

Dadansoddi ar gyfer Polisi



Analysis for Policy

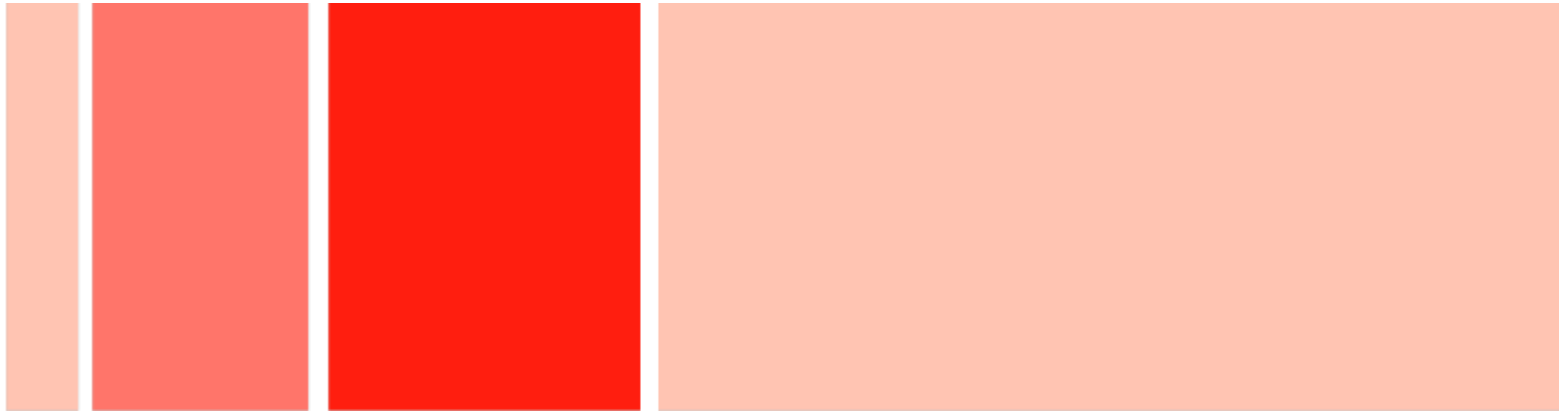


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# Understanding the educational experiences and opinions, attainment, achievement and aspirations of looked after children in Wales



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**Views expressed in this report are those of the researchers and not necessarily those of the Welsh Government**

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## **Glossary of Acronyms**

|       |   |
|-------|---|
| ELO   | Educational Liaison Officer                 |
| FIAP  | Fostering Individualized Assistance Program |
| GCSE  | General Certificate of Secondary Education  |
| GED   | General Education Development               |
| GPA   | Grade Point Average                         |
| KS    | Key Stage                                   |
| LA    | Local Authority                             |
| LAC   | Looked After Children                       |
| LACYP | Looked After Children and Young People      |
| MTFC  | Multidimensional Treatment Foster Care      |
| PEP   | Personal Education Plan                     |
| RCT   | Randomised Control Trials                   |
| SEU   | Social Exclusion Unit                       |
| SEN   | Special Educational Needs                   |
| TFN   | The Fostering Network                       |
| TYCW  | Teach Your Children Well                    |
| VSH   | Virtual School Head                         |

# 1. Background to the research

## Policy Context

- 1.1 The low educational attainment and future prospects of looked-after children and young people<sup>1</sup> (LACYP) has become an issue of widespread international concern (Berridge 2012; Jackson and Höjer 2013). Within the four UK nations we know that children in public care, on average, achieve poorer educationally than their non-looked-after peers (see Jackson 1987; 2010). This gap widens across all Key Stages and into higher education (Stein 2012). As a result, over recent decades in England and Wales there has been an intensification in legislative action and policy development aimed at improving the educational outcomes of LACYP (see The Children Act 1989; The Children Act 2004; The Children and Young Persons Act 2008; The Social Services and Well-being (Wales) Act 2014; Welsh Assembly Government 2007). This policy drive has particularly focused upon improving working relationships between professionals, practitioners and local services in order to narrow the attainment gap between looked-after children and their non-looked-after peers.
- 1.2 Since devolution the Welsh Government has developed its own policies and guidance for local authorities, which aim to tackle the issue of the 'underachievement' for LACYP. This has resulted in several types of educational interventions for LACYP in compulsory education. These include: the establishment of the local authority looked-after children's education coordinator to monitor progress; the looked-after children's education support worker to provide catch-up support; a designated teacher in school who supports LACYP; and the Personal Education Plan (see WAG 2007). However, despite these policy provisions, the overall educational attainment of LACYP

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<sup>1</sup> Age based definitions of children and young people are inconsistent in the literature. The 1979 United Nations Convention on the Rights of the Child defined all those under 18 as children but later definitions have referred to those age 15 to 24 as youth or young people. In this report we have used the term children or young people when referring to published literature by employing the original author's definitions. When discussing the data generated in this project we have tended to employ children for those under 15 and young people for participants of 15 and over.



has yet to be noticeably raised. The lack of marked progress in this area, despite policy interventions, highlights the challenges in addressing LACYPs educational achievement and the complexity of the problem.

- 1.3 As at 31st March 2015 there were 5,615 children in public care in Wales: 2,595 girls (46.3 per cent) and 3,020 boys (53.7 per cent). The largest proportion of children were aged 10-15 years old: 2,040 (36.3 per cent), followed by 7-9 years old: 1350 (24 per cent), 1-4 years old: 995 (17.7 per cent), 16-17 years old: 940 (16.7 per cent) and under 1 year old: 290 (1.2 per cent). In terms of ethnicity, the vast majority were white: 5,115 (91.1 per cent). 175 (3.1 per cent) were mixed race, 75 (1.3 per cent) Asian or British Asian, 55 (1 per cent) Black or Black British, 40 (0.7 per cent) other ethnic groups, and 155 (2.7 per cent) unknown. Of those children, 4,255 (75.7 per cent) were placed in foster care. Data collected by Local Authorities is not sufficient to provide robust information relating to the reason for a child becoming looked after (Welsh Government 2015).

