw their birth mother every two weeks however, over half (n=32, 52.5%) of these young people were living at home with at least one parent at the time of reporting. Analysis carried out on those young people who were living away from home and who had supplied relevant information (n=64) showed that just under half (n=29, 45.3%) saw their mother at least fortnightly.

Almost two thirds (n= 68, 63%) of the young people for whom we have information on family contact reported seeing their siblings every two weeks. There was no significant difference between those who lived at home and those who lived away from home (p=0.612).

In terms of contact with extended family, around a third saw grandparents and aunts & uncles at least every fortnight (36% & 31% respectively). 'Other' family members included cousins, stepsiblings and foster parents.

Sixty-one young people provided information on *contact* with their birth family at T1 and T2. Most, (n=51, 83.6%) had contact with their family at both points in time. Of the ten young people who had not had contact at both points, six had no contact at T1 although by T2 two appeared to have established contact. Four young people had contact with their birth family at T1 but had no contact six months later at T2.

Young people were also asked to specify which family member they felt close to. Of the ninety-eight young people who provided a response, 44.9% identified their mother, with siblings (17.3%) being the second most common response and grandparents (9.2%) the third. Over a tenth (16%) of those young people who felt closest to their mother did not see her on a regular basis (i.e. at least every two weeks).

In terms of emotional and practical support, 43.9 % of young people said that they could turn to a family member if something went wrong in their life. Parents were cited most commonly but siblings, grandparents and aunts featured prominently. Of the ninety-nine young people who said that they had someone they could talk to if they were feeling unhappy or lonely, 51.1% felt that they could talk to a relative.

Overall, young people in our study reported links with immediate and extended family and most (96.7%) found contact helpful. Whilst workers did not always agree that contact was helpful (only 66% described the young person's contact with family as helpful) an important issue is that young people *perceived* family members to be there for them.

Friends

Friends can be an important source of emotional and practical support. The feeling that one is part of a group can be both reassuring and important for self-esteem and identity. Although the quality and nature of friendships were not explored in detail, we were able to draw upon the perceptions of young people to provide an overview of the pattern of social networks and informal social support experienced by young people in the study.

The majority (n=87, 82.1%) of the survey reported having one or more close friendships at the point of entering the study with slightly more girls than boys reported having close friendships (55.2% & 44.8% respectively). Just under a fifth of the survey however, had either some friends but no one close (n=14, 13.2%) or no real friends at all (n=5, 4.7%). Just over a tenth (14.9%) of young people said they would turn to a friend for help if something went wrong in their life and almost half (46.7%) said that if feeling sad, depressed or lonely, they had a friend they could talk to.

Many young people had experience of long term friendships both with friends they had met before care as well as through being in care. Some feelings about friendship and support are expressed below:

" (I've) known friends for over 5 years, before care. Can rely on them for advice, guidance and support." (Carrie, Shire)

"Known them a few years. Met them after I came into care. Definitely can rely on their advice. Sometimes don't take it." (Emily, City)

"6yrs I've known her. Met her when I was in foster care. Could ask her for advice, talk to her about most anything." (Nicola, City).

"One of my good friends I have known since I was born. I have only one friend that I have known through care. The rest of my pals I have known since leaving care. Most of my friends give me help when I need it. They listen to me when I have problems." (Craig, Shire)

Some of those who had said they had one or more close friends felt that they could not share their problems with them:

"Lots of people I hang about with but I wouldn't share my inner thoughts with" (Lyn, City)

"I met them when I was in care. I wouldn't go and see them for advice and support" (Oliver, City)

"I know them from hostels, homes, my mum's home area. Couldn't rely on them though". (Brain, City)

Just over a fifth (n=14, 21.2%) of young people who had been looked after away from home said that they had stayed in touch with the young people they had lived with whilst in care, some of whom had become girlfriends or boyfriends.

Several mentioned the problem of losing friends through a change in their circumstances:

"I had quite a lot of friends, but I moved area and I'm one for working a lot so I had a job that involved getting up early and working late. So basically my friends lost interest, because I wasn't going out. They kind of just dumped me you know." (Lucy, City)

" I had quite a lot of friends…some I see more often than others because I'm pregnant and can't go out the same and socialise with them." (Helen, Shire)

A few young people highlighted the negative side of friendships such as peer pressure, hanging around with the wrong crowd or getting involved in trouble with people they were in care with. One young person

found that trying to make a new start for himself by staying out of trouble had brought isolation from friends, most of whom were still involved in offending or were 'locked up'.

> "Most of my friends are in jail, I'd say three close friends and they're all locked up and I don't have any real friends now ….coz I've moved on a bit. if I kept on going the way I was going, I was going to end up with them." (Josh, City)

Partners were also mentioned as a source of support whether it was someone to talk to or rely on for help and advice.

Where support was available from family and social networks, it was clearly valued by young people. Many mentioned their partners, friends and family when asked to outline the **good** aspects of their life, as the following responses illustrate.

> "My girlfriend Fran and my baby boy Jamie." (Jay, City)

> "The good things in my life at the moment is I am getting on much better with my family, my sister has got a baby who I am going to see and I have a new home of my own and I am engaged to my boyfriend.. everything, I am happy." (Tracey, Shire)

> "I love my boyfriend so much so I guess that's it, my boyfriend [and] where I live, my mum and gran are nearby and my little sister." (Maggie, County)

> "Just now I have plenty of friends who I can trust and a boyfriend who I like very much. I am happy where I stay and the amount of contact I have with my sister and brother. I get on well with my carer." (Sharon, City)

> "My family are good to me and my mum keeps me going with money and things, I like my friends [and] I managed to get a ticket for the rangers game." (Phil, City)

> "I'm engaged to my girlfriend, back with my family and life is good." (Alan, City)

> "Well I'm going out with a boy and have been since June of last year, I'm going to be moving out soon to live with my boyfriend as I'm expecting a baby so my life's brilliant at the moment." (Lois, County)

At T2 Lois told us the good things in her life where:

> 'Having a child, my own house and a boyfriend I really love.'

Throughcare

'The local authority has a duty to provide advice and assistance with a view to preparing a child for when he or she is no longer looked after by a local authority.'

The Children (Scotland) Act 1995 Regulations and Guidance – Volume 2

For most young people preparation for adult life is a gradual process beginning in childhood and progressing with increasing age and personal development. It is also a supported process usually taking place in the family and it is a participatory process involving discussion - or arguments - as well as negotiation, risk taking, making mistakes and trying again. Finally, it is also holistic in approach attaching equal importance to practical, emotional and interpersonal skills. This is the throughcare challenge, preparing young people for leaving care (Stein and Wade, 2000).

Preparation & Planning for Moving On

Information provided for 73.8% of the survey sample indicated that **just over a third (39.2%) had received a planned programme of preparation.** The majority (60.8%) had not. An area analysis revealed no difference between the three authorities (p=0.428).

Most (52%) of the young people who had received a service began their programme at 16 years of age with a third beginning at 15 years. The remaining cases were 14 (3.2%), 17 (6.5%) and 18 (3.2%) years old.

During the initial policy survey we found that although young people looked after at or returning home were legally eligible for throughcare and aftercare, in practice they were not always offered a service. During the course of the current analysis we did find evidence that this may be the case for young people in the sample. For example, less than a quarter (20.8%) of young people who had been looked after at home had received a planned programme of throughcare compared to over a third (38.5%) of foster care placements, and half of young people placed in residential care. However, this difference was not statistically significant (p =0.449).

Reasons most commonly stated by workers for young people not receiving a planned programme of throughcare included:
- The unwillingness of young people to engage with support programmes;
- Their residence in or return to the family home where policy deemed support was only available in the event of a crisis;
- Young people had moved on sooner than anticipated;
- The lack of a formal plan or programme available.

One worker explained that because one young person had *never* been allocated a social worker the throughcare team had not been approached.

Workers who provided information for the study identified a range of people and services who were involved in delivering throughcare to those young people who had received a planned programme. Whilst specialist leaving care workers and social workers tended to take responsibility for co-ordinating services, sources of preparation and support ranged from carers (family, foster and residential) to Barnardo's 16+ staff and specific area based youth projects. Teachers, health care workers, employment and housing services were also identified. In some cases workers reported that whilst a formal programme had not been offered, foster carers or residential workers had undertaken 'some preparation' with the young person.

An essential part of the throughcare process is ensuring that young people are equipped with the basic skills and abilities (both practical and emotional) necessary for them to make a successful transition to adult life. Young people were asked whether or not they felt that they had received enough information and support in a range of life skill areas, prior to them leaving care. As Chart 21 shows, **the majority of young people in the sample felt that they had received enough support in most life skill areas with the exception of budgeting** where almost a third (31.4%) of young people reported having had no information or support.

Chart 21. Life Skills Preparation
*information & support*
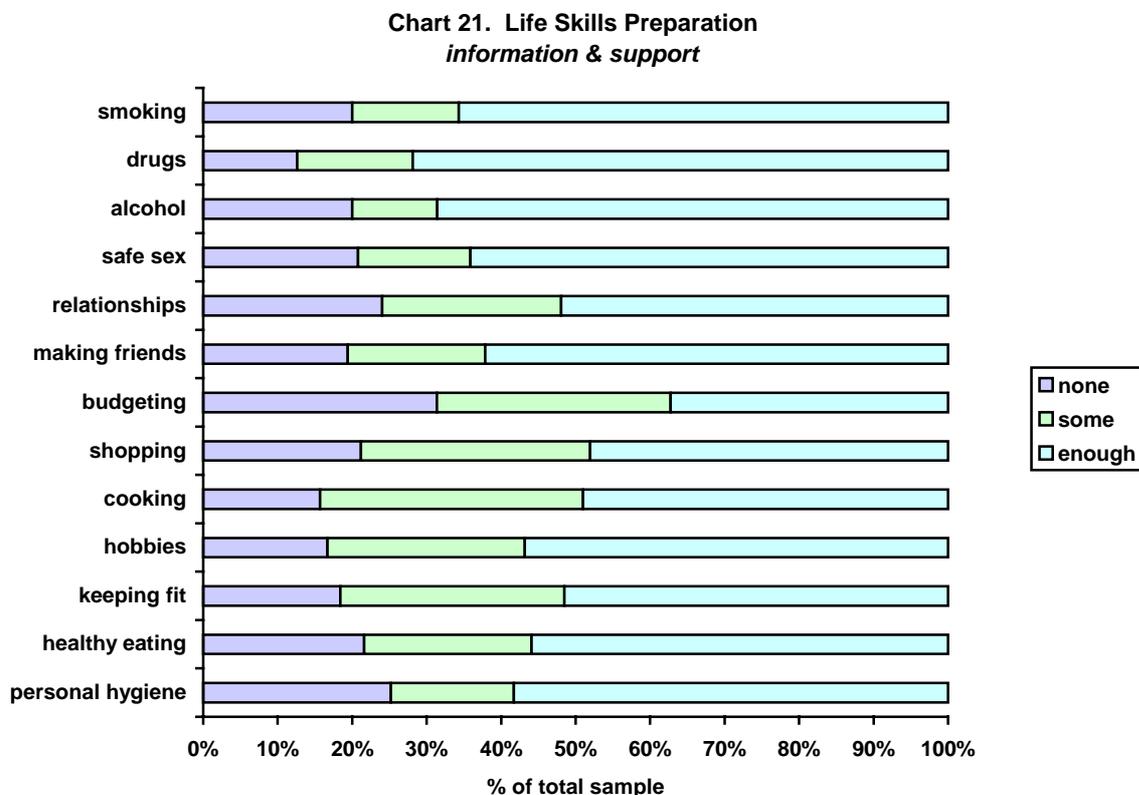
Who Helped?

Young people were asked who had been involved in *preparing* them for adult life and how helpful they had been. Table 15 illustrates the pattern of responses from the total sample (N=107) and shows that specialist leaving care workers along with parents and foster carers were considered as being most helpful in the preparation process.

Table 15.   Who helped?

Who was involved	% of total sample who identified this person	% of those young people who identified this person		
		very helpful	some help	no help
Parents	86.9	41.9	29.0	29.0
Social worker	96.3	26.2	44.7	29.1
Specialist leaving care worker	66.4	46.5	23.9	29.6
Foster carer	54.2	39.7	17.2	43.1
Residential worker	53.3	24.6	40.4	35.1
Teacher	75.7	32.1	35.8	32.1
Friends	91.6	31.6	46.9	21.4

We also asked young people who had helped them to *plan* what they would do after they had left care or moved to independence. As shown in Chart 22, almost half of the young people in the sample acknowledged the role of specialist leaving care workers and social workers in the planning process. 'Others' who had helped included friends and partners, Barnardo's 16+ staff, Homeless person's officers and the church.

Chart 22.   Planning for Leaving Care

Category	number of cases
other	19
residential worker	27
fostercarer	17
specialist leaving care worker	45
social worker	49
other relatives	14
parents	27
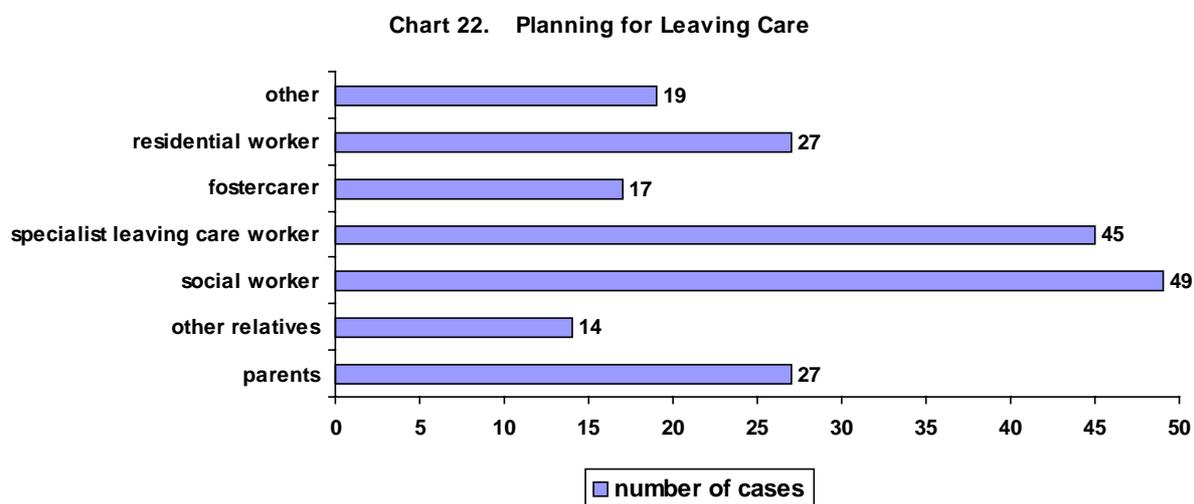
In terms of planning young people's move from care, information supplied for 70% of cases suggested that **a formal leaving care review had been held for 60% of young people** in the sample at an average of seven weeks prior to them leaving care.

