Research Summary

Young People Leaving Care:  
A Study of Outcomes and Costs

Jo Dixon, Jim Wade, Sarah Byford,  
Helen Weatherly & Jenny Lee

Background to the Study

This study, undertaken by the University of York, explored patterns of outcome and service costs for a sample of 106 young people leaving the care of seven local authorities. Sample recruitment commenced in October 2001 to coincide with implementation of the Children (Leaving care) Act 2000 (CLCA). The study sought answers to a number of inter-related questions:

1. What factors in young people’s past experience of care or in their lives after leaving tend to be protective or create risks for a successful transition?
2. In what ways does the support provided by leaving care services, other professionals, families or friends help young people to achieve more positive outcomes?
3. What do services cost and what factors are related to high or low costs of care?
4. In what ways is leaving care work changing in response to new legislative challenges and with what effects?

Interviews were conducted with young people and their personal advisers (leaving care workers) at baseline (on average two to three months after leaving care) and were repeated nine to 10 months later. At follow up, complete information was collected on 101 young people.

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Key Findings from the Study

**Transition Planning**

Preparation for leaving care was variable and remains an enduring challenge for the care system. Good preparation support was associated with longer and more settled care careers. Where older teenage entrants failed to settle, there were fewer opportunities for adequate preparation.

Leaving care early, at 16 or 17, was associated with shorter, more unsettled care careers and was more common for young people exhibiting challenging behaviours (such as offending, running away, substance misuse). Even when account was taken of these difficulties, it also appeared to carry an economic legacy, since those who left earlier were more likely to be unemployed at follow up and therefore less prepared for entry into the world of work.

Although timescales for leaving care planning were often too short, the presence of formal preparation and planning arrangements (such as a leaving care review) was associated with a more comprehensive assessment of young people’s needs at the leaving care stage.

**Housing**

Housing emerged as a critical area for leaving care services and one in which positive post care intervention can make a significant difference. How young people fared in housing was not greatly associated with past events in their lives and was much more closely linked to events after leaving care.

Faring well was associated with having strong life skills, being economically active and relatively free of troubles (such as offending or substance misuse). It also brought wider benefits with respect to young people’s overall sense of well-being.

A majority of young people had a ‘good’ or ‘fair’ housing outcome at follow up. However, young people with mental health problems or emotional or behavioural difficulties, young disabled people and those with continuing patterns of instability were particularly vulnerable to ‘poor’ housing outcomes. In general, there were few observable differences in the progress of white young people compared to that made by young people from minority ethnic backgrounds (including asylum seekers), although asylum seeking young people were more likely to be living in supported accommodation and engaged in post 16 education than was the case for other young people.

Strategies to improve housing outcomes require planned investment in an appropriate range of accommodation options to meet differing needs. They also require formal protocols or partnerships with local housing providers and flexible financial and support packages to enable young people to maintain their homes successfully. Support for housing also needs to be situated as part of a comprehensive package of support that addresses those wider aspects of young people’s lives which intersect with it.
**Education and Employment**

Educational attainment was quite poor (54% left school with no qualifications at all). There is growing evidence, confirmed by this study, that those who fare better tend to be female, to have been looked after longer and to have found a settled placement, usually with a foster carer who values education and provides encouragement.

The proportion of care leavers participating in post 16 education is rising (35% were doing so). However, sustaining participation is a challenge, as high drop out rates were evident over the follow up period. In terms of career paths, almost one half (47%) had a ‘good’ or ‘fair’ career outcome at follow-up, but a similar proportion (44%) was unemployed. A positive outcome was associated with a stable care and post care career, leaving care later, faring well in housing, having good life and social skills and being relatively free of troubles.

Although positive economic activity (in education, training or work) contributed to young people’s overall sense of mental well-being, this contribution was significantly less than was the case for housing. This suggests that housing is of greater importance to young people’s well-being and perhaps reflects greater ambivalence on the part of young people about the type of education or work they were undertaking, much of which was routine or low level, and the value of this for their lives.

Services to promote economic activity were less evident than those for housing. However, there was evidence of increased cross-agency working, of recruitment of specialist staff (including secondments from Connexions), of financial incentive schemes and of employability projects offering sponsored work experience and training. Pathway planning also offers an opportunity to create career plans that look into the future and help young people to develop a more positive sense of direction.

**Health**

Although most young people were normally well, there was some evidence of deterioration in mental or physical health over the follow up period. As indicated above, the interplay between mental (and physical) health issues and other life areas suggests that efforts to assess and monitor young people’s health should be well rounded and take account of how young people perceive the different aspects of their lives and the impact these have for their health.

Young people with mental health or emotional or behavioural difficulties were particularly vulnerable to poor outcomes. They were more likely to experience post care instability and homelessness and have worse housing and career outcomes and weaker life skills than was the case for other young people.

Health remained an area of weakness in overall leaving care strategies. However, some developments were taking place, including collaboration with health professionals and recruitment of mental health clinicians. Access to mental health services was a universal concern.
Support

The degree of contact young people had with their families while looked after strongly predicted the level of family support available after leaving care from both immediate and extended family members. Support from social workers around family issues tended to be low key and reactive rather than planned.

All of our local authorities had policies to enable young people to remain with foster carers beyond formal discharge at 18. However, this was primarily used to provide a breathing space rather than an alternative home base into adulthood. More could be done to encourage continuing contact with past carers once young people do move on.

Continuing contact with personal advisers was high – 97% of young people were in touch at follow-up and for 60% contact was monthly or more. The intensity of contact with professionals tended to be higher for young people who were experiencing greater difficulties (although this did not necessarily lead to improved outcomes).

The new CLCA requirements were broadly welcomed and were viewed as bringing about perceived benefits. Referral and assessment procedures were more streamlined, case responsibility allowed for a more immediate response to needs and was leading to a pattern of support that was perceived as being more consistent, equitable and of longer duration. The new financial arrangements, including incentive schemes, were generally seen as working well. Although many young people still faced considerable financial hardship and difficulties were apparent in the transition to benefits at 18.

Service Costs

Although a wide range of statutory and non-statutory services were used by young people in the study, social services bore the largest proportion of the total costs of care through provision of support and accommodation. Leaving care workers were the most commonly used social service. Considerable youth justice costs were also incurred, similar in magnitude to social services once accommodation costs are excluded.

Several factors were associated with higher or lower costs of care. Higher support costs at the leaving care stage were associated with higher levels of placement movement while looked after, lower levels of family support and with young people experiencing mental health or emotional or behavioural difficulties. In effect, these young people are likely to need higher levels of contact and more comprehensive packages of support once they leave care.

Contact Details

For further information, please contact:

Jo Dixon    jd21@york.ac.uk
or
Jim Wade    jw35@york.ac.uk

Social Work Research and Development Unit
B Block, Alcuin College,
University of York,
Heslington, YORK, Y010 5DD
01904 321280
www.york.ac.uk/swrdu

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