### **Aims and Objectives of the research**

- 1.4 The following objectives for this research were laid out by Welsh Government:

**Objective 1:** Conduct an in-depth qualitative research study with looked after children, to provide insight into their experience of education and their opinions on what could be done to improve it

**Objective 2:** Collate and report relevant data and literature

- 1.4 To meet these objectives our research followed a two phase design. First we reviewed, collated and analysed existing statistics about LACYP's attainment in England and Wales and reviewed literature on what is known about the LACYP population in relation to educational experiences, attainment and achievement. We also conducted a full

systematic review of effective educational interventions with LACYP. This provides information on what programmes and initiatives have been evaluated in relation to improving aspects of LACYP's education.

- 1.5 Secondly, we conducted an in-depth qualitative research study with LACYP and care leavers, in order to generate data that provides insight into their experiences of education, their aspirations for the future and their opinions on what could be done to improve education. With children and young people in care aged 5 to 16 years old we undertook semi-structured interviews using creative methods including emotion stickers and sandbox scenes, as part of event days organised by The Fostering Network. With young people in care aged 16+ and care leavers we worked with peer researchers who facilitated focus groups, supported by Voices from Care Cymru and Spice Innovations, to engage young people about their experiences of barriers and enablers to their progress in school education and post-compulsory education and any support they received. We also asked the 16+ focus groups for feedback on vignettes based upon evidence about interventions collected from the systematic review, exploring whether, why and how these interventions may work to support young people's attainment and aspiration in education. In follow up focus groups we asked participants to reflect on initial findings and on how policies and practices could respond to improve the education of LACYP.

### **Previous research**

- 1.6 Research in this area has often looked at why LACYP underachieve. A range of factors have been attributed to LACYP's underachievement and these include: lack of stability, unofficial time out of school, and a lack of extra educational support and understanding of emotional health needs (see Harker et al. 2004; Heath et al. 1994; the Social Exclusion Unit 2003). Berridge (2012) has argued that the care system is generally beneficial and not inherently damaging to children's education. Others have suggested that damaging and traumatic pre-care experiences hold the most

explanatory power as to why LACYP's educational achievement is low (see St Claire and Osborne 1987; Sinclair and Gibbs 1998; O'Sullivan and Westerman 2007). As the largest numbers of children and young people enter the care system aged between 13 to 15 years old, it has been suggested that it is incorrect to argue that the care system is the immediate variable to influence educational outcomes (Stein 2013). Research has therefore made the case that shortcomings in the education and care systems, and challenging social and personal circumstances which LACYP experience all come together to result in the educational underachievement of LACYP (see Fletcher-Campbell and Hall 1990; Jackson 2001).

- 1.7 In terms of children and young people's own perspectives on education and being in care, many have emphasised their disappointing educational experiences whilst they lived within the care system (Kahan 1979; Page and Clark 1997). A frequent complaint from LACYP is that teachers have low expectations concerning what they can achieve educationally (Jackson 1987; Martin and Jackson 2002). Frost and Stein (1989) argued that local authority practices must be progressive in regard to empowering LACYP to realise their aspirations.
- 1.8 In recent years there has been an accelerating movement towards the idea of children's participation, and 'voice' has become an important concept in research with children and young people (see Pinkney, 2000; Prout 2003; Wigfall and Cameron 2006; Pithouse and Rees 2015). As Winter (2006), has argued, we need to know what makes a difference from the accounts and narratives of LACYP themselves. As yet, there remains to be a study undertaken (in the UK) which solely focuses upon LACYP's standpoints, from across the entire range of Key Stages in the National Curriculum, focussing specifically upon their schooling experiences, school transitions, and what young people think, can, or should, be improved. It is the day-to-day lived experiences of LACYP that remain to be explored to advance knowledge and contribute to the evidence base on LACYP and

education. Asking LACYP to communicate their own experiences and perspectives is something that this research sought to do in the qualitative phase of the study.

### **The report**

- 1.9 Chapter Two provides detail on the methodology selected for this research. It provides details of the statistical and literature reviews, followed by a full explanation of the systematic review methodology used in the review of effective educational interventions. This chapter also presents a description and explanation of the methods and activities applied in the qualitative research undertaken with children and young people.
- 1.10 Chapter Three provides detail of the findings from Phase 1 of this research. The chapter details the statistical review of official data available about education and LACYP in England and Wales and presents the findings of the literature review. This review explored qualitative and quantitative research data relating to LACYP and attainment, achievement and aspiration in England and Wales. The findings of the systematic review is also set out in this chapter.
- 1.11 Chapter Four provides details of the findings from Phase 2, focusing on the qualitative research with children and young people. The chapter begins by exploring aspirations before looking at the educational experiences of LACYP. Finally, the chapter provides findings on young people's opinions about what might help improve education for LACYP and what is unhelpful about current interventions.
- 1.12 In Chapter Five we provide some conclusions to the report by setting out the key findings in relation to the project objectives and research questions. Finally, in Chapter Six we offer some recommendations from the study for Welsh Government in terms of policy, practice and interventions for LACYP in Wales.

## 2. Methodology

2.1 This project was broadly split into two phases. Phase 1 required desk-based research methods to review and collate existing data about looked after children and young people (LACYP) and education. Phase 2 involved engaging with LACYP directly via interviews or focus groups. The research design for each phase is detailed in the following sections.

### Phase 1: 'Evidence' – desk based research

2.2 Research questions

RQ1. What data are available on the educational attainment of looked after children, how does this differ by local authority, over time and in comparison to other UK countries?