Workers were asked to identify the main areas in which an assessment of need had been made for young people during the leaving care planning and review process. Information supplied for 64.5% of the sample

demonstrated the emphasis placed on traditional areas of support such as accommodation and education & employment (addressed in 75.4% and 88.4% of cases respectively). In over half of cases future sources of professional support (68.1%), informal support networks (65.2%), financial skills (60.9%) and life skills (50.7%) had been addressed. However, **less than half of these young people had been assessed in terms of welfare benefits (43.5%), health needs (37.7%) and leisure options (27.5%).**

Aftercare

'*The local authority has a duty unless they are satisfied that the young person's welfare does not require it, to advise, guide and assist such a young person in their area who is not yet nineteen years of age...The local authority is empowered to assist the same category of young people.. who are at least nineteen but less than twenty one.*'

<div align="right">The Children (Scotland) Act 1995 Regulations and Guidance – Volume 2</div>

Formal Support

Providing effective support in the months after moving on relies on contact with support workers (social workers or specialist leaving care workers). Information gathered for the sample as a whole (n= 107) revealed that just under two thirds of young people had such contact. **Over a third (37.7%) of young people had no contact with either a social worker or a specialist leaving care worker at the point of entry to the study**. A fifth of young people (20.8%) said they had contact with both whilst just under a fifth (18.9%) only had contact with a specialist leaving care worker. Twelve per cent were still in contact with a social worker and 10.4% were not sure if they had contact with either.   As outlined earlier, young people in the total sample had left care between 1 and 24 months prior to joining the study, (mean = 6.62 months) and were therefore at different stages of transition at the time of supplying this information. However, analysis indicated that the number of months since moving on had no significant effect on whether or not the young person had contact with a social worker or specialist leaving care worker (p=0.673). An area analysis showed that around a third of Shire (28.6 %) and City (37.3%) respondents had neither a social worker or support worker, and almost half (46.2%) of County respondents were without support from these workers. This difference was not statistically significant (p=0.841)

Young people from the follow up study (n=61) were asked whether or not they had contact with a social worker and specialist leaving care worker at T1 and T2. At T1, an average five months after moving on, more than half of young people reported that they did not have a social worker (54.1%) and a similar proportion said they did not have a specialist leaving care worker. Over a third (42.6%) had neither a social worker nor a specialist leaving care worker at T1, although 16.4% reported having both. There was some evidence that young people were unsure as to who was working with them. For example, 6.6% thought they had a specialist leaving care worker but weren't sure whether they still had a social worker and the same proportion were not sure whether they had a specialist leaving care worker.

Information gathered during our final contact with the follow up sample (n=61) at an average of 11 months after moving on, showed that 29.5% said they still had contact with a social worker. For those who did not have contact with a social worker, the majority (64.1%) had ceased contact more than six months ago.

Over half (52.5%) of young people had had some contact with a specialist leaving care worker during the follow up period and the majority of them (84.3%) still had contact at T2.

Young people who still had contact with a social worker or specialist leaving care worker at T2 were asked how often they saw them. Chart 23 below illustrates the responses.

Chart 23. Frequency of Contact at T2
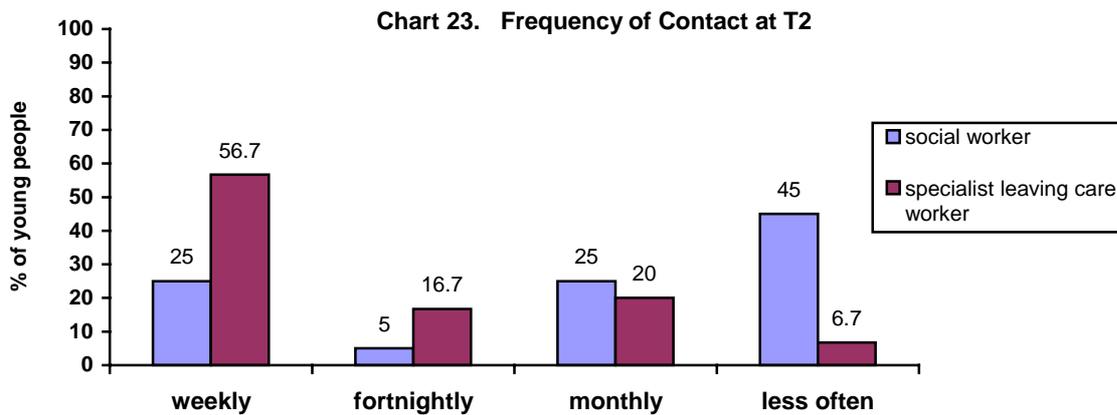
The nature of this contact was explored to see whether there was any difference between social workers and specialist leaving care workers. Almost half of those with a social worker said that most contact tended to be at the young person's request (44% of cases). For the remaining cases, most contact was either planned by the worker (27.7%) or in an emergency (27.7%). For those who had contact with a specialist leaving care worker, the majority (74%) said that contact was planned mainly by the worker.

Young people who had contact with a social worker or specialist leaving care worker at T2 were asked whether this contact had been helpful over the follow up period. As chart 24 shows most felt that it had been.

Chart 24. Contact With Social Worker & Specialist Leaving Care Worker
Since Leaving Care
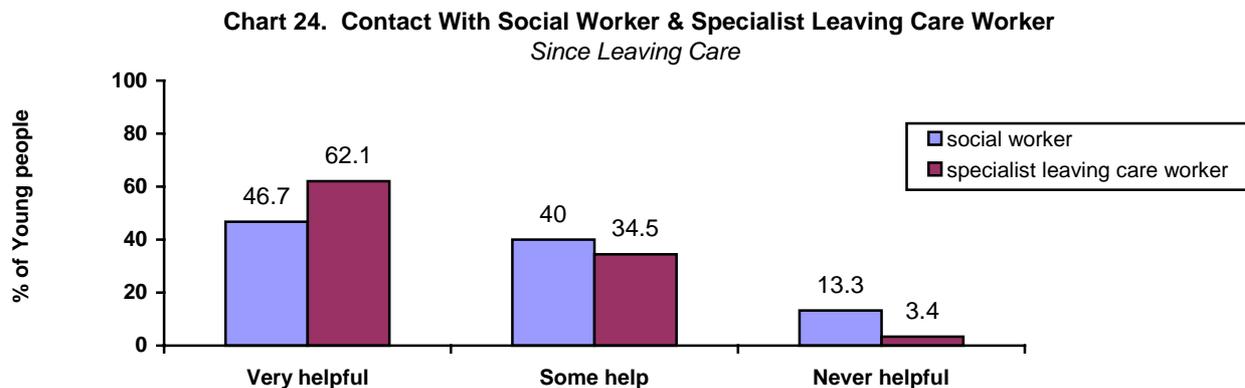
There were many positive comments about support from workers. Although most young people simply listed the main aspects of support e.g. 'help with money' or 'help with getting my own house' a few were able to sum up their experiences of support:

> *"In the time I've been in care I feel that lots of people try to help in everyway they can. Although some social workers didn't seem to help as much as others, you always got that social workers would try hard for your sake." (Sharon, City)*

> *"The stereotypes of care is not really what it's all about at all. Social workers are not bad devils, they are…looking after your best interests."* (Emma, County)

> *"My social worker was a great help to my family and I."* (Carrie, Shire)

Some of the reasons that young people found the services unhelpful are outlined below. Common themes were feeling let down and unsupported.

> *" I felt abandoned when the supervision order was removed….I never knew my social worker. I never saw one even though I was on a supervision order"* (Brett, City)

> *"I never got much help from the social work, whenever my aunt asked for anything for me she was told it would take time, then it was forgotten about. At the last social work meeting, the day I came off my order, we were promised a visit from them to help me and we were never contacted again. The social work department never helped me in any way." (Charlie, City)*

> *"I think what is needed is for more social workers to have had experiences of not going to school, being in care – it might mean they'd have more understanding of how it feels for young people."* (Iris, County)

Other complaints included social workers not turning up on time or being unavailable when the young people had tried to contact them.

> *" My social worker is very difficult to get hold of. She is either ill or in a meeting. I haven't spoke or seen her in a few months."* (Gill, City)

> *"Throughcare need to get themselves together.[they] mucked us about, me and foster carer had to do most of the running and finding things out."* (Emma, County)

Information and Support with Life Skills

Young people in the survey were asked whether they had received support or information from their workers in each of the main life skill areas since leaving care. The chart below illustrates responses from the total sample (n=107). As discussed earlier, some of these young people have not had contact with a social worker or a specialist leaving care worker during this time.

Chart 25.   Life Areas & Support
from social workers & specialist leaving care workers
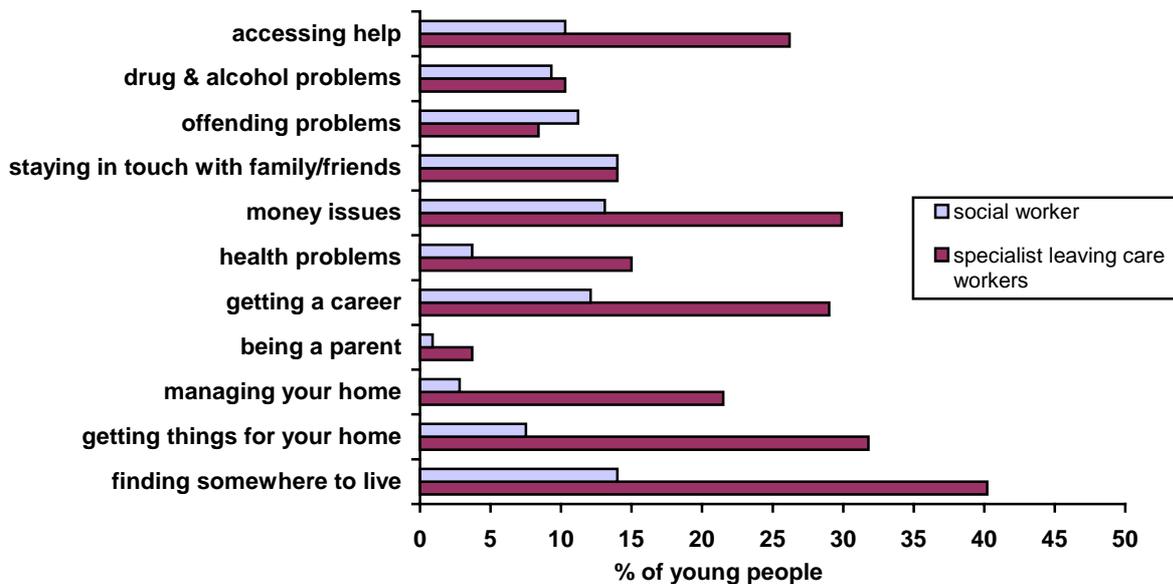
In addition to help from social workers and specialist leaving care workers, young people were asked about other sources of professional support or advice that had helped since they left care. As chart 26 shows, most young people (74.1%) had been in contact with the careers agency and the job centre (67.9%) and over a quarter of those who had, said that this contact was very helpful (26.3% & 30%).

Chart 26. Support From Other Professionals (N=85)
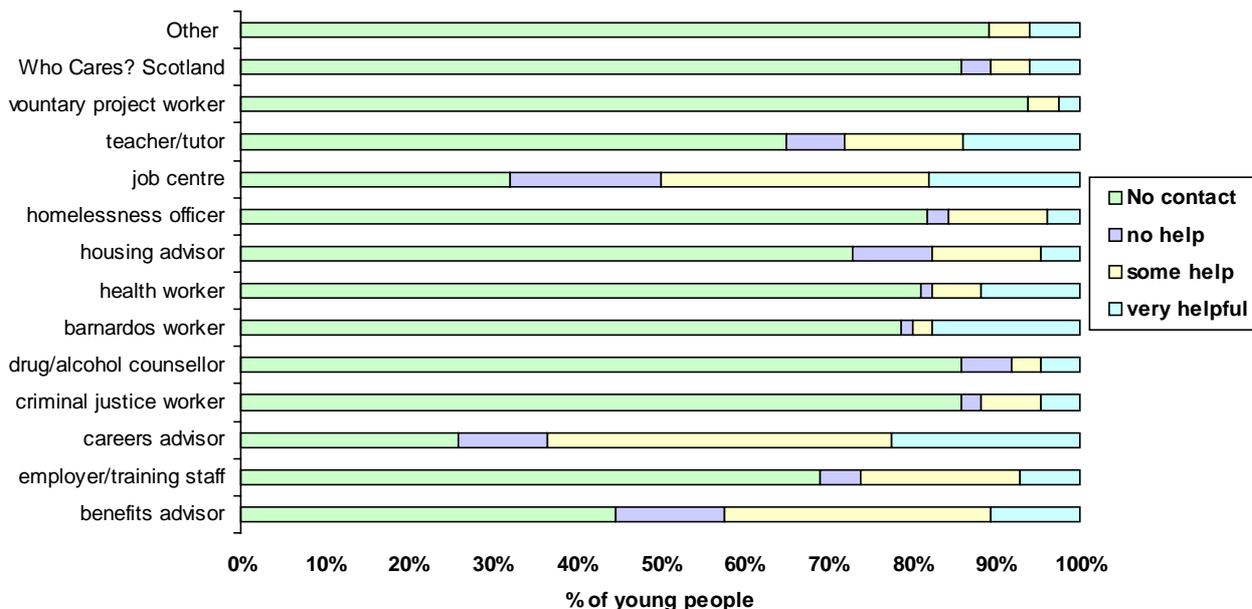
Young people were asked to comment on the help or lack of help they had received from these services. Their experiences illustrate both the variety of need, which is often emotional as well as practical, and what they had found useful.