RQ2. What do we know from existing research about the experiences and aspirations of looked after children in relation to education?

RQ3. What is the existing evidence on successful educational interventions for looked after children?

### *Methods*

2.3 To address RQ1, the available descriptive statistics from England and Wales<sup>2</sup> relating to the educational attainment of LACYP were collated. Trends were identified over time, across England and Wales and in relation to factors such as placement stability, placement length, SEN and the quality of education. The attainment gap in England and Wales between LAC and non-LAC was explored and in Wales, data relating to post-16 education for LAC presented. Major policy difficult

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<sup>2</sup> Direct comparisons with Northern Ireland and Scotland are problematic because of the variance in methods of data collection and differences in policy. Accordingly, direct comparisons could not be made and it was agreed with the Welsh Government that comparisons would be restricted to descriptive statistics for England and Wales.

initiatives both in England and in Wales which target the improvement of the educational attainment of LAC were also reported. The review of these descriptive statistics can be found in Chapter Three.

- 2.4 A short and focused review on what is known about LACYP and care leavers' 'achievement', 'attainment' and 'aspirations' was undertaken to address RQ2. A mixture of Boolean operators<sup>3</sup>, AND (&), OR (|) and wildcard characters (i.e., '?' '\*') were combined with search keywords ("looked after child\*"; "looked-after young people"; "youth"; "adolescent\*"; "care leaver"; "foster care"; "residential care"; "kinship care"; "achieve\*"; "attain\*"; "aspirations"). Online searches were conducted through the following electronic databases: ASSIA Applied Social Sciences Index and Abstracts (ProQuest); British Education Index (Ebscohost); ERIC (ProQuest); PsycINFO (Ovid); SCOPUS (Elsevier); Social Sciences Citation Index (Web of Science); JSTOR; and Sociological Abstracts (ProQuest). In addition, the ZETOC, Proquest, and EThOs databases and Google (online web-search engine) were searched for broader additional academic material, dissertations, theses and conference papers. Relevant books were identified through the Cardiff University library catalogue Voyager.
- 2.5 The search was restricted to studies from within England and Wales. To narrow the search to those relevant to this literature review, abstracts were read for quality and relevance. Articles were then categorised into the three search themes (achievement, attainment, aspirations). A total of 39 sources published between 1965 and 2015, were deemed appropriate for the review based on a relevance engagement with the abstracts. Full details of the search terms, inclusion criteria and databases searched are presented in Annex A. The key findings from this review are discussed in Chapter Three of the main report.
- 2.6 To address RQ3 a full systematic review was conducted in adherence with the PRISMA statement for the reporting of systematic reviews

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<sup>3</sup> Boolean operators are simple words (AND, OR, NOT or AND NOT) used as conjunctions to combine or exclude keywords in a search, resulting in more focused and productive results.

(Liberati et al. 2009). Studies were identified from 1989, to coincide with the inception of the Children Act 1989. Randomised controlled trials (RCTs), including cluster RCTs, and quasi-experimental study designs were identified for inclusion. Study participants comprised LACYP aged 18 years or younger who were in the care of the state or had previous experience of state care. Both in-home and out-of-home care was included. Conceptualising interventions as 'events in systems', the review included discrete programme packages and non-standardised mechanisms of change in the care context (Hawe et al. 2009). Studies reported on a range of educational outcomes, either as a primary or secondary outcome measure. These included: academic skills; academic achievement and grade completion; homework completion; school attendance, suspension and drop-out; number of school placements; school relationships; school behaviours. There was no restriction placed on the number of measurement time points or the period to follow-up.

- 2.7 A sensitive search strategy was developed in Ovid MEDLINE (see Annex B) before being adapted to the search functions of each database. Substantive search terms were generated through consultation with experts in the field and consideration of the literature and previous scoping reviews (Forsman and Vinnerljung 2012). Twelve relevant electronic bibliographic databases were searched in January 2015. Educational, social care and medical databases were searched in anticipation that interventions may have non-educational primary outcomes. Searches were conducted in: ASSIA (Proquest); British Education Index (Ebsco); CINAHL (Ebsco); Education Resources Information Center (Ebsco); Embase (OVID); Medline (OVID); Medline in Process (OVID); Social Care Online; Social Science Citation Index (Web of Science); Social Services Abstracts (Proquest); Scopus (Elsevier); PsycINFO (OVID). We contacted a panel of international experts for recommendations of relevant published and unpublished evaluations. Reference lists of included studies were scanned to identify additional publications.

- 2.8 Two review authors independently screened the full-text of these studies, assessing each against the inclusion criteria. The Cochrane data extraction and appraisal form was adapted to generate a standardised extraction form for the review (Annex C). Data abstracted included: intervention group demographics; control group demographics; intervention setting and design; study design; outcome measurements; methods of analysis; process evaluation data; intervention effects. Educational summary measures were included if they were reported as either a primary or secondary outcome, although most interventions addressed a battery of postulated impacts with no differentiation or prioritisation of outcomes. Outcomes were reported in the following domains: academic skills; academic achievement and grade completion; homework completion; school attendance, suspension and drop-out; number of school placements; school relationships; school behaviours.
- 2.9 The Cochrane collaboration tool for assessing the risk of bias in randomized controlled trials was employed to appraise the studies (Higgins and Green 2011). Domains assessed included: sequence generation; allocation concealment; blinding; completeness of data; and selective outcome reporting. Each domain was determined to be of a low or high risk of bias and all studies, regardless of their risk of bias were included in the synthesis, as a secondary aim of the review was to assess the quality of RCTs and quasi-experimental evaluations of educational interventions within social care settings. Full details of the search strategy and the standardised extraction form for the review are presented in Annex B and C. The related PRISMA Diagram of Study Retrieval is illustrated in Annex D. The key findings from this systematic review are discussed in Chapter Three of this report.



*Why did we use this approach?*

- 2.10 The collation of statistical data enabled us to present a quantitative picture of LACYP in Wales in relation to education. Comparing trends in Welsh with English data and exploring key issues such as placement stability and post-16 education provided the initial layer of context for the topic. The literature review added a qualitative dimension by providing summaries of key empirical studies about LACYP and educational achievement, attainment and aspiration; and informed the kinds of questions we asked our participants in Phase 2.
- 2.11 Systematic reviews are employed increasingly in social care research to provide a synthesis of research evidence. They follow specific protocol and are rigorous in their approach to searching for, including and reviewing research evidence. We originally intended to conduct a rapid review of the evidence about effective educational interventions for LACYP, however, on analysing the available data it became clear that a full systematic review of RCTs and quasi-experimental studies was required. This is the best way to ensure that the research evidence we present about effective interventions for LACYP in education is accurate and comprehensive. The full systematic review undertaken in this study is the most comprehensive review to date in this area of inquiry.
- 2.12 Phase 1 was undertaken largely without input from LACYP because of the specialist nature of statistical, literature and systematic review methodologies. However, we did not want this phase to be completely isolated from LACYP and care leavers because we consider them to be “experts in their own lives” (Clark and Statham 2005); privy to very specific experiences, which researchers and professionals should not assume that they fully understand (Pattman and Kehily 2004; Holland 2009). We also wanted to attempt to counter some of the power imbalances which exist when young people are “positioned by adults who create the professional and political agenda” (Groundwater-Smith et al. 2015, p.11).

2.13 Accordingly the interventions identified in the systematic review were presented as short vignettes (see Annex E) in three focus groups with a total of 15 participants in the 16+ age group. The focus group participants had the opportunity to discuss how the interventions might work in practice and give their views about the positive and negative aspects of each vignette. Further details about the focus groups can be found in the following sections. The key findings from the work with the interventions vignettes are presented in Chapter Four of the main report.

**Phase 2: ‘Experiences’, ‘Aspirations’ ‘Opinions’ – in depth qualitative research with looked after children and young people and care leavers aged 5-25**

2.14 Research questions

RQ4. How do children in KS2, KS3 and KS4 experience school and college life?

RQ5. What enables them to take part in education and what are the barriers?

RQ6. Looking back, what have been the factors that have enabled them to make the progress that they have, or what has prevented them achieving in education?

RQ7 What are looked after children’s and young people’s expectations and aspirations for the future in terms of education and employment?

RQ8 What will they need to help them succeed in achieving their goals?

RQ9 What are children and young people’s views on what schools, LACE teams, carers, social care services and Welsh Government should do to help raise the educational achievements of looked after children?

RQ10 How transferrable do they think successful interventions from within and outside Wales may be implemented across Wales?

RQ11 What are their views on how findings from this research may be used to impact on policy and practice?

*Methods: Children and young people aged 5-16*

- 2.15 We undertook individual interviews using creative methods as part of four separate event days organised with assistance from The Fostering Network (TFN). Two events with primary school children in south Wales and two events with secondary school aged children (one in north Wales and one in south Wales). Each primary school event attracted 16 children ranging from 6 to 11 years old. We interviewed a total of 22 children at these events across the age range. The children had only experienced foster care. Number of placements ranged from 1 to 9, with an average of 2. The secondary school event in north Wales attracted 6 young people and all of the participants were interviewed. The south Wales event attracted 17 young people and we interviewed 11 of them. In terms of care placements, all had experienced foster care and one had also experienced kinship care. Number of placements ranged from 1 to 9 with an average of 2. All of the participants had only attended mainstream school. A detailed breakdown of participant information can be found in Annex F.
- 2.16 Cardiff University's School of Social Sciences Research Ethics Committee granted project approval and all foster carers were provided with forms as part of the process of negotiating informed consent (see Annex G). Age-appropriate consent forms were also provided for the children and young people to give their informed consent (see Annex H). In terms of confidentiality, all of the LACYF's names in this report are fictitious. Pseudonyms were selected by the participants to maintain their anonymity.

- 2.17 TFN publicised the events to foster carers and kinship carers and ran them as fun, interactive days with arts and sports workshops. Activities included making clay pots, designing T-shirts and decorating bags. Researchers asked LACYP to take part in the one-to-one interviews and research activities at suitable points in the day. For children that wanted to take part in the research, interviews took place in a separate space from the main activities but children and young people were able to return to the TFN activities at any point. All LACYP were given the option about whether to take part at the beginning of event and at the start and throughout the interviews. Feedback about the event days from participants and carers gathered by TFN was overwhelmingly positive.
- 2.18 Our interview schedules contained open questions structured around the themes of educational experience and an exercise employed to explore LACYP's aspirations entitled, 'possible future selves' (Mannay 2014). We asked children and young people: - 'What do you want to do when you leave school? Where do you want to work? Where will you live?' to build up a picture of their aspirations for the future and the related barriers and enablers. The interview schedule can be found in Annex I.
- 2.19 LACYP who wanted to contribute to the research were able to select either a traditional interview or to take part in visual activities followed by an interview discussing their visual data. The emotions sticker activity, employed with primary school aged LAC, allowed participants to attach green happy, red sad or yellow neutral sticky faces onto a sheet with words associated with school (e.g. teachers, break time, lessons). Children were also invited to draw pictures on the word sheets or add text if they wanted to make additional points. Interviewers then asked the participants what they had drawn or why they had stuck a particular face next to a word. Photographs illustrating this activity can be found in Annex J.
- 2.20 We also employed an activity that involved using miniature sandboxes filled with special play sand to create scenes with small figures and

objects, including trees, gates, cars and trucks, superheroes, work roles, fantasy figures, animals, shells and jewels. LACYP who selected the option of using the sandboxes created scenes related to their experience of school and/or their future aspirations. After the sandbox scenes were finished, researchers asked the participants to talk through the different objects and explain what each part meant. Photographs illustrating the figures and completed sandbox scenes from the activity can be found in Annex K.