> *"My careers advisor is very good and listens to what I want to be doing with myself instead of putting me anywhere and that's it. I see her every week or two weeks, whatever I can manage." (Corrine, City)*

> *"Other workers in my placement and in a project which I attend help me to deal with feelings..[I'm] getting help from my college tutor who will talk to me about anything to do with my course or life." (Alan, City)*

> *"The drug counsellor was helpful because it basically got me realizing what the stuff was doing to me. Helping me to get back on my feet. Employer, well I needed the money and my employer helped me with my wages and stuff. The job centre helped to get me from the dole to a job. They were always like phoning me up and saying there's a job there.*" (Lucy, City)

> *"Who Cares? Worker and children's rights officer helps to mediate between me and my foster family. They also help get me involved with group work. Barnardo's workers helping me with housing and moving to independent living and psychologist and CPNs helping with issues …I find difficult to deal with. College tutors always helpful when I struggle emotionally at college."* (Amy, Shire)

> *"My support unit teachers were helpful. They worked with me my way. I got an afternoon off. Benefits, they made me wait three weeks for a decision. They arrange a home visit then I had to chase them up to find out what was happening. [The job centre] they just sent me to the social."* (Heather, County)

> *"Health visitor gave advice, got me access to services for my child that GP didn't offer. The job centre just told me I couldn't go for jobs I wanted coz too young [and] not enough qualifications…the homeless officer just moved us when we complained, didn't try to deal with the complaints and get us extra facilities. I complained about lack of cooking facilities so she moved us to a hotel with no cooking facilities."* (Anna, County)

> *"[Careers] they weren't listening to me. I changed what I wanted to do but they wouldn't listen so I never went back. [Housing] I just argued with them constantly, no help with rent arrears they couldn't understand the situation I was in. CSV've been amazing getting me my volunteer placement. If I ever need help and support they are there.*" (Deb, City)

Coping With Adult Life

One indication of whether or not young people have been adequately prepared for independent living is how well they feel they are able to cope with looking after themselves. Young people were asked to say how well they were able to manage in a range of life skill areas.

As chart 27 indicates, **in eleven out of twelve life skill areas, at least 70% of young people in the survey felt they were managing well**. However, more than half (52.9%) felt they were not managing well with budgeting their money. This was particularly so for young men in the survey who were less likely to have reported doing 'quite well' or 'very well' with budgeting (26.8% compared to 73.2% of young women) (p=0.007).

Chart 27. Coping With Life Skills (n=87)
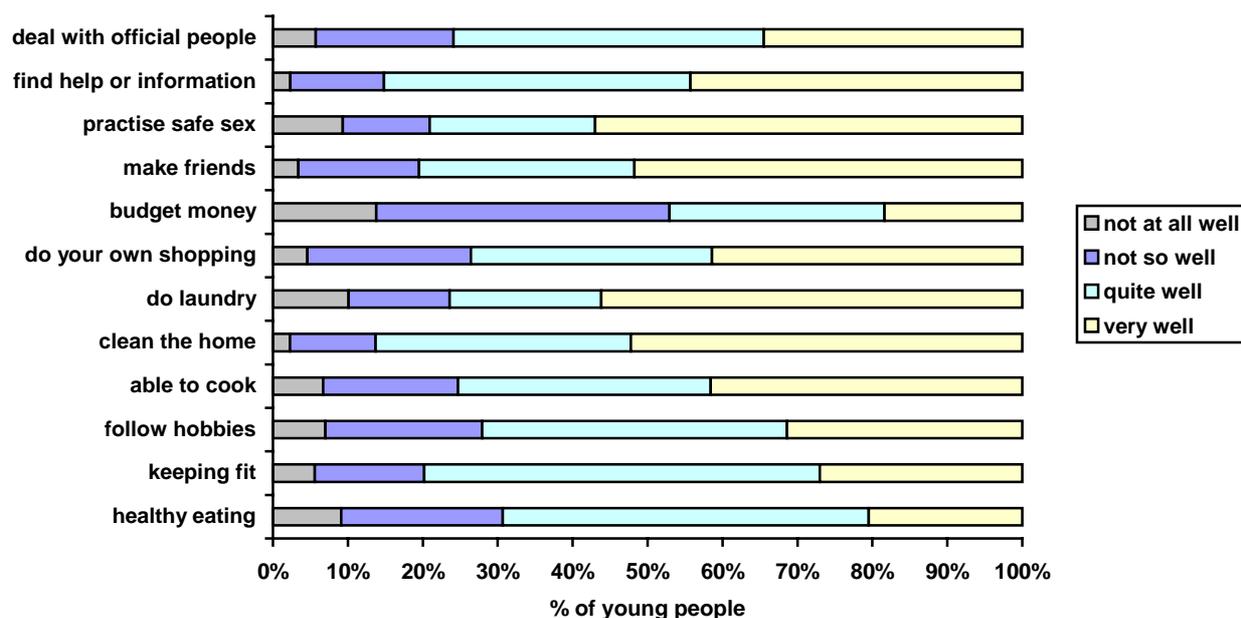
A range of issues came up during the course of exploring young people's abilities to cope with these areas. For example, most had received some form of preparation during the time they were looked after. Many mentioned the help of residential workers, foster carers and parents in terms of household tasks and cooking:

> *"Cooking I learned from my dad, plus I'm a chef now. Cleaning, in the [children's] home we were made to do it as a chore plus my mum is very house minded. [laundry] learned in children's homes and homeless units."* (Andy, County)

Some young people talked about the barriers they faced in developing these skills:

> *"Cooking, you can't cook in here [hostel] I haven't had the chance anywhere I've lived."* (Brian, City)

> *"Not hobbies – swimming has become too expensive [and] my skates are broken and I can't afford to fix them."* (Donald, County)

> *" I just can't really eat healthily at all. I think it's something from the past, you know through growing up and just being left to do my own thing…I was just too used to eating rubbish."* (Lyn, City)

Eating 'rubbish' featured in a number of responses. Although most young people felt that they managed to eat healthily, many commented on the problem of shopping on a limited budget, looking for ' bargains' or ending up snacking or living on fast food such as McDonalds as in Nicola's case: *"I don't eat meals, just snacks and crisps."*

Finally, young people in the survey were asked whether they would have liked more information and support from their social worker or specialist leaving care worker. Chart 28 below shows the percentage of young people who said they would have liked more help in each of the following areas.

Chart 28. More Help & Support (n=89)

Category	% of young people
keeping in touch with family or friends	19.1
parenting or child care issues	6.7
developing skills for adult life	33
finding somewhere to live	33.7
managing your home	29.2
finding a career	39.3
money & budgeting	47.2
health problems	10
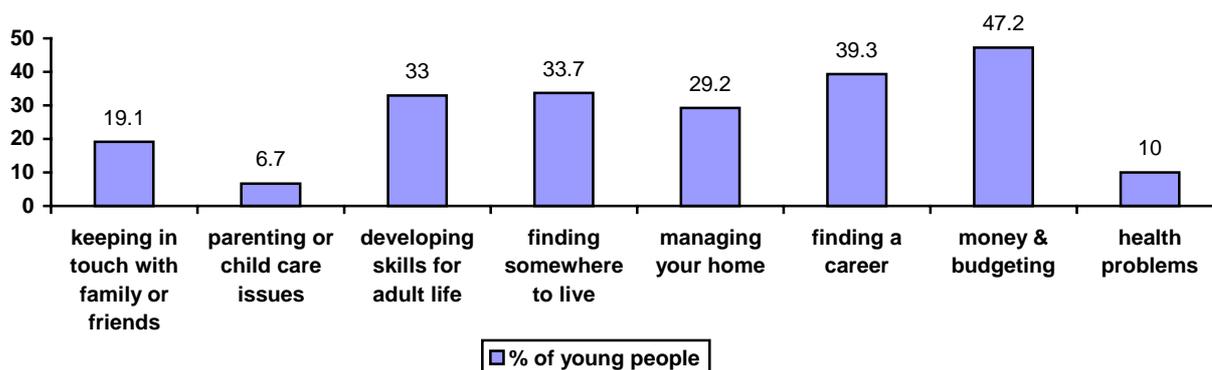
Males in the survey were more likely than females to have wanted further support with keeping in touch with family and friends (24.3% compared to 17% of females), managing a home (42.4% compared to 27.3%) and finding either education, training or work, (50% compared to 35.4% of females).   We also found that a greater number of young people in County would have liked more help from their social worker or specialist leaving care worker with finding somewhere to live (52.6% compared to 37.2% in City and 21.1% in Shire).

In summary, we found that although throughcare and aftercare provision was available for most young people, those remaining or returning home were often overlooked. Those young people who had received a service generally found it helpful although budgeting, health and leisure appeared to be given less attention than more traditional areas and a third of young people would have liked more information or help in developing skills for adult life.

Young people were clearly making use of other services and agencies. For some however, the level of assistance did not live up to their expectations or needs.

Specialist leaving care workers were generally viewed more positively than area social workers, although there was some evidence that young people were confused as to who was or should be working with them. Young people's comments about their workers highlighted the issues of reliability (turning up late or not at all), following through on commitments, involving young people in decisions and listening to and addressing their needs.

Support from social workers and to some extent, specialist leaving care workers, tended to fall away in the early months after leaving care, again this was particularly so for young people retuning to or remaining in the family home. Whilst there was evidence of continuous support throughout the six-month follow up period for some young people, others had taken up or returned to services at various points after leaving care. Having the option to access and return to these services when in need was clearly important.

4.4. What makes a difference?

starting points, interventions and outcomes

This chapter seeks to explore some of the general characteristics, experiences and post care circumstances of young people who took part in the follow up study, in order to cast some light on both their care outcomes at T1 (starting point for the follow up study) and their outcomes at T2. Whilst these young people will have had a variety of experiences and are likely to be at varying stages of their transition to independent living, it should be possible to identify some of the factors which influence the likelihood of successful and unsuccessful outcomes.

Knapp (1989) describes outcomes as the effects or results of a process. For the purpose of this study the 'process' may be seen as a combination of care experiences and the support or intervention young people have received. Because support often serves as a mediator between care experiences and outcomes we will look at the two aspects of this process separately. First, in terms of selected elements of care experiences (predictors) and second, the presence or lack of support (intervention).

Bivariate and multivariate analysis was employed to tease out factors which influence outcomes for these young people. It is important to note however, that statistical analysis was ultimately restricted by the small sample size and to a lesser extent, the short follow up time span. The main focus has therefore rested with qualitative evidence from selected cases. The selection of cases was guided by outcomes and progress over the follow up time span. For example, a proportion of those whose outcomes had improved, remained constant and deteriorated were extracted for qualitative analysis.

This section concentrates on the follow up sample only, which comprises of young people who provided information at T1 and again six months later at T2 (n=61).

Almost two thirds (63.9.%) of these young people had been looked after away from home in either foster care (27.9%), residential care (24.6%) or other placements including independence units, supported lodgings and other relatives (9.8%). Just over a third had been looked after at home (36.1%). 1.6% had missing information.

Over half of the follow up sample (55.7%) had moved to a range of independent or semi-independent accommodation at the point of entry to the study, 44.3% had remained or returned home after leaving care.

Over half were female (59% compared to 41% for males) and the majority came from City (59%) whilst 23% came from Shire and 18% from County.

Predictors

Previous research points to a number of key factors which may influence life chances of young people moving on from care. By examining whether or not these factors have an influence on outcomes it may be possible to use the presence of these factors to 'predict' whether or not a successful outcome may be achieved or expected.

Young people in the follow up sample were categorised as having good or poor predictors across a range of measures. It should be noted that the terms 'good' and 'poor' have been used for the purpose of distinguishing one group from another i.e. it is often the case that young people fall into these groups by being better or worse than each other and as such the terms should be seen as relative rather than examples of what would generally be termed good or poor.

Age At Moving On

Evidence from previous research suggests that young people who leave care early for independent living are accelerated towards adult responsibilities (occupationally, financially and personally) far sooner than their non-looked after peers. Such young people may face increased chances of financial hardship, unemployment and homelessness.

The majority of young people in the follow up study who had *moved* to independent living had done so at 16 years of age (51.8%). Similarly, for those young people who had either remained at home or with foster carers or returned home after leaving care, half had been discharged from care at 16 years old.

Almost three quarters (71.7%) of young people in the follow up sample had left care or moved to independent living (moved on from care) before the age of 17. Chart 29 shows the age range for the follow up sample.

Chart 29. Age At Leaving Care or Moving To Independent Living
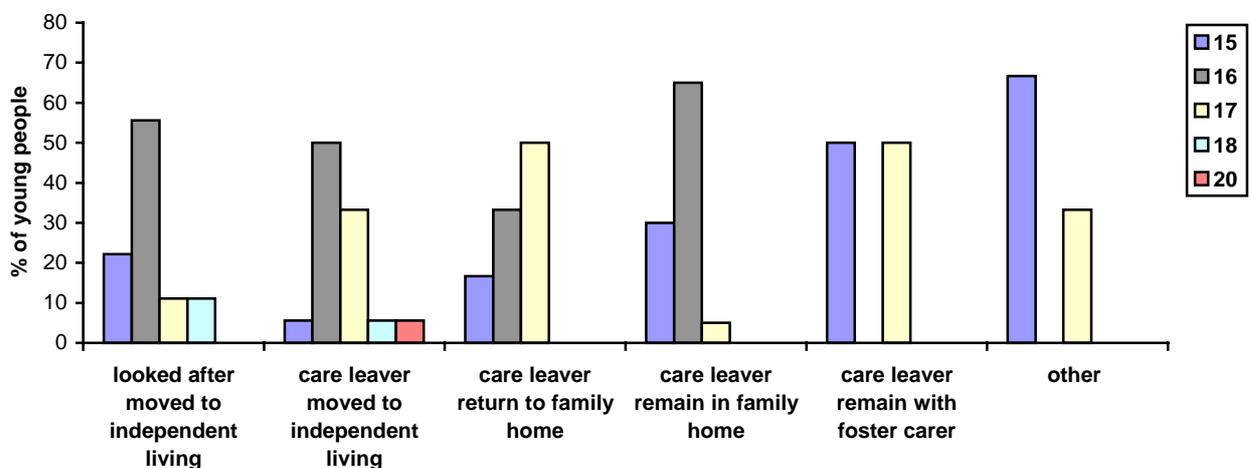
In terms of assessing predictors, those who had moved on from care before the age of 17 were categorised as 'poor' (71.7%) whilst those who had moved on from care at 17 or above were categorised as 'good' (28.3%).

Placement Movement

Movement in care placements can lead to disruption in a young person's personal, emotional and educational development. Frequent placement moves may result in difficulties in forming attachments, poor educational attainment and subsequently an increased likelihood of unemployment and financial hardship. Stability of care placement is therefore important for establishing continuity of care and promoting positive life chances.

Almost a quarter (24.3%) of young people in the follow up study had experienced four or more placement moves during their last care episode. The average number of placement moves for this sample was two. Those who had experienced more moves than average (3+) were categorised as having poor predictors (31.5%) and those with average or less moves (0-2) had good predictors (68.5%).

School Non-attendance

Young people who miss school either through exclusion or truancy are at greater risk of leaving school early and doing so with fewer qualifications. This can have far reaching consequences in terms of employment, financial independence and stable housing arrangements.

Over two thirds of our follow up sample had been excluded from school. These young people were categorised as having a poor predictor (67.8%). Those who had not been excluded were assigned a good predictor (32.2%).

Truancy was very common, in the sample however, some degree of truancy is perhaps to be expected. Truancy predictors were therefore divided into three groups: good for those young people who said they had never truanted (14.8%), fair for those who had done so occasionally (32.8%) and poor for those who had truanted often (52.5%).

Family Support

Research indicates that good family links and support can lead to positive outcomes. Family support is important for practical help e.g. with accommodation and finding work, financial assistance and emotional support. Biehal also found that it promoted stronger relationship skills. (Biehal et al, 1995)

Good and poor predictors were determined on the basis of contact with the young person's birth family and whether or not they considered this contact helpful.

Those who described their contact with a family member as sometimes or mostly helpful were categorised as having a good predictor (85.5%) and those who had no contact or had unhelpful contact were categorised as having a poor predictor (14.5%).

Intervention – Throughcare and Aftercare Support

An indication of throughcare support was derived from asking workers whether or not a young person had received a planned programme of preparation. Less than a third (27.9%) of young people in the follow up study had. **Over half (55.7%) had not received a planned programme** and in 16.4% of cases the worker was either unsure or had not provided information.

Support from social workers and specialist leaving care workers was assessed in terms of contact with the young person at T1 and T2. Table 16 below, indicates the presence of support.

Table 16.   Support at T1 & T2

	Social worker		leaving care worker		Social worker & leaving care worker	
	yes	no	yes	no	both	neither
T1	37.7%*	54.1%*	34.4%*	54.1%*	16.4%	42.6%
T2	29.5%*	68.9%*	44.3%*	55.7%*	19.7%	44.3%
Contact at bothT1 & T2	19.7%*	77%*	31.1%*	59%*	6.6%	37.7%

 * young person responded 'unsure' or information missing for up to 6 (9.8%) cases.

As discussed in previous chapters, the provision of support is strongly linked to whether or not the young person was looked after away from home. We found a highly significant association between the presence of support from either a social worker or a specialist leaving care worker at T1 and at T2 and whether the young person had been looked after at or away from home. (T1 $p>0.001$, $p>0.001$ & T2 $p=0.004$, $p=0.001$ for social workers and specialist leaving care workers respectively.)
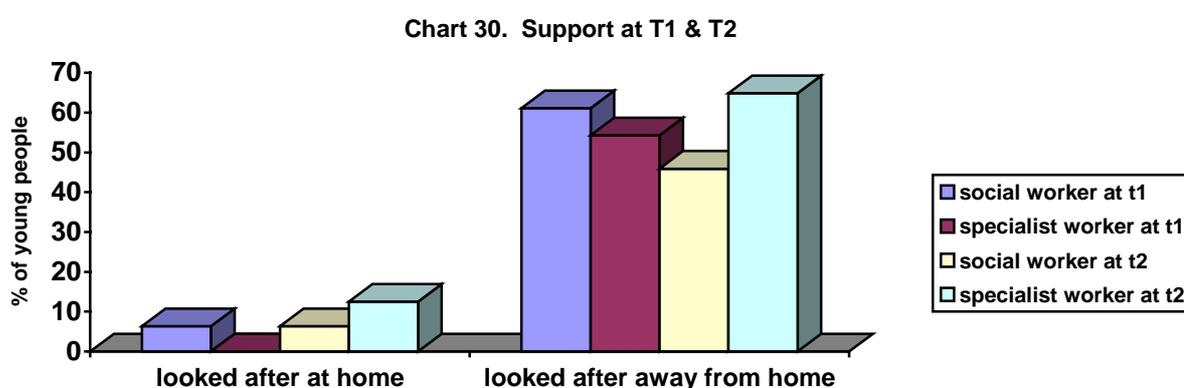
An indication of intervention was constructed by looking at the presence of support from social workers or support workers at T1 and T2**. Over half of the sample (54.1%) had received some intervention since leaving care and throughout the follow up period**. Just over a third had not. A small proportion of the

sample (8.2%) had received limited intervention, e.g. support from either a specialist leaving care worker or a social worker at T1 or T2 only. Again, having received intervention throughout the follow up period was strongly associated with being looked after away from home (83.8% compared to 6.3% of those looked after at home). Of those who had received limited intervention, half were young people looked after at home and half had been looked after away from home (p>0.001).

As an overall measure of support we looked at the presence of contact over the follow up period taking into account young people's perceptions of how helpful it had been.

Good support involved having contact with a worker and finding the contact sometimes or very helpful. Poor support was not having contact or having unhelpful contact. Table 17 gives a breakdown of good and poor support for young people at T1 and T2.

Table 17.   Support from social worker or specialist leaving care worker

	Social worker		Specialist leaving care worker	
	good	poor	good	poor
T1	24.6%	60.7%*	32.8%*	55.7%*
T2	21.3%*	72.1%*	44.3%*	55.7%*

* some young people responded 'unsure' or information missing

<u>Analysing Outcomes - What Makes a Difference?</u>

The main purpose of this section is to look at a range of factors which may have influenced outcomes at both T1 and T2. This includes examining the influence of predictors and intervention on both sets of outcomes. Outcomes at T1 may also be seen as 'starting points' for the follow up study and as such will be measured against T2 outcomes to chart the directions of progress over the follow up period. This assessment of progress in each of the outcome areas will in turn, be considered in terms of predictors and intervention to provide an indication of what factors make a difference in promoting positive outcomes. Qualitative information gathered from interviews with young people will be used to illustrate individual and general experiences.

For young people in the follow up sample information was gathered at an average of five months after moving on from care at T1 and eleven months at T2. This is a relatively short period in which to reach conclusions as to the effects or results of care experiences and intervention. Outcomes should therefore be seen as indications of the progress made by young people as they embark upon the transition to independence and adulthood.

In constructing and grading outcome dimensions we followed a similar criteria to that used in *Moving On* (Biehal et al, 1995).

The outcomes we have used fall into two main categories: 'material' outcomes such as where a young person is living or their occupational status and 'quality of life' outcomes such as how a young person is coping in their accommodation or whether they have a social network of support. The main areas to be measured include accommodation, education & career path, social networks, life skills, and health & behaviour (i.e. physical & mental well being and substance misuse & offending). Outcome areas were measured across a good/poor or good/fair/poor dimension and were based mainly on information supplied by young people however, worker's perceptions, where available, were used to inform the overall decision.

Accommodation
Two accommodation outcome measures were constructed and assessed:

1   Coping Outcomes
At T1, accommodation coping outcomes were measured by the worker's perception of how well the young person was managing in their accommodation. A good outcome included managing well or very well whilst a poor outcome included managing not so well or not at all well. Information supplied for forty-two cases indicated that just over half (50.8%) had good outcomes and just under a fifth (18%) had poor.

At T2 outcomes were based on how well the young person felt they were managing in their accommodation and whether they were experiencing any problems. Good outcomes included managing well or very well, with no real problems and poor outcomes included not managing well or experiencing significant problems. The majority (67.2%) of the sample had good outcomes, 32.8% had poor.

The number of housing moves during the follow up period was considered as an indication of the young person's ability to sustain accommodation. Those who had experienced two or more moves during the six month follow up were assessed as having unstable housing careers (26.2%) Those who had not moved or had done so only once (73.7%) were considered to have stable housing careers.

2   Housing Outcomes
Decisions on housing outcomes were based on a combination of factual information (such as the type of accommodation) and whether the young person considered it satisfactory (i.e. they liked living there some or all of the time). Where available, the worker's perception of whether or not the accommodation was suitable for the young person's needs, was also taken into account.

Good outcomes generally included supported accommodation, a permanent tenancy, staying with relatives through choice or transitional accommodation that was considered as satisfactory and suitable.

Poor outcomes generally included homelessness and less secure accommodation such as bed & breakfasts, staying with friends or relatives out of necessity and any type of accommodation in which the young person was unhappy or that was considered unsuitable by the worker.

Chart 31.   Housing Outcomes
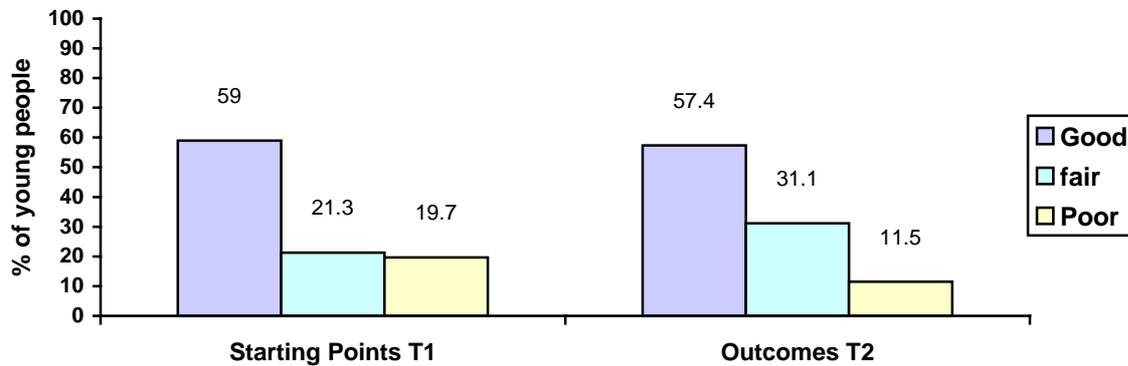
As chart 31 above indicates, just over half of the follow up sample had good housing outcomes at both T1 and T2. Analysis of housing progress showed that there was some improvement in outcomes during the six-month follow up study with a fifth (20%) of young people having improved their outcomes at T2. For a similar proportion however, (18%) housing outcomes had deteriorated although for the majority (62.3%) housing outcomes remained constant over the six months even if the young person had moved.

Housing mobility did not appear to affect housing outcomes. Statistical analysis indicated that there was no difference in the housing outcomes of those who had stable housing careers and those who had unstable housing careers during the follow up study (p=0.178 for the follow up sample as a whole and p=0.443 for those looked after away from home only). For example, of those who had experienced 2 or more moves (26.2%), half had gone on to achieve good housing outcomes and a quarter had achieved fair outcomes; whilst for those who had had a stable housing career, 60% had good outcomes and 33% had fair. This suggests that even for those who had an 'unstable' housing career, movement generally resulted in a positive outcome. This may be seen as a reflection of the emphasis placed upon accommodation by throughcare and aftercare services, as most (75%) of those who had an unstable housing career were receiving ongoing intervention.

Statistically there was no difference in housing outcomes amongst those who had been looked after at home and those looked after away from home (p=0.800). Also, for those looked after away from home, there did not appear to be any association between housing outcomes and a) their care placement (p=0.602) or b) whether or not they had a choice about leaving care (p=0.921). However, we did find a statistically significant relationship between good housing outcomes and poor family links (p=0.034). It is possible that this may be explained in terms of intervention, as all young people with poor family links at T2 were receiving ongoing specialist support or support from a social worker.

We also found that males in the study appeared to be more likely to have a good housing outcome than females (72% of males compared to 47% of females) however, this was not statistically significant at the 95% confidence level. (p=0.069).

Good housing starting points also appeared to have an impact on housing outcomes. Over three quarters (78%) of those who had good housing starting points had achieved good outcomes compared to only 28% of those who had poor starting points (p> 0.001).

An exploration of young people's accounts of accommodation issues offered some indication of what they found helpful.

Just under half (45.9%) of young people had good accommodation at T1 and T2. These young people appeared to have benefited from formal and informal support or a combination of both.

Annie, for example, lived with a supported carer and received ongoing support from a specialist leaving care worker. She also had a steady boyfriend and said that she would turn to either her specialist worker or boyfriend to help her if she were in difficulties.

Jim was also helped by a specialist leaving care worker and keeps in contact with his children's home and family. At the end of the study he was sharing a flat with his partner. He was full of praise for the help he received from his support worker "*He has helped me with everything…if he was not there I don't know how I would have managed.*"

Mary's main support had been provided by her mum – there had been no social work contact since she left care eight months ago.

All these young people had experienced some changes in their accommodation since leaving care. But what was significant was that there was someone who was able to assist them and help them move onto new accommodation and support them in maintaining themselves.

Young people who had improved their accommodation outcomes from poor starting points benefited in the main from formal support.

Alex, for example had eight moves in fourteen months. He had not had contact with his foster carers since leaving at 16. He had lived in a number of different types of abode – bed and breakfast, return to mum then dad, living with friends – but all broke down. He arrived homeless in Shire and was assisted by the Barnardo's 16+ project who arranged supported lodgings and have provided ongoing personal support.

Jenny, a single parent, was also assisted by specialist leaving care workers to return to her mum's house after several accommodation breakdowns.

Young people whose accommodation outcomes had deteriorated during the two points in time (18%) included two young people on home supervision whose relationships with their parents were very difficult – they both wanted to live elsewhere. In Jan's case there was no social work support at all. In contrast,

Sue was receiving a lot of help from specialist leaving care workers and hoped to move to her own flat shortly.

Young people also regarded their accommodation as deteriorating if they were living away from close friends, in run down neighbourhoods and living in bed and breakfast accommodation.

Less than a tenth (5.6%) of young people had poor outcomes at both T1 and T2. One young person had no formal support. Liz, who was on home supervision, received no social work contact after her order had ended, even though her relationship with her mother was very difficult and had broken down on three occasions resulting in her being homeless each time.

A second young person had no contact at all with his family but has been assisted by workers from the Homeless Unit.

The third young person, Sam, had moved 10 times in the fourteen months since leaving care and is currently homeless. He has had no contact with his social worker since leaving care but is currently being assisted by a specialist leaving care worker.

Education and Career

Two outcome measures were constructed for this area:

1) Educational attainment

Young people's educational attainment at T1 was assessed according to the number of standard grades they had achieved at leaving care. The average for young people in the general population is seven standard grades. This average was used to grade outcomes.