- 2.21 All of the interview data was transcribed verbatim and analysed applying a thematic framework which was grounded in the data. Our analytical frame was derived from ‘grounded theory’ (Glaser 1978) which means that it was data-driven, allowing codes, categories and themes to emerge from the empirical data produced with LACYP.

*Why did we use this approach?*

- 2.22 We undertook the research as part of a series of event days because embedding the research within a suite of other activities allowed LACYP to participate in an enjoyable day even if they chose not to participate in the research. Furthermore, we acknowledged that LACYP are an over-researched group, subject to a ‘professional gaze’ in ways that other children are not (Holland 2009). Accordingly, we offered some reward for participation, as is “increasingly common in research with marginalised children and young people” (Groundwater-Smith et al. 2015, p. 91).
- 2.23 The premise for using visual methods in the research was related to our commitment to participatory research; as although visual methods are not necessarily participatory, they do have the potential for more collaborative and participant led data production (Mannay 2010, 2013). Participatory research is more than a method or a set of research tools, rather it is “a commitment to ongoing processes of information-sharing, dialogue, reflection and action greatly facilitate the genuine use of participatory techniques” (O’Kane 2008, p.129).

We wanted to engage the LACYP who took part as active, competent and knowing subjects.

- 2.24 The use of visual techniques is particularly beneficial when working with groups who are subject to the 'professional gaze'. Allowing LACYP to direct the interviews through discussing their visual data changed the dynamics from traditional interview settings associated with social workers and other agencies. The focus on visual data also allows participants who are less confident or shy to avoid eye-contact with the researcher, who may be a stranger, and to concentrate on another task whilst answering questions or talking through what they have drawn. This creates a relaxed way for children and young people to engage in research (Bagnoli 2009).
- 2.25 However, one of the drawbacks of employing a drawing activity is that participants can feel conscious of lacking artistic skill or of being seen to be doing something too 'childlike' by peers (Johnson et al. 2013). Therefore, we selected the emotion sticker activity, which has been employed successfully in previous studies, and the children who chose this method liked the colourful stickers and being able to decide where to stick the faces down (Gabb and Singh 2014). This method did not require any particular skill so was open to all participants. The details of the LAC who selected this activity and accompanying interview can be found in Annex F.
- 2.26 The other activity choice involved the sandboxes and figures as described above. The sandboxing activity is derived from the world technique that was traditionally applied in psychoanalysis (Lowenfeld 1979). More recently the world technique has been employed in research studies to enable a participatory approach where participants create a sandbox scene and lead the interview discussion around their visual creation (Mannay 2015; Mannay and Edwards 2014). As with the emotion sticker exercise this activity did not require any artistic skill. However, the sandboxing activity allowed the LACYP a greater sense of freedom to create their own visual data without the constraints of the pre-set agenda that was offered in the emotion

sticker activity. Participants engaged well with the activity and were able to independently create their sandbox scenes and lead discussions about what their visual representations meant to them in the accompanying interviews. In this way, the sandboxing activity acted to engender a participatory approach and empower LACYP in the research process (Groundwater-Smith et al. 2015). The details of the LACYP who selected this activity and accompanying interview can be found in Annex F.

- 2.27 Interestingly, although all of our participants had experienced formal interviews or interactions with social workers and other professionals, this had varying consequences for the way they wanted to participate in the research. Some LACYP wanted to forgo a visual method and selected a straightforward interview; and participants' selections of research activities are illustrated in Annex F. For others the opportunity to do something creative or to focus on another task whilst being interviewed was welcomed. As such, it is important to acknowledge that it is beneficial to provide a range of options that enable participants to take part on their terms. This mosaic approach has been presented as best practice in participatory research with children and young people (Clark and Moss 2001).

*A note about the sample*

- 2.28 All of the participants were recruited via foster carers invited by TFN. Consequently, the foster carers who brought their children were already voluntarily involved in an organisation that supports and trains foster carers. As a result, the foster carers who responded to the TFN advertisement were what we might call 'engaged foster carers'. This suggests that there is some bias within the sample and that an engagement with LACYP whose foster carers were not involved with TFN could have generated a more differentiated data set. The time bounded nature of the study and issues of access and ethical practice meant that a wider demographic of LACYP could not be consulted,

however, this point is something to reflect on in relation to the findings presented in this study and avenues for future research.

*Methods: Looked after young people and care leavers aged 16-25*

- 2.29 We organised four sets of focus groups with young people, to explore questions under the themes of ‘experiences’, ‘aspirations’ and, in addition ‘opinions’. Focus groups were facilitated by a peer researcher, who had experienced care themselves, and supported by a CASCADE researcher. All participants were recruited via Voices from Care Cymru and all participants were asked to sign a form as part of the process of informed consent (see Annex L). Three of the sessions took place in south Wales and one took place in north Wales, we had intended to have a second north Wales session but had to cancel due to low numbers. We undertook a total of six focus groups with 26 participants (some participants attended both an initial and a second focus group in south Wales). The age of participants ranged from 16-27 years old and 11 of the focus group participants were female, 15 male. Number of placements ranged from 1 – 24, but some young people were unable to remember how many times they had moved placements. Placement histories were as follows: foster care only (13); foster, residential and kinship care (4); foster and residential care (7); and residential care only (1).
- 2.30 Spice Innovations, a time-banking organisation, facilitated warm-up workshops with the young people before the focus groups began and provided time credits for all participants which could be spent at a network of venues in south Wales. As the ability to spend the time credits at venues in north Wales was minimal, Spice Innovations organised a standalone activity in the form of bowling and pizza, which took place after the north Wales focus group.
- 2.31 Our peer researchers were recruited via Voices from Care Cymru and they were trained for the project during a two day training course delivered by CASCADE. The course provided an introduction to



research methods, ethical practice, and focus group management. Peer researchers also helped design the interview schedule for the focus groups and identified particular topics as being important aspects of education for LACYP (see Annex M).

2.32 The focus groups explored LACYP's educational experiences relating to the topics defined by the peer researchers. We also asked for feedback on the strengths and weaknesses of the interventions from the systematic review by discussing the associated vignettes (see Annex E). We asked participants whether they had been involved in any initiatives or programmes like those described by the vignettes. The findings and discussion of the feedback on interventions can be found in Chapter Four.

2.33 We also did some activities with Spice Innovations to help structure focus group discussions around aspirations and about what could or should be done to help improve education for LACYP (see Annex N):

- The 'bombs and shields' activity involved using paper bombs and shields and asking participants to write down what made them explode like a bomb at school and what protected them or acted as their shield.
- The 'balloon exercise' involved a large piece of flip chart paper with a drawing of a balloon on it where peer researchers wrote down all the things participants said about what the perfect education would look like and the obstacles that could hinder this perfect education.
- The 'flip chart activity' asked participants 'Who should do what?' to help raise educational attainment for LACYP.
- The 'employment activity' consisted of a large illustrated sheet containing pictures of several types of jobs to generate discussion of future aspirations.
- The 'steps to success' exercise was designed to get the participants thinking more concretely about how they would or

could realise their ambitions and who they thought should or could help them move up the steps towards the end goal

- 2.34 All of the focus group interview data was transcribed verbatim and analysed applying a thematic framework which was driven by the data produced with LACYP, as described in the previous section.

*Why did we use this approach?*

- 2.35 As with the younger participants, we wanted to ensure that the research was engaging and that the participants were recognised and valued for their contributions. The time credits model has been used to encourage community participation and “engage people in giving their time to their communities in a sustainable way” (Spice Innovations 2014). Essentially, individuals earn time credits by volunteering with an organisation who has a time credits package. Time credits can be spent on events, training or leisure activities at providers signed up to a time spend network. The use of time credits as recognition for participating in research has not been widely used. However, the principles of reciprocity and community participation, which time credits are based upon, were something we were keen to explore and the time credits were well received by participants.
- 2.36 Increasingly, researchers are working with peer researchers in order to generate the views of LACYP (Stein and Verweijen-Slamnescu 2012; Lushey and Monroe 2014). We worked with peer researchers to enhance the engagement of this particularly marginalised group of young people. Peer research has the potential to counter obstacles such as “lack of motivation, low self-esteem and power imbalances between adult researchers and young people” (Lushey and Monroe 2014), which prohibit young people from participating in research. We also wanted to work with peer researchers because we recognised that LACYP and care leavers have a very particular set of experiences or ‘insider knowledge’. We valued the knowledge they

bought with them to the research project, in helping to determine some of the focus groups questions and in facilitating the focus groups.

- 2.37 We chose to use focus groups with young people because we wanted to generate several perspectives on education and being 'looked after' and to spark discussions that enabled both shared understandings and differences in opinion and experience (Kitzinger and Barbour 1999). The use of time credits in our project meant that some young people were able to organise trips together to spend the time credits, building relationships beyond the research project.
- 2.38 Researchers undertaking participatory research with young people have found that young people are less keen on research methods that involve "just sitting and talking to an adult" (Bagnoli and Clark 2010, p. 111). Our use of creative activities, described above, was premised on the basis that these activities would be more engaging for young people. Structuring the focus group using these activities also provided prompts for participants so that we covered aspects of education that might not immediately have come to mind. They also gave the participants the freedom to be imaginative when thinking about the perfect education or what they might do in the future.

*A note about our sample*

- 2.39 All of the participants were recruited through Voices from Care Cymru and many attend or volunteer with the organisation. Other young people who took part came via local authority groups for young people in care or leaving care. One of the obstacles of recruiting young people to take part in the research was based on time. It takes time to establish relationships with organisations or staff within local authorities who support LACYP and care leavers and these relationships are crucial to the success of getting young people along to events. A further difficulty is that after young people leave care, it

can be hard to make contact if they do not access services, volunteer with organisations or keep in touch with leaving care teams.

- 2.40 In the initial focus groups, we did not manage to recruit any young people who were in higher education or were considering higher education. As it was important to include these experiences we undertook two telephone interviews with female higher education students aged 21 who were care experienced. One had lived in two foster placements and the other had experienced foster and residential care, and had moved placements three times. We recruited these participants via an email circulated by the Care Leavers Activities and Student Support (CLASS) Cymru Network and by emails to individual key contacts for care leavers at Cardiff University, University of Wales Trinity St. David and Aberystwyth University. The participants contacted a member of the research team to take part. The interview schedule was semi-structured and looked at the past, present and future of education touching on many of the themes asked in the interviews and focus groups (see Annex O). These interviews generated rich data about successfully negotiating education to reach its tertiary layer.

### **3. Findings: Phase 1**

#### **Introduction**

- 3.1 This chapter presents the key findings from Phase 1, which attended to the Welsh Government requirement to collate and report relevant data and literature and consisted of three objectives. Objective 1 - a synthesis of descriptive statistics relating to LACYP's educational attainment; Objective 2 - a literature review of empirical studies on LACYP's educational experiences and aspirations; and Objective 3 - a systematic review of successful educational interventions for LACYP. A detailed explanation of the research design and the individual research techniques was set out in Chapter Two.