Good outcomes were assigned to those gaining seven or more standard grades and fair outcomes were given to young people achieving one to six standard grades. A poor outcome indicated no standard grades.

Chart 32.   Outcomes For Educational Attainment
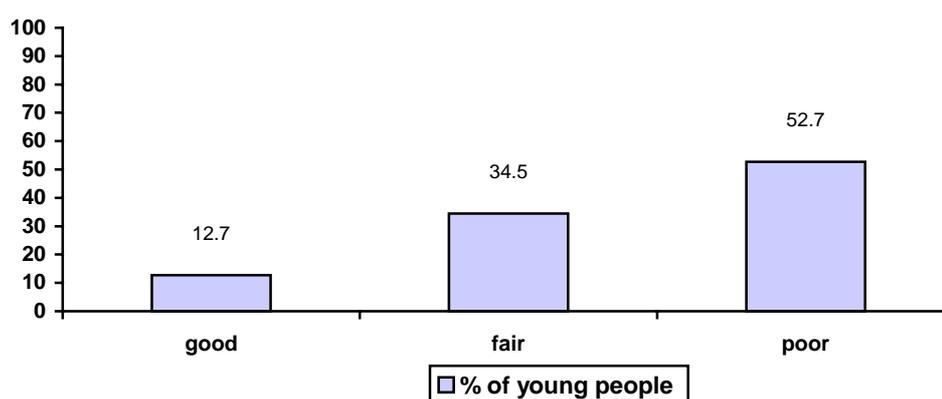
As the chart above indicates, the majority of the follow up sample had poor educational outcomes. A common characteristic amongst this group was their tendency towards truancy with 68.5% having done so often.   In addition to this, almost all (91.2%) of those young people in the sample who had experienced exclusion from school, had achieved less than average educational attainment (32.4% had fair and 58.8% had poor educational outcomes). Over half (57.1%) of those who had good outcomes meanwhile, had never been excluded.

A common factor amongst those achieving good educational outcomes was having a good placement move predictor, that is having two moves or less during their last care episode (100%).

## 2)	*Employment and Career Paths*

Employment outcomes of young people at T1 and T2 were categorised according to the nature of their occupational status.

Good outcomes included employment, education or training and voluntary work if undertaken in addition to either of the former.   Poor outcomes included unemployment and voluntary work. Young women who were caring for their child were treated separately.

Chart 33. Outcomes In Career Path
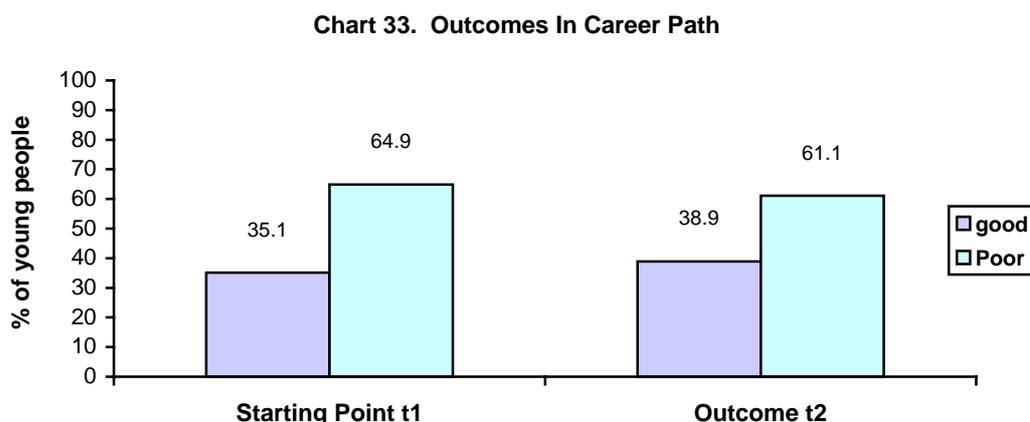
As chart 33 indicates, almost two thirds of the sample had poor outcomes although there was a slight increase in the number of young people achieving good outcomes at T2. Six months offers limited scope to see any dramatic change and indeed, for the majority (73.5%) of young people in the sample, occupational outcomes remained constant over the six month follow up. Unfortunately, two thirds of these had poor outcomes throughout. Over a tenth of young people (15%) had improved outcomes at T2, however, for almost as many (11.3%), their employment situation had deteriorated.

There did not appear to be any definite patterns within or between those achieving different employment outcomes. For example, both groups tended to have poor education outcomes and poor predictors for age at leaving care and placement moves. There was no statistical difference in those who had been looked

after at home and those looked after away from home in terms of employment outcomes (p=0.568) and just over half of young people in both outcomes groups had received intervention throughout the follow up period. Further more, qualitative analysis suggested that many of the young people who had poor outcomes throughout had taken part in employment initiatives and basic skills training. Whilst it is likely that wider social factors will have influenced employment outcomes to some extent, we may assume the existence of a mediating factor which assisted some young people to achieve good outcomes despite having poor predictors. Qualitative analysis of those who had achieved good outcome throughout the follow up period and those who had improved suggested that a common factor throughout was the availability of either formal or informal support.

These young people reported having been assisted by leaving care workers and other professionals such as careers service, the job centre and hostel/homeless unit staff. However, in the absence of these services (or in some cases in addition to) young people had received help from friends and family.

One young man who had been unemployed since leaving care and had attended training courses and a skills for work programme offered through the social work department, had obtained a college place by T2 with the assistance of the programme:

> " I only went a couple of times and they got me straight into college….I hope I stick in at college and get a decent job and a house. That's all I want." (Brian, City)

Abby from City, who had been looked after at home, had failed to get any standard grades and had received no intervention since leaving care. She had however, received help from her mum and sisters to find a training scheme at T2:

> "They helped me get in to the training services…[I'm] getting into training because it's not just for the money it's because I want to be a nursery nurse [and] get my brain working again and getting an income… I have no standard grades and it's much harder to get a job."

Fiona, a young woman who had been in foster care in Shire and who had good educational outcomes told us at T1 that one of the bad things about her life was *"being unemployed and not having much money.*" At T2, having found employment as a care assistant she said :

> "I have not received any [leaving care] services. I didn't feel that I needed any [my] foster carer has been my main source of support. I also get support from my boyfriend and his family. Boyfriend's mum told me about the job. I completed the application form and made phone calls by myself."

It was apparent that having some form of reliable support was common to most of those with good outcomes, and most had good family links or social network outcomes. Those young people without this source of support however, were able to rely on leaving care staff or social workers. One young man who had been "deserted" by his family and had been made homeless on several occasions throughout the follow up period had nevertheless been able to maintain good employment outcomes by managing to

continue working despite fairly chaotic and adverse personal circumstances. When asked to outline any help he had received he told us:

> *"[My] social worker gave me money to enable me to continue to work….he's been my social worker for three years. He's not really my social worker but he has said that I can contact him anytime I need to…he's always there for me and can always help me. If he can't give me what I need he'll find an alternative. He's been a brilliant help to me over the past three years (not like the first social worker I had). He also provided me with references for my jobs. [the good things about life are] I have money to spend, I have a job. I'm doing a job that I've always wanted to do. "* (Barry, County)

Young people who were caring for their child were not included in the outcome categories for employment. At T1 3.4% of young people gave their current occupational status as caring for their child. This had increased almost fourfold by T2 to 11.5%. All were young women.

There is some evidence that, amongst the sample of young people looked after away from home, those who successfully *continued in education* tended to share certain characteristics. Two young people continued in education throughout the study period and one other young person successfully completed their course and found employment. Although the numbers are very small and these findings should be considered indicative rather than conclusive, a brief look at what they had in common may help shed some light on the ingredients that may be necessary for educational success.

First, all three of the young people had been looked after long-term in foster placements, the minimum period being six years. Second, two out of the three had a very stable experience of being looked after and the third, although he had made a number of moves over fourteen years, managed to settle into a stable foster placement towards the end of his care career. Third, all three had experienced few or no problems at school. They attended regularly, had never been excluded or suspended and two out of three attained some qualifications at the end of their schooling. Finally, all were continuing their education within the context of a supported environment. Two had been able to remain with their foster carers after formally ceasing to be looked after and the third was living in a semi-independent flat supported by the specialist leaving care team. Furthermore, all were receiving a consistent package of support, including financial assistance to pursue their studies.

Although no clear patterns were discernible for those in employment or training, these findings are consistent with previous research on leaving care. Biehal and colleagues' (1995) study found that the majority of those in their sample who attained qualifications and/or were successfully launching careers in education, employment or training tended to share similar characteristics. They tended to have had stable and positive care careers, more often in foster settings, that permitted a stable pattern of schooling to be maintained or renewed. The majority were in receipt of an integrated package of throughcare support that included carers, social workers and leaving care workers. They were also more likely to launch their careers successfully from the shelter of supported accommodation. The importance of a stable home

base was further reinforced in this study by the finding that nearly all those who lost jobs or dropped out of courses did so through an inability to manage their lives and, in particular, their accommodation.

Family Support and Social Networks

We constructed two outcome measures for exploring contact and support from family and friends.

1) Family support

Good outcomes involved having contact with a family member and describing that contact as sometimes or mostly helpful. Poor outcomes included having no contact or contact that was considered by the young person as unhelpful.

Chart 34. Outcomes In Family Links
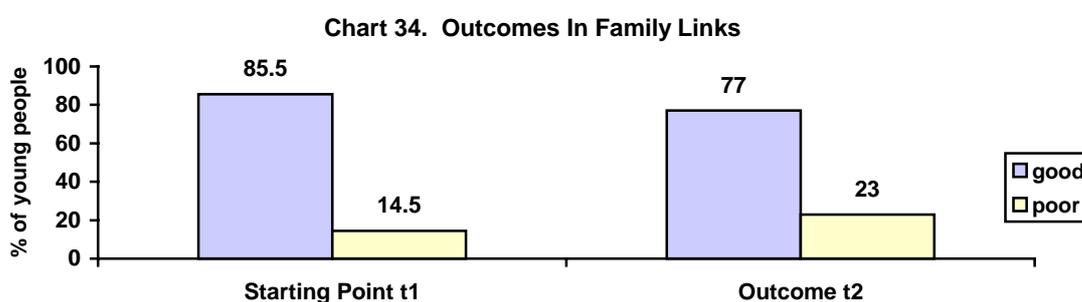
As indicated above, the majority of young people in the sample had good family links at T1 and T2. Whilst there was a slight deterioration by T2, the majority (83.6%) maintained good links throughout the follow up period. As discussed in earlier sections, positive family links are an important factor in establishing a system of support for young people making the transition to adulthood. For most young people in the follow up sample, families appeared to be providing emotional and practical support in most life areas. Young people were able to rely on family for help with money, food parcels, advice, help with finding work and with finding or providing accommodation, whether long term or in times of need. Family support came from extended as well as immediate family members, particularly in cases where relationships with parents had broken down. Although mothers were most commonly cited as the person to whom young people would turn to if in need of help, siblings, grandparents and aunts were identified as important sources of emotional support and in some cases accommodation.

Around three quarters of young people who were looked after away from home had good family links at T1 and T2 (79.4% and 74.7% respectively). This suggests that for most, family links had been encouraged during the time that they had been accommodated.

Information from young people and workers about the provision of support to maintain links or reconcile differences with family was limited. However, examples of support included transport to and from the family home, arranging visits and overnight stays to facilitate reintegration into the family unit and mediating family contact. For example,

Cathy had been looked after in children's homes and foster care on and off since the age of 11. She had good family outcomes throughout the follow up period due to the support she had received from her grandfather, to whom she felt very close. She told us; *"my grandad helps me by buying clothes and food.. I like to be with him, it makes me feel good."* However at the point of entering the study her relationship with her mother was problematic. Home visits had been introduced prior to her discharge from care to prepare her for her return home. Subsequently her relationship with her mother became strained and her family placement broke down. She returned to foster care briefly before moving to independent living at 16. Cathy was receiving support from the specialist leaving care team and support staff from a young offenders programme throughout the follow up period. As part of her support package both teams worked with Cathy to resolve family issues and maintain the supportive links she had with her grandad. This included help with working through difficulties with her mother and transport to visit her grandad. By T2 Cathy had been forced to leave her tenancy due to problems related to drug abuse however, she had been able to return to live with her mother where she is continuing to receive support with family issues.

Almost a quarter of young people in the sample reported having poor family links at T2. Some of these young people had experienced a deterioration of contact during the follow up stage (14.3% of young people who had been looked after at home and 14.7% for those who had been looked after away from home) whilst others had not had contact with family members for some time. Several young people told us that it was their choice not to have contact and therefore they had not wished support.

Slightly more young people who had been looked after away from home had poor outcomes in family links (25.6% compared to 18.2% of those looked after at home). However, statistically there was no significant difference (p= 0.752).

For those who had poor family links at T2 there seemed little evidence that this had affected outcomes in other areas. This was particularly so for those looked after away from home. For example, most of these young people had achieved positive outcomes in coping with life skills (62.5% were good), accommodation (70% were good) and educational attainment (33% were good, 57% were fair). **However, crucially, all of these young people were receiving continuing intervention from specialist leaving care workers (80%), social workers (10%) or both (10%).**

In some cases a stable environment during or after care had also served to redress the lack of family support. For example,

Alice from City had been looked after in children's homes until she moved to supported lodgings at 16. At the point of joining the study she had not had family contact for over 2 years. Alice told us that it had been her decision to break ties with all family *members " I didn't want contact, I just left it at that*". Alice had been supported in this decision by her specialist worker, who has worked with her to adjust to the loss of family links and to develop her relationship skills by broadening her friendship network. At T2 she had achieved a good outcome in terms of social networks and support and had a group of friends who she felt

she could rely on for advice and support.   Alice was also supported by her supported carers, who she calls her grandparents. She told us:

> "*It's just like my family basically, I interact with the rest of their family as well, they help me with everything, they show me how to budget and show me how to shop, just what normal parents do with their kids basically*".

Despite having had poor predictors in terms of placement moves in care (4 moves) and educational attainment (no standard grades), by T2 Alice was doing well in all outcome areas. She had achieved a number of qualifications including an SQA in communications and computing and a certificate in travel and tourism at college and was managing well with life skills in a stable home environment in which she was being supported in her transition to adult living. Support from specialist services was ongoing but her worker commented that Alice now feels that she is ready to become more independent and "*is currently deciding which services she no longer needs, which I see as a reflection of her advancing maturity.*"

For young people with poor family outcomes who had been looked after at home, two thirds (66%) had good coping skills and most (75%) had good or fair accommodation outcomes. Whilst none of the looked after at home group were receiving intervention at T2, they had in common a good network of support from friends and partners.