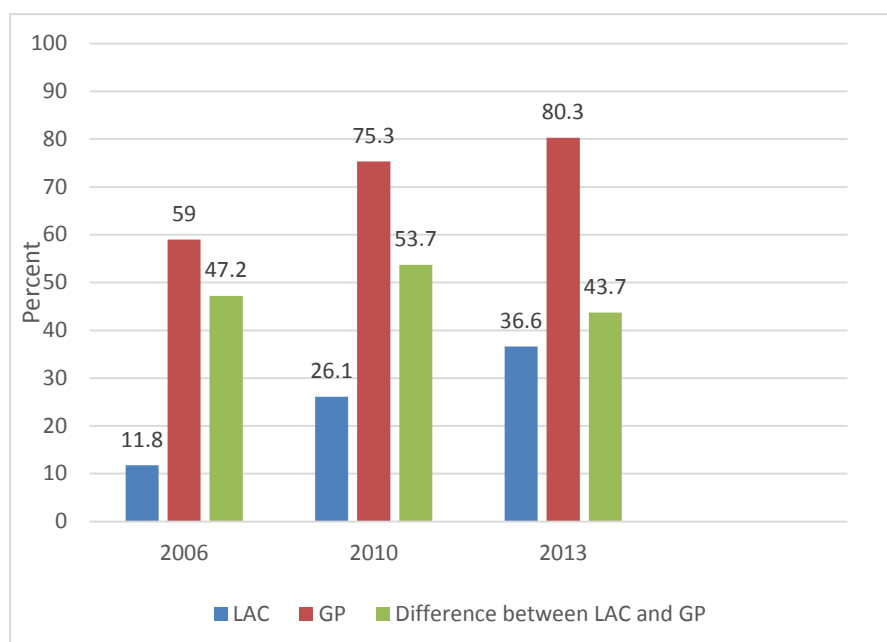
#### **Looked After Children in England: educational outcomes**

- 3.2 The synthesis of evidence set out in relation to Objective 1 provides an overview of what is known about LACYP and care leavers and educational performance in relation to descriptive statistics exclusively from England and Wales. As illustrated in Figure 1, in 2010, 26.1 per cent of LAC in England achieved the benchmark of five GCSEs grades A\*- C, compared to 75.3 per cent of the general population, representing an increase in attainment from 2006 of 11.8 per cent for LAC and 59 per cent for the general population (DfE 2011). In 2013 there was another increase in attainment for LAC, with 36.6 per cent achieving 5 A\*-C grade GCSEs. This is compared with 80.3 per cent of the general population, representing an attainment gap of 43.7 percentage points (DfE 2013). The increase in attainment of 24.8 per cent for LAC between 2006 and 2013 can be viewed as an improvement. In addition, the rate of improvement between 2006 and 2013 in the general population was 21.3 per cent which means that the attainment gap at KS4 in England has started to narrow.<sup>4</sup>

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<sup>4</sup> Two major educational reforms of KS4 took place in England between 2013 and 2014 which means that the calculation of KS4 performance measures data has changed. As a result it is not possible to make a direct comparison between the latest 2014 data and earlier data (DfE 2014)

**Figure 3.1: GCSE Attainment (5 A\* - C grades) LAC and General**



**Population in England 2006, 2010 and 2013**

Source DfE (2011, 2013)

- 3.3 In examining this difference in attainment levels, there are a range of complex interactions that act to determine educational outcomes. These are now explored:

#### *Placement stability*

- 3.4 Placement stability is highly significant. Among those with one placement during the period of care, 38.6 per cent achieved 5 grades A\*-C, decreasing to 29.8 per cent for those with two placements and reducing to 14.5 per cent for those with three or more placements. LAC with behavioural difficulties are likely to have more placements and LAC have a higher rate of school exclusions where there has been more than one placement in the year, with the rate of exclusion rising with number of placements (DfE 2011). Additionally, a cross-national study on the education of young people in care suggests that LAC in

England are more often subject to processes of exclusion within schools and are at a 10 times higher risk of exclusion from school than other children whose behavior is seen as 'challenging' (Jackson and Cameron 2010).

### *Placement length*

- 3.5 Aside from placement moves, the length of time LAC spend in care is also highly significant. Those in care placements for longer achieve better educational outcomes than those in shorter placements. 20.5 per cent of those in placements of less than 18 months achieve 5 GCSE grades A\*-C, compared to 33.4 per cent of those who are in care for six years or more (DfE 2011). These figures suggest that placement length is an important factor in determining the probability of LAC achieving the benchmark of five GCSEs grades A\*-C. However, short term placements continue to dominate the trajectories of LAC. In 2013/14 66.7 per cent of placements were six months or less, 13.3 per cent were 6-12 months and only 20 per cent lasted over 12 months (DfE 2014a).

### *Quality of education*

- 3.6 The educational attainment of LAC is further influenced by the quality of the educational institutions they attend. For example, LAC are more likely to be in lower performing schools, defined as schools achieving below Key Stage 2 (KS2) and Key Stage 4 (KS4) standards (DfE 2011). Accordingly, attending lower achieving schools can have a negative impact on LAC's educational attainment. Furthermore, one third of LAC are in special schools or other educational placements with much lower outcomes. LAC in maintained mainstream schools significantly outperform LAC in special schools or other placements. In relation to the benchmark of five GCSE grades A\*-C, 45.3 per cent of LAC children achieve this outcome in mainstream schools, compared

to 2.2 per cent of LAC in special schools or other educational placements. Rates of educational attainment also need to be considered in relation to special educational needs (SEN). In 2013, 67.8 per cent of LAC were identified as having SEN, compared to 64 per cent in 2006 (DfE 2011, 2013).