2)   *Social networks and isolation*

Grading outcomes for social networks at T1 and T2 took into account the young person's report of contact with friends, whether they had someone to talk to if they felt sad or depressed and the extent to which they experienced loneliness.

A good outcome was achieved if a combination of the above factors suggested that the young person had a support network and rarely if ever felt lonely. A fair outcome was given where factors suggested that a young person was either without close friends or someone to talk to and occasionally felt lonely. A poor outcome indicated a lack of friends and support network, particularly if loneliness was also apparent.

Chart 35. Outcomes For Social Networks

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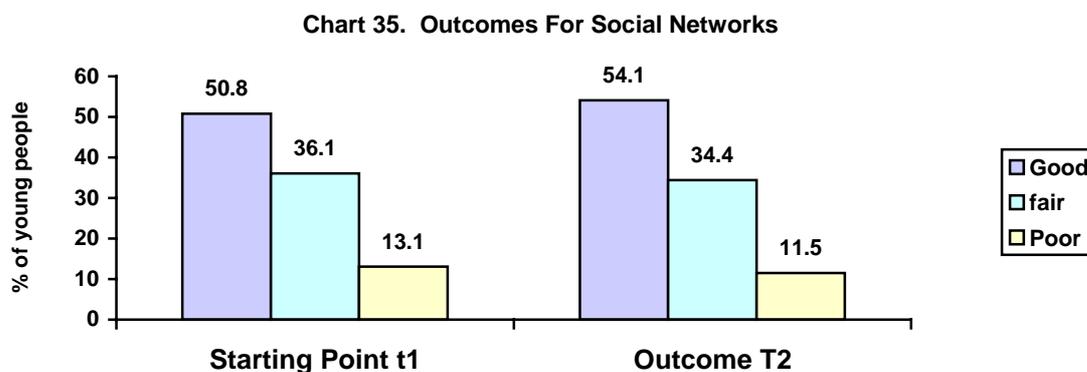
Although for most, social support and network outcomes remained constant over the follow up period there was an emerging pattern of improvement with more young people who had poor and fair outcomes at T1 achieving good outcomes at T2.

At T1 we found that slightly more of those looked after away from home had poor outcomes (15.4% compared to 9.1% of those living at home). This appeared to reflect the issue of isolation for those who were living independently. However, by T2 the situation had reversed with slightly fewer young people who had been looked after away from home having a poor outcome. (10.3% compared to 13.6%). The difference between the two groups was not statistically significant (p=0.932).

Some exploration of the general characteristics of those who had poor outcomes in social networks revealed that all had good outcomes in terms of family links and appeared to be able to rely on them for support and advice. The usual division was apparent in terms of support from social work and specialist workers with only those who had been looked after away from home receiving intervention throughout the follow up period. Only one young person had achieved a good outcome in terms of employment and all but one had achieved good or fair housing outcomes. All of those who had been looked after at home had remained with family throughout the follow up period whilst only one young person (25%) had returned home after leaving care.

An indication of the impact of social isolation was provided by Lee, a 16 year old from City who had been looked after at home. Lee reported having a good supportive relationship with his family including stepparents and grandparents, however, he reported having no real friends at T1 and T2:

> "*I am 16 and have no friends I would love to go out and about with girls and have boy pals but I have no one except my younger brother but his pals don't like me very much because of what happened in the past…..I always feel unsafe and very lonely..I have no confidence and no friends.*"

Lee felt that his mum had been his main source of support both during the time he was looked after and since coming off his order.

> "*Mum tries to show me how to budget my money [she] deals with anything that I don't feel I can, but she makes sure that I am comfortable around people and places before she leaves me to deal with things.*"

He told us that he had felt particularly unsupported by his social worker:

> "*I felt abandoned when the supervision order was removed. I also had no contact with social services or anyone else while on the supervision order.*"

Lacking a network of social support can have consequences for self-esteem and well-being. **All those who had poor social networks had poor outcomes in coping with life skills**, despite almost all having reported good preparation. Feeling unhappy and unloved were also common. Most (85.7%) of these young people felt unhappy sometimes or most of the time and over a third (42.8%) said they hardly ever

or never felt loved. Also, over half (57.1%) said they hardly ever felt confident and a similar amount said they hardly ever or never felt clever. All but one said that they had often felt confused and angry.

Low self-esteem and confidence and feelings of social isolation are clearly connected. Often they perpetuate one another with low self-esteem and confidence affecting one's abilities to make and sustain relationships and social isolation affecting one's self-concept. Support and assistance to build social networks can often help to break this cycle.

Only two of these young people (28.6%) had been offered support with developing relationship skills or broadening friendship networks by their social worker or specialist leaving care worker. A similar number had been helped to pursue hobbies and interests. Only those looked after away from home and receiving continuing intervention were being supported with these issues.

Life skills – Throughcare Preparation and Coping

As an indication of the young person's life skills we looked at preparation at T1 (information and support) and coping at T2, in a range of life skills areas such as self care and practical skills (healthy eating, personal care, cooking, cleaning, shopping and budgeting), relationship skills (informal, formal and sexual) and well being and lifestyle (hobbies, awareness of safe sex practices and issues related to alcohol and drugs). Two scales were constructed, the first to explore the adequacy of preparation and the second to explore how well young people felt they were managing in these life skill areas.

Reliability analysis was carried out on each scale to establish the level of confluence amongst the items within the scales. Results indicated that items worked sufficiently well to allow us to calculate an overall score for each scale by summing the scores of each item.[2] This enabled us to construct an indication of starting points (preparation) and outcomes (coping) in terms of life skills.

1 Preparation

The preparation scale consisted of 13 items. Scores for preparation were reversed so those with lower scores in fact reported having had more preparation. The mean score for the group was 8 out of a possible score of 39.

Good outcomes were assigned to those who had better than average scores (1-7) and poor outcomes were given for those scoring 8 or above.

For exploratory purposes a factor analysis of the items in the scale was carried out. This suggested a

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[2] Cronbach's alpha was 0.902 for the preparation scale and 0.7312 for the coping scale indicating a good level of reliability between the items.

number of possible models, one of which enabled us to construct the following sub scales by summing the scores of relevant items:

- 'Self care': skin and hair care, healthy eating, keeping fit
- 'Social life': hobbies, socialising, boy and girlfriends
- 'Domestic': cooking, shopping, budgeting
- 'Life style': safe sex, alcohol, drugs, smoking

(The alpha statistic for each of these sub scales was 0.828, 0.757,0.785 and 0.893 respectively.)

2   Coping Skills

The Coping scale consisted of 12 items. Coping was scored out of a possible 36, the higher the score the better the young person's perception of their ability to cope in life skills areas at T2.

Good outcomes were assigned to those scoring 25 or more and poor outcomes indicated a score of 24 or less.

Workers' perceptions of life skills were also sought, however, information from this source was not available for all cases. Nevertheless there was a general consensus between young people and workers' perception of coping with life skills.

A factor analysis of the items was also conducted on this scale, using several different rotation models and extraction criteria.   Two clear sub-scales were suggested:

- 'House-keeping' (able to clean home, able to do laundry, able to shop for food and other things, and able to budget). It is notable that the item relating to ability to cook for oneself did not fit well in this   factor.
- 'Health and social life' (able to make friends, able to eat healthily, able to follow hobbies and interests, able to keep fit)

(The alpha scores for these two scales were 0.742 and 0.750 respectively)

Chart 36. Outcomes In Life Skills
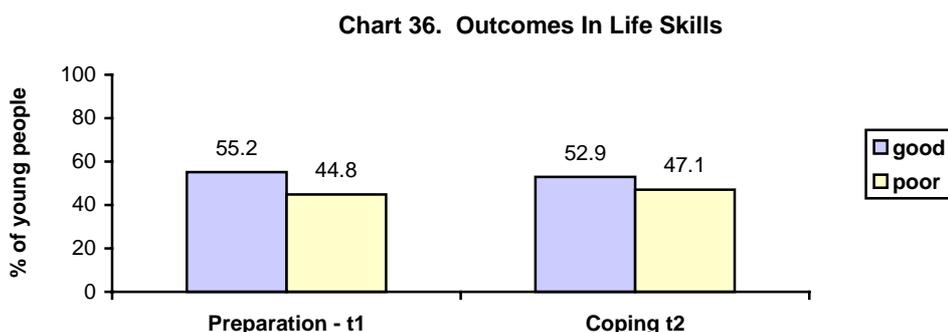
As chart 36 above shows, over half of the young people in the follow up sample felt that they had received adequate preparation for adult life and a similar number felt that they were coping well with these responsibilities at T2.

Analysis of the preparation and coping scales indicated a statistical link with each other and in relation to gender.

Correlations were calculated between each of the preparation sub-scales and the overall scale; and with sub-scales relating to coping outcomes. Only the 'domestic' and 'lifestyle' preparation scales were significantly correlated (p=0.010 and p=0.045 respectively) with the overall coping outcome scale. However, in addition, the 'social life' preparation scale was significantly correlated with the 'health and social life' outcome sub-scale.

In terms of gender differences, the only significant difference in the preparation sub-scales was in the 'domestic' one where females felt significantly better prepared (p = 0.018).

Analysis of the coping outcome scale revealed a statistically significant gender difference in coping in life skills areas, with females tending to do better than males. We also found a strong statistical link between preparation for leaving care (young people's and worker's assessments) and their ability to cope at T2

The two coping sub-scales were helpful in learning more about these relationships. Looking first at the gender differences, there was a significant difference in the 'house-keeping' sub-scale with females coping better than males (p = 0.002). However there was no significant difference in terms of the 'health and social life' sub-scale, where males coped slightly better but not significantly so (p = 0.354).

Looking at young people's self-assessment of preparation for leaving care, there was a significant positive correlation (Kendall's tau-b = 0.297, p = 0.003) between the preparation score and the 'health and social life' sub-scale score but not between preparation and the 'house-keeping' sub-scale score (kendall's tau-b = 0.047, p = 0.635).

In summary, there is evidence that preparation is significantly related to coping. Preparation in terms of domestic tasks and lifestyle (safe sex, drugs, etc.) appear to be the most important in terms of overall coping although preparation in terms of social skills can also enhance social coping. There is also a gender dimension to preparation and coping, although as we have seen this tended to be along the lines of gender stereotyped roles with females feeling much better prepared for domestic tasks and hence feeling that they are coping better at T2.

Preparation is clearly a crucial factor in providing a basis for coping with adult life for all young people whether looked after at home or away from home. In the course of analysis **we found no difference between those young people who had been looked after at home and those who had been looked after away from home, either in terms of outcomes for preparation (p=0.591) or coping (p=1.000).**

This suggests that preparation undertaken by substitute carers or specialist leaving care workers was just as effective as that provided by parents and family.

There were many indications of good preparation and on going support provided by carers, social workers or leaving care schemes. One of the better examples is illustrated by Mike, a young care leaver from Shire who, despite having poor outcomes for family links had reported good outcomes for both preparation and coping. The determining factors in this case included being looked after in stable long term foster care until the age of 18 and receiving good support during and after the time he was looked after. Although Mike had not received a planned programme of preparation he felt that he had been provided with enough support and information in all preparation areas except for budgeting in which he reported having had some support. He considered his foster carers and social worker to have offered most help in terms of preparation skills, although friends had been of some help. During the follow up stage this young person had been resident in a homeless hostel for a short while before moving to a furnished tenancy with support, provided by the specialist leaving care scheme. He continued to see his ex foster carers on a regular basis, which he found "helpful" and hoped would continue. In addition to continuing support from his ex carers, this young person also received a well-rounded package of support covering accommodation, employment, emotional and practical support. When asked whether he had received any support in coping with life skills since leaving care he told us:

> "[My] housing development worker helped me to move into my tenancy after she helped me to apply for it and my support worker helped me with benefits as well as homemaking and housekeeping skills which is ongoing."

Overall this young person felt well supported and was able to look at his experience of care in a positive light. In terms of the overall effects of being in care he told us:

> "[It] helped me to grow up and help me achieve more than if I had not been in care."

Whilst over a third (36.7%) of the sample had good preparation and coping outcomes at T1 and T2, a fifth had poor outcomes throughout. Factors common to those with poor outcomes included a lack of support during the preparation stage (e.g. having not received a planned programme of preparation or reporting lack of information and support in preparation areas). For some, this had not been redressed after leaving care.

For Nicola, a young woman who had poor outcomes in both preparation and in coping, a combination of poor predictors, chaotic home life and a lack of intervention was apparent. Having experienced two placement moves during her last year of being accommodated this young woman from City had left foster care at 16 to return to an unsuitable home environment. Her early departure from care and refusal to engage with support meant that she had not received a planned programme of preparation and whilst some basic preparation had been undertaken by her foster carers, she felt that she had not received enough support or information in any of the life skill areas. Although this young woman had remained at home throughout the follow up period she was unhappy and had resorted to alcohol and drugs, which were available in the household, to deal with the situation. She commented on the lack of intervention

from social work services and the leaving care scheme and clearly felt unsupported since returning home. Although some of her coping skills may have been mediated by her mother, who carried out most of the household chores, the young person was clearly not coping well. Since returning home her health had began to suffer as a consequence of her lifestyle and she had developed poor eating habits*:*

> *"I don't eat meals, just snacks and crisps, I used to eat meals at foster parents but not so much at home coz [I'm] rubbish at cooking".*

For a small number of young people, there was evidence of deterioration in life skills outcomes over the follow up period. Over a tenth (16.3%) of young people who had reported receiving adequate preparation at T1 had gone on to achieve poor coping outcomes at T2. It would appear that in several cases the good preparation undertaken by family, carers or social workers had been undermined by the difficult circumstances in which young people had found themselves after leaving care.   We found examples of this both for young people who were receiving on–going specialist support and those who had received no intervention throughout the follow up period. For example,

Una from Shire, who was receiving an intensive package of specialist support, was failing to cope with the responsibilities of adult life, both in terms of life skills and wider issues such as maintaining a tenancy. Having left foster care at 16 after four placement moves this young person had been unable to sustain a number of tenancies due to her chaotic life style. This had involved drug use, offending and allowing friends to over run her flat. Despite these difficulties she was confident that with support things were getting better:

> *"I still live in the same tenancy [for 2 months] I have had help from my support worker to keep my flat as well as I do and I have had loads of help from him to sort out my benefits. I have learned my lesson and don't make mistakes I made by letting too many people stay in my flat.*"

Rona from County had returned home from foster care just after her 16th birthday and took on the role of caring for her disabled mother. Although she felt that she had received adequate preparation, mostly from family and her social worker, she found that her coping skills were being challenged by the level of responsibility she had acquired since returning home*:*

> *"[I] have to do everything in the house. I don't mind but it can all be a bit too much especially when I could be looking after myself in my own house. Don't get me wrong, I love my mum and don't mind helping, but it does get a bit too much eventually."*

Although this young person was receiving a care allowance for looking after her mother, there was no evidence of intervention throughout the follow up period. As a care leaver returning home she was not a priority for specialist services and although her social worker told us that some informal contact had been maintained initially, she added "*sadly existing caseloads mean that it's not possible to keep up to date in closed cases.*"

Just under a fifth (16.3%) of young people had improved on their poor outcome at T1 and had reported good coping skills at T2. Whilst continuing intervention and stability were apparent in some cases, for others good support family links and a positive 'role model' had been important factors. For example, Heather from County had moved on from being looked after at home to her own tenancy with a partner. Despite feeling that she had not had enough support or information in most life areas and having gone through a "wild child phase" she was now settling down to independent living. She told us she that she was coping:

> *"better than expected. I was worried money wise, whether I would get to see mum regularly [but] I'm getting the hang of it now. I find myself coming in at a reasonable time, the time my mum wanted me to come in, and eating the things my mum used to try and get me to eat. Its funny how things work out."*

What Makes a Difference? – Young People Advising Young People.

Further discussion of the issues arising from our analysis of outcomes and intervention is undertaken in the conclusion of this report. In this section however, we have chosen to present the views of the young people who participated in the study.

In particular we have drawn upon responses to the question *'Based on your own experience, what advice would you give to young people who will be leaving care in the future?'* A number of common themes emerged.

Support and advice, whether from family, friends or professionals was recognised as being crucial for young people finding their way through the challenges of post care living.

The importance of having family contact and support were particularly emphasised:

> *"Try and get back in contact with your family if you're not in contact with them. Without your family it's hard." (Anna, County)*

> *"Family is important when you leave care so try and get back on track with them." (Susan, City)*

Friends were also highlighted in young people's advice to others:

> *"Figure out who your real friends are and forget the rest." (Sandra, County)*

> *"Keep the heid up, its not easy for people who cannot make pals." (Peter, City)*

> *"Try and find at least one person you can talk to. If you have one person at least you have something." (Penny, County)*

Young people in the study also emphasised the importance of *listening* to advice and *accepting* help. Some young people told us that it could often be difficult to see the benefit of advice when preparing to leave care either because of the level of input and advice being offered or the desire to be independent. Reconciling the feeling that "you're your own boss now." (Corrine, City) with the need for ongoing support was an issue for many young people.

> *"Listen to advice from professionals and take into consideration what they are saying to you. When I was in care I thought I knew things but it was only now that I look back and realise I didn't." (Carrie, Shire)*

> *"Screw the nut – even though it feels that all adults are getting at you, they have your best interests at heart. Most of the time they are right although you don't realise it until later." (Jessica, City)*

> *"Listen to staff and take on board their views. Benefit from other people's experience which can prevent you making mistakes." (Sally, Shire)*

Whilst young people were clear that other care leavers should not be afraid to have their say and voice their views and needs, *"take control of your right to speak, rather than just a little person they're making decisions about"*, they urged young people to make the most of the support and advice on offer.

> *"Get as much help as you can off social work and throughcare, do what's asked of you and you might get what you want." (Chloe, City)*

> *"Basically to just let the staff help you, they are there for your best interests." (Alan, City)*

> *"If you're advised to go to college, or given other advice, force yourself to follow it even if you don't like it because it will pay off in the end." (Heather, County)*

'Stay out of trouble' was also a prominent message. Advice to avoid crime, negative peer pressure and substance misuse often came from their own experience:

> *"You have to learn that when you get into trouble with the police they are always going to come out on top." (Ann, County)*

> *"What I'd say is try not to get involved. Peer pressure is a big thing…a really big thing. Don't get involved with drink or drugs, you've got plenty of years to go...if you want to drink when you're older." (Josh, City)*

> *"Get a job and knuckle down. Don't go about with the wrong crowd, keep your nose clean." (Barry, County)*

> *"If you run away and stuff, stop doing it. It doesn't achieve anything. Use contraception – you don't want to be a parent, it's hard work. Don't get in with the wrong people, save money and get a job." (Oliver, City)*

Many expressed the view that it was important to **learn from experience** and concentrate on making something of their lives:

> *"Look forward and not back." (Iona, County)*

"Just make sure they take in some of the things they've been through and don't go back down that line again…do something with your life." (Lesley, City)

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Getting an **education** also featured in the advice young people offered to others. Many recognised the value of qualifications and training in terms of getting employment and for some, in generating a sense of achievement.

"Don't skip school. Get to school, I wish I had it might have got me a decent job." (Iris, County)

"Stick in at school, it's important." (Jessica, City)

"I would say education is the big thing now. It's very important and it will always be something you've achieved in your life." (Lyn, City)

One of the most significant pieces of advice from young people in the study to those leaving care in the future was **"don't leave too soon."** A considerable number of young people commented on the importance of being well prepared and having somewhere to go when moving on from care. Some advised "*it's not as easy as you think.*"

"Don't leave too soon because it won't be easy. I've been trained how to deal with adult life. Don't believe it's as easy as people tell you. Just be mature about it. Don't run before you can walk." (Gill, City)

"Make sure you are on your feet first, make sure you're prepared and plan ahead. Don't leave on your 16th birthday just because you can." (Emma, County)

" I would advise anyone leaving care to get in touch with [leaving care workers]. Don't jump into a flat of your own too soon. You don't realise how hard it's going to be on your own." (Liz, Shire)

"Don't do what I done and leave care as soon as you can without proper help on things [like] budgeting and housing." (Carol, County)

"I decided to stay [in care] a bit longer. I think if you do that you get to appreciate what's going on around you. 16 is far too young to let someone out into their own house." (Deb, City)

"Don't leave care…unless you've got a good job and a house." (Brian, City)

Most of the young people who participated in the study were positive about their futures. Most hoped for a happy, productive and inclusive life. Securing employment coupled with having their own home and family and friends around them were common aspirations.

"I do one day hope to be working. I don't want to have all these qualifications and then waste them." (Emma, County)

"I want to get myself a decent job. Go to college and get qualified and get a better job. Get a better house .my house. When I've got enough money, have a family." (Maggie, County)

"I'd hope to be a joiner or get a roofing job. I want a proper job. I'd like to have a happy life, be married and everything." (Will, County)

"I hope I stick it at college and then get a decent job and a house. That's all I want." (Brian, City)

Finally, many just wanted the same as anyone else:

"It's difficult for young people moving out of care and you still carry the memories of the children's home with you, I just want to make something of my life."

"Want as normal as any other person. I'd have a job, a family, a car and my own family around if I needed support." (Lewis, County)

" I want the same things as anyone else – job, car, wife and kids." (Ivan, City)

DEVELOPING THROUGHCARE AND AFTERCARE SERVICES

In our concluding chapter we will explore the main implications arising from our findings for developing Throughcare and Aftercare services.

1   POLICY SURVEY *(section* 3)

Our policy survey of 31 local authorities (out of 32) highlighted the variation in throughcare and aftercare arrangements in Scotland. The main issues for consideration are outlined below.

1.1   Policies And Procedures Framework *(section 3.1)*

A structured policy and procedures framework should include: clear documentation in Children's Services Plans; clearly written, comprehensive and accessible throughcare and aftercare policies and procedures; written guidance for staff, parents and young people; and the appointment of a lead officer

Our analysis of ***Children's Services Plans*** suggests that they could be improved in three main ways.

First, by giving more prominence to throughcare and aftercare, as distinct from these areas being implicit in provision for all looked after children and young people. Second, by using the terms more consistently - as defined in the Children (Scotland) Act 1995 Regulations and Guidance Volume 2. Third, by specifying in more detail the aims, objectives and time scales for developing specific throughcare and aftercare services.

Many of the ***Policy Statements*** we reviewed were very general in scope. They could be improved by detailing the specifics of throughcare and aftercare provision, and, as a small number of authorities did, by outlining the means of translating their policies into practice.

Written Procedures, in general, covered referrals to specialist teams, leaving care reviews, applications for financial assistance and accommodation. More coverage however could be given to non-specialist staff responsibilities and links, training, liaison with other departments and agencies (other than housing).

In addition to social workers and residential workers, ***Guidance*** on throughcare and aftercare services should be made available to foster carers and parents. Just under a third of authorities made guidance available to foster carers and only 10% did so for parents.

All local authorities should provide **Information Guides for Young People**, although less than half (45%) of those surveyed did so. Those that did provide guides generally succeeded in producing leaflets, booklets and practical advice that was clear and accessible to young people.

Most (77%) local authorities surveyed had a **lead officer** for throughcare and aftercare services although this included project leaders, service managers and heads of social work services. A key issue to consider is whether the designated officer is at the appropriate level to represent throughcare and aftercare services both within the Department and the wider local authority.

1.2 Corporate And Inter-Agency Framework *(section 3.2)*

Responding to the wide range of needs of care leavers requires corporate parenting. This is clearly recognised under the Children (Scotland) Act 1995 by giving the *local authority* responsibility for throughcare and aftercare services, and by Section 21 of the Act, which empowers local authorities to request the involvement of other relevant agencies from the statutory, voluntary and private sector in the provision of throughcare and aftercare services.

In terms of **Corporate and External Partners,** the survey demonstrated strong links with housing and housing providers, including eight joint Housing and Social Work Departments. More consideration could be given to extending formal agreements with education, careers, health, benefits agency and the children's hearing system.

Where working arrangements existed they were generally seen by corporate and external agencies as positive. Specific areas for consideration include: the need to share more information (housing); more focus on aftercare issues - in contrast to care, more consistent co-ordination and the availability of time and personnel to strengthen links (Education); current arrangements are too ad hoc, and there is a lack of formal agreements with Social Work (Careers); links are needed '*to enable smoother transition for care leavers into mainstream services'* (Employment Services); late reports from social workers and the need to improve procedures and involve Reporters more (Children's Reporters).

1.3 Eligibility For Services *(section 3.4)*

Centrally collated data on the numbers of young people eligible for throughcare and aftercare services is a minimum requirement for service planning. However, although eligibility for throughcare and aftercare services is contained within the Children (Scotland) Act 1995 and the Regulations and Guidance Vol. 2, over half of local authorities surveyed experienced difficulty in accessing and collating data on the numbers of young people eligible for their throughcare and aftercare provision. This meant that they were unable to identify as a matter of course all eligible young people in their authorities.

The main problems identified by authorities were: data not being stored electronically or being stored on different databases; data not being routinely collected in specific categories of eligibility; data collection forms not being completed by staff.

Many of the authorities had to carry out manual counts to respond to our survey. This is a major cause for concern and a matter for urgent consideration given its implications for the central planning and resourcing of throughcare and aftercare services.

Also for consideration is the finding that in a third of authorities young people looked after at home were not assessed as eligible for throughcare and aftercare services - despite their eligibility for services under the Children (Scotland) Act 1995.

1.4   Models Of Service Delivery   *(section* 3.5)

Local authorities need to develop 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. Our survey showed that two thirds of authorities had a centrally organised specialist team or specialist staff with direct responsibility for providing services, and the remaining third a non specialist approach to providing throughcare and aftercare services.

Two issues arise from our survey for consideration. First, the need for non-specialist schemes to provide more information about their throughcare and aftercare services - as those surveyed were unlikely to do so.   Second, for non-specialist services to identify the numbers and categories of staff involved in the provision of throughcare and aftercare services.

1.5   Throughcare: Leaving Care Planning   *(section* 3.6)

Most local authorities provided a planned throughcare programme for young people looked after in children's homes and foster care. This was in the main an individual approach incorporated into young people's care planning and review process and was most likely to assist young people with self-care, inter-personal and practical skills. In just over a half of authorities specific throughcare provision was made for one or more groups of young people with particular needs.

A number of issues arising from the survey require further consideration.

First, whether eligible young people living at home should receive throughcare services - as they did in less than half of authorities surveyed? As indicated above, some local authorities do not consider these young people eligible for throughcare or aftercare services at all.

Second, whether enough consideration is given to all the main elements of preparation - self care skills; practical skills; interpersonal skills; education; and identity. Only one of the authorities that responded to our survey indicated that they covered all five areas.

Third, and related to the previous point, whether a greater take up (under half at the time of the policy survey) of the Looking After Children Action and Assessment Records by authorities would assist the throughcare planning process, especially by highlighting the seven main dimensions?

Fourth, whether leaving care reviews should be more structured to address the range of planning areas? This may include the identification of key planning areas, needs assessment, action plans, responsibilities, time scales, and progress since last planning meeting.

1.6   Aftercare   *(section 3.7)*

Section 29 of the Children (Scotland) Act 1995 places a duty on local authorities to provide aftercare to those young people looked after at school leaving age up until they reach nineteen years of age. They also have the power to provide aftercare for young people up to twenty-one years of age. Core services include personal support; accommodation; finance; education, employment and careers; and health care.

1.7   Personal Support   *(section 3.7)*

In our survey, ***personal support*** included young people continuing in foster care after legally leaving care as well as formal policies in relation to providing a continuing role for foster and residential carers. Both these policies help promote continuity and stability for young people and should be considered by all authorities.

In the authorities surveyed, most young people had a named person for contact after they left care, either a specialist leaving care worker, field social worker or residential worker. More consideration should be given to the process of ending personal support, whether there needs to be more formal procedures involving a review by the leaving care worker and line manager and an exit interview.

Also, consideration may need to be given to whether and how young people access specialist support services.

1.8   Accommodation   *(section 3.7)*

Our survey revealed the high priority afforded to meet the ***accommodation*** needs of care leavers. Most of the authorities surveyed had formal agreements with housing departments or housing providers, had access to a range of accommodation including supported lodgings, independent tenancies, floating support schemes, semi-independent flats and supported hostels and provided four or more

accommodation options. Also, most authorities reported that accommodation breakdowns were dealt with under the Homeless Persons legislation and that care leavers were treated as a priority group.

Local authorities also reported that they sought the views of young people, usually as part of the care planning process. However, there was a recognition that the outcome was often a compromise derived from the young person's preference, assessed needs and abilities weighed against the availability and location of suitable accommodation plus support.

1.9 Finance *(section* 3.7)

Local Authorities have powers under sections 29 and 30 of the Children (Scotland) Act to provide financial assistance to care leavers. At the time of our survey over two thirds of authorities provided four or more forms of financial assistance including leaving care grants, accommodation subsidies, income top-ups and assistance with education and employment.

Our survey highlighted a number of issues for consideration.

First, there is a need for clear and transparent policies in respect of eligible criteria, assessment and application procedures, and the range and extent of provision available under section 29 and 30 payments as well as from other sources.

Second, local authorities should consider introducing income/benefit maximisation checks to ensure that young people receive their full income entitlements.

Third, local authorities should provide information to young people about their income entitlements.

Finally, local authorities should develop formal working relationships with agencies responsible for financial assistance.

Although, following the DSS transfer, local authorities will be responsible for financial payments to eligible 16 and 17 year olds, the key issues identified above will still be relevant. Local authorities will need to set up clear transparent systems and inform young people of their entitlements. In addition, they will still have powers in respect of young people 18 plus, including those in education and training.

1.10 Education, Employment and Training *(section* 3.7)

A majority of authorities that responded to our survey had a strategy for helping care leavers into education, employment and training. Arrangements included: accessing advice and assistance from careers and education services; offering financial assistance; ring fencing skill seekers placements and providing specialist employment support. Also, just over half of authorities had formal arrangements with education, employment, careers or training advisors.

However, in both these areas, a significant minority (around 40% of respondents) did not have a strategy or formal arrangements.

Also, just fewer than 40% of local authorities did not provide young people with information on education, employment and training.

1.11 Health *(section* 3.7)

Our survey suggests that meeting the health needs of care leavers was a lower priority than the other areas identified but one that was increasingly recognised as needing more attention. Health initiatives developed by a minority of authorities included individual support, group work on specific health issues, the provision of funds to facilitate sport and recreational activities and information on eating and exercise contained within resource packs. A small number of authorities had developed initiatives for working with care leavers on specific issues: sexual health and sexuality; projects for drug and alcohol-related issues and leisure activities.

There is a need for more local authorities to consider the introduction of strategies for health promotion and the setting up of formal arrangements with health providers to promote the health and development of young people as part of throughcare and aftercare.

1.12 Involving Young People *(section* 3.8)

The Children (Scotland) Act 1995 and accompanying Regulations and Guidance provide the legal framework for involving young people in all decisions affecting their lives. Overall, we found a high level of commitment by local authorities to facilitating participation. Over three-quarters of local authorities had arrangements for involving young people in the development of their policy, procedures and guidance. This included the consultation process for Children's Services Plans and being involved in the evaluation of throughcare and aftercare services. Several local authorities had developed formal links with Who Cares? Scotland to facilitate consultation with young people.

Also, most young people were involved in the care planning and review process. Examples of practice in this area included 'user friendly' review reports, assistance by Who Cares? Workers and the use of user-friendly leaflets and information.

However, as reported earlier, this contrasts with the lack of information guides for young people on throughcare and aftercare services.

1.13 Monitoring and Evaluation *(section* 3.9)

Most of the local authorities surveyed acknowledged difficulties in collecting up to date statistical information and outcome data on young people receiving throughcare and aftercare services, although recognising the importance of this to planning effective services.

It was recognised that monitoring and evaluation could be improved in two main ways.

First by collating information electronically. This would require a greater investment in Information Technology including expert support systems to maintain up to date information.

Second, by the development of a comprehensive database for the collection of core information and outcome data on throughcare and aftercare services.

2   LOCAL AUTHORITY STUDY (County, City, Shire)

2.1   Moving On From Care In Scotland - Descriptive Survey *(section* 4.2)

The first main issue for consideration arising out of our descriptive survey is achieving **placement stability** whilst young people are being looked after. Although young people in this study experienced less placement movement than in earlier research, the average number of placements was 3 (excluding young people looked after at home) and only 7% of young people placed away from home had remained in the same placement throughout their last care episode. A third of young people moved on at least four occasions.

A second issue for consideration is the **age of leaving care.** The majority (93%) of young people in the survey legally left care or moved to independent living before the age of 18, far younger than their peers from non-care backgrounds. Nearly three quarters of our total sample of young people legally left care or moved to independence at 15(21%) or 16(51.9%) years of age.

This is a result of a variety of reasons: young people's expectations - wanting to be independent; the age structure, culture and expectations of, and within children's homes - young people seeing themselves as *'out of place'* and *'pushed out'* at 16; the scarcity of foster care placements and the impact this has upon 'older' young people - *'I was too old and the foster carers had younger kids'*; and the costs of extending foster care placements.

A third issue, which is currently a high Government priority, is **improving the education of looked after children and young people.** In our descriptive account, in addition to the low levels of attainment, an issue of particular concern was social workers' lack of knowledge of young people's educational qualifications (over 25% had no knowledge of their qualifications). Greater placement stability may assist those young people who are taking standard grade examinations to maximise their attainment. Our

account also showed that exclusion and truancy were common experiences for over three-quarters of our sample of young people.

Educational disadvantage casts a long shadow. Our information based on 82 young people during the course of the study showed that over a quarter remained unemployed throughout and an additional 15.8% became unemployed by the end of the study - a total of 43.8% unemployed. Improving young people's access to **employment, education and training** is a key challenge - but any strategy must be integrated with improving the education of looked after children.

Our descriptive account showed that most young people who were going to live independently were assisted in arranging **accommodation** at the time of leaving care and many were happy with their accommodation. However, homelessness and accommodation moves suggest that greater emphasis should be placed on assisting young people to sustain their accommodation.

The main issues for consideration arising from our survey are:
- the frequency of post care moves experienced by some young people - especially placements in temporary accommodation;
- assisting young people more with relationship problems - with other residents, friends or carers;
- helping young people in crisis and facing homelessness (just under 40% of young people had been homeless at some time) including evictions; young people returning home to family problems and often breaking down; isolation and feeling unsafe in single person accommodation.

Our descriptive account reinforces the importance of **informal family support** in terms of both immediate and extended family members - although it may be important to consider the distinction between contact, offering emotional and practical support and returning home.

2.2 Throughcare & Aftercare In Practice *(section 4.3)*

Our descriptive study suggests that more young people should receive a **planned throughcare programme** (less than a third did so). However our research indicates that this will require: successfully engaging more young people; a wider availability of throughcare programmes; and being able to continue throughcare programmes when young people move. In addition, the position of young people on home supervision will need more consideration.

It was also clear from our study that where throughcare was offered, a wide range of workers were involved including teachers, health, employment and housing staff.

Young people generally thought that they had received adequate throughcare support except in the area of assistance with budgeting. Young people regarded specialist leaving care workers, foster carers and parents as most helpful.

Leaving care workers and social workers also played a lead role in assisting young people in their **planning for after leaving care.** Issues for consideration arising out of the planning stage are: ensuring all young people have a review (40% of the young people in our survey did not have a formal review before leaving care); ensuring needs assessments address all the essential areas – budgeting, health and leisure were likely to be neglected.

2.3   Aftercare: Personal Support After Leaving Care *(section 4.3)*

Our research highlights the need for **effective personal support**. But, as detailed, as many as a third did not have a social worker or leaving care worker at the start of the study, contact was also likely to cease soon after leaving care, and some young people were confused about who was or should be supporting them.

Support provided by specialist leaving care workers was likely to be more frequent and seen as more helpful than that provided by non-specialist social workers – an important issue for consideration in planning leaving care services. Young people valued regular support, reliability and availability.

Social workers, specialist workers and other professionals with a wide range of life skills (reflecting the corporate and inter-agency context of throughcare and aftercare services) assisted young people.

In respect of **coping with adult life,** the main issues for consideration arising from our survey of young people is ensuring all young people are assisted with the range of life skills areas – up to 47.5% of young people would have liked more help and support with specific areas.

3   WHAT MAKES A DIFFERENCE? Starting Points, Intervention & Outcomes- Follow Up Study

3.1   Throughcare And Coping After care   *(section 4.4)*

Our research shows that there is clear evidence of the link between throughcare preparation at time 1 and outcomes in regard of coping after leaving care at time 2. Preparing young people in domestic tasks, lifestyle issues and social skills all enhance young people's coping skills. In addition, throughcare provided by carers and specialist leaving care workers is as effective for young people looked after away from home as that provided by parents for young people on home supervision orders.

The key issues for consideration arising from our findings are: ensuring all young people have a throughcare programme; young men need to be better prepared, especially in domestic skills; and throughcare programmes need to address self care, social, domestic and lifestyle areas. In addition, although negative post care circumstances can undermine good throughcare planning, young people can improve their coping by receiving formal or informal support.

3.2   Education, Employment And Careers   *(section 4.4)*

As detailed in our report, the majority of young people had very poor education outcomes – over half passed no standard grades. Issues to consider include: reducing placement instability; prioritising the education of looked after children through specific improvement initiatives; reducing school exclusions; and preventing truancy.

Nearly two thirds of the young people had poor employment outcomes at both points in time – although our statistical analysis was unable to identify any clear predictors between those who had good and those who had poor outcomes. However our qualitative analysis would suggest that good outcomes were linked to the availability of either formal or informal support or both – specialist leaving care workers, social workers, good family links and social networks can contribute to positive outcomes. In developing strategies for improving education, employment and training, consideration will need to be given to the provision of formal or informal personal support.

3.3   Accommodation   *(section 4.4)*

Over three quarters of young people had good or fair housing outcomes at both points in time. It was also evident that young people, who moved, as well as those who did not, achieved good or fair outcomes.

It is highly likely that this can be explained by the priority given to accommodation in all three areas: Shire being a joint housing and social work department, and County and City both having specialist leaving care teams with well developed links with housing providers, as well as accommodation resources, including supported carers. Young people's experiences also show the importance of formal and informal support in helping young people maintain their accommodation.

As noted earlier however, the level of accommodation moves and homelessness suggests that in addition to *finding* accommodation, young people require help with *sustaining* accommodation.

3.4   Family Links   *(section 4.4)*

The majority of young people had good family links at both points in time and these proved very important in supporting young people both emotionally and practically during their transition to adulthood. Where young people had poor family links they were in the main supported by specialist leaving care workers and social workers.

It is very important that all local authorities assess family links in planning for leaving care taking into account both immediate and extended family.

3.5 **Social Networks** *(section 4.4)*

Most young people had good or fair outcomes for social networks at both points in time. However, those young people with poor social networks lacked self-esteem and a sense of well being, and all had poor outcomes in coping with life skills. Good quality assessment is essential so that those young people who need help in this area are identified and assisted.

4 MODELS OF THROUGHCARE AND AFTERCARE SERVICES

Although the numbers of participating young people has not allowed us to make statistically robust analytical comparisons between the three local authority models, our different data sources - our policy survey and interviews; descriptive study and outcome analysis – provide a strong evidence base to guide the development of effective leaving care services. The key issues for consideration are identified above. Whatever authority wide model is adopted, and completed research suggests there is no single organisational blueprint, there are a number of clear messages from our research.

First, throughcare and aftercare services need to build upon good quality substitute care. Stability, continuity, family and carer links, help with education are the foundation stones.

Second, planned throughcare programmes can greatly assist young people in coping after leaving care.

Third, the age at which most of our young people leave care to live independently and their subsequent experiences contrast starkly with normative youth transitions to adulthood. Most of the young people we surveyed have compressed and accelerated transitions.

Fourth, the provision of both formal and informal support greatly assists young people during and after leaving care. The former includes specialist leaving care workers, social workers and carers, the latter, parents, immediate and extended family and friends.

Fifth, the provision of personal support is pivotal to the whole throughcare and aftercare system including access to informal support, other agency services and resources.

Sixth, the departmental, corporate and inter agency framework increases young people's access to a wide range of resources including accommodation, employment and training, finance, and healthcare.

Seventh, departments need a developed policy and procedures framework, which includes specific reference to throughcare and aftercare services in Children's Services Plans; detailed policy and procedures, information guides for staff and young people; and a lead officer.

Eighth, departments should involve young people both at an individual and policy level in the development of throughcare and aftercare services.

Finally, departments need to develop electronic information systems to identify the numbers of young people eligible for throughcare and aftercare services and to monitor outcomes.

5. WIDER POLICY ISSUES

5.1 Territorial Injustice

The feedback from policy respondents provided many examples of good practice but in doing also revealed the great variation in the range and quality of throughcare and aftercare services. There is an urgent need to tackle this problem so that young people can expect good quality throughcare and aftercare services wherever they live.

5.2 Children (Scotland) Act 1995 and Regulations and Guidance Vol 2

A number of issues have also arisen relating to the Act and accompanying Regulations and Guidance.

First, there is a need to clarify who is the 'responsible local authority' when young people move between authorities.

It has come to light that some authorities are interpreting paragraph 1 of the Guidance on Throughcare and Aftercare (Chapter 7) - 'l**ocal authorities have major responsibilities towards children whom they look after under the Act** in preparing them for when they are no longer looked after and for supporting them at that time' - to mean the local authority who looked after the young person as responsible for throughcare and aftercare services - wherever the young person may be living. Other local authorities are assisting young people who arrive in their area under Section 29 (1) - 'the local authority has a duty unless they are satisfied that the young person's welfare does not require it, to advise, guide and assist such a young person **in their area** who is not yet nineteen years of age.'

Second, the Regulations and Guidance in respect of Section 29, 'The local authority has a duty unless they are satisfied that the young person's welfare does not require it' could be strengthened by the addition of **'taking into account the young person's views.'**

Third, replacing 'empowered to assist' with '**has a duty to assist'** could strengthen Section 29(2)**.**

Fourth, section 30 could be strengthened by replacing 'empowered to give financial assistance' with **'a duty to give financial assistance'.**

5.3   Children (Leaving Care) Act 2000

There was general support for the DSS transfer but concerns were expressed about the lack of guidance on a formula and related levels of support, the sources of funding and the administration of the system. The general view of the latter was that it should be administered separately from throughcare and aftercare services.

Finally, most respondents were in favour of the introduction of personal advisors, pathway plans and a duty to keep in touch, as contained within the Children (Leaving Care) Act 2000.

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