### **Looked After Children in England: key government guidance for Local Authorities**

- 3.7 Statutory guidance in England was issued in 2014 by the Department for Education which provides guidance for all LAs in England to ensure that Directors of Children's Services prioritise closing the attainment gap between LAC and their peers in the general population (DfE 2014b). The current statutory guidance sets out a number of key priorities to promote the education of LAC and young people. For example, every LA is required to have a dedicated staff member to oversee the educational needs of LAC, known as the Virtual School Head (VSH). Additionally, all LAC should have a Personal Education Plan (PEP), including contact the details for the relevant LA VSH.
- 3.8 The guidance reports that the majority of LAC have SEN and that LAC placements inevitably mean moving schools more if the care placement is located some distance from the original home. In emergency placements this may mean that a new school placement has to be arranged by the LA within 20 school days. These points have implications for the discussions of placement stability, quality of the educational institutions and SEN, raised in the previous section, which further impact on the educational attainment of LAC and young people in compulsory and post-compulsory education.



## **Looked After Children in Wales: educational outcomes**

- 3.9 In Wales, there has been a policy commitment towards academic attainment and progression for a wide demographic of children and young people from a range of social backgrounds. The Review of Higher Education in Wales presented a discourse of transformation, centralising social justice, partnerships, and widening access as its core aims (Welsh Government 2009).
- 3.10 Despite this, there is quantitative evidence for both lower overall levels of educational attainment in Wales compared to England, and inequalities in all levels of education in relation to a range of factors, including socio-economic status and ethnicity (Davies et al. 2011). Changes in data collection and a lack of national data make comparative outcomes over time difficult; but data consistently illustrates worse outcomes for LAC than the general population, through all of the Key Stages and beyond compulsory education.

### *LAC attainment in Wales*

- 3.11 Outcomes of LAC compared to all children in Wales as of March 2011 reported that at KS1<sup>5</sup>, 57 per cent of LAC meet the expected level compared to 83 per cent of non LAC. At KS2 49 per cent of LAC meet the expected level compared to 88 per cent of non LAC and at KS3 22 per cent of LAC meet the expected level compared to 68 per cent of non-LAC. This patterning suggests that the gap between LAC and non-LAC widens across students' educational trajectories. As with England, overall results have improved at all Key Stages for LACs from 2009 to 2011, with a 4 per cent rise in LAC at KS2

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<sup>5</sup> It is worth noting that Key Stage 1 has now been phased out and replaced with the Foundation Phase. The Foundation Phase is the statutory curriculum for all 3 to 7-year-olds in Wales, in both maintained and non-maintained settings. Marking a radical departure from the more formal, competency-based approach associated with the previous Key Stage 1 National Curriculum, it was designed to provide a developmental, experiential, play-based approach to teaching and learning. The policy has been progressively 'rolled-out' so that by 2011/12 it included all 3 to 7-year-olds in Wales. An evaluation of the Foundation Phase has reported greater levels of observed pupil involvement and pupil wellbeing during learning, improvements in overall school attendance and it is associated with improved attainment for pupils eligible for free school meals (see Taylor et al 2015).

achieving the expected level and a 2 per cent rise at KS3. However, results have also improved for non-LAC, meaning that the attainment gap has not closed and at some Key Stages it has widened. For example in 2007, the gap at KS2 was 35 per cent and at KS3 39 per cent, by 2010, the gap at KS2 had fallen to 34 per cent but at KS3 it had risen to 42 per cent (Welsh Audit Office 2012).

- 3.12 Examining GCSE attainment in Wales, in 2011, 23 per cent of LAC achieved 5 GCSEs grade A\*-C or equivalent, compared to 67 per cent of all children. Importantly, if this data is broken down into 5 GCSEs including Mathematics and English/Welsh the attainment of LAC falls to 10 per cent compared to 50 per cent of all children. Performance is highly variable across LAs in Wales, from 21 per cent attainment of 5 GCSE's (grade A\*-C) in some LAs up to 68 per cent in others. However, these figures must be interpreted with caution due to the very small numbers of LAC in some areas (Welsh Audit Office 2012).

#### *Post – 16 progression*

- 3.13 The attainment levels for LAC beyond compulsory education are also poor. In Wales, 29 per cent of young people leaving care had no qualifications at all compared to 1 per cent of the non-LAC population. The proportion of care leavers not in employment, education or training (NEET) on their 19th birthday has fallen since 2006, but in 2011 it was still at 48 per cent compared with 11.5 per cent of non-LAC. Notably, this rate is higher than that in both England and Northern Ireland (Welsh Audit Office 2012).
- 3.14 The Higher Education Funding Council for Wales (HEFCW) has invested considerable funding in projects for widening participation in Higher Education, and this has brought some gains for non-traditional students (Taylor et al. 2013). HEFCW states that it has a commitment 'to secure inclusion, progression and success in higher education to enable learners across all age ranges and backgrounds, who face the

highest social and economic barriers, to fulfil their potential as students' (HEFCW 2014, p.4). Nevertheless, the figures relating to the educational attainment of LACYP have demonstrated a pervasive gap between the attainment of LAC and non LAC and while evidence is very limited for university entrance and completion with no required national reporting, the available data suggests that only 2.4 per cent of LAC school leavers go on to forms of higher education (Welsh Audit Office 2012).

#### *Students with special education needs*

- 3.15 As noted with the data for England, rates of educational attainment also need to be considered in relation to SEN. In 2011 in Wales, 21 per cent of LAC had statements of SEN compared to 3 per cent of all children. Furthermore, outcomes for LAC with statements of SEN are worse than for non-LAC with statements of SEN, with 35 per cent of SEN LAC gaining 5 GCSEs (grades A\*-G) compared to 45 per cent of the non-LAC with statements of SEN (Welsh Audit Office 2012).

#### **Looked-after children in Wales: policy outcomes**

- 3.16 Welsh Government policies have consistently shown a commitment to raising the educational attainment of LAC. For example, the statutory guidance document 'Towards a Stable Life and a Brighter Future' (Welsh Government 2007) laid out arrangements for the placement of LAC and care planning, as well as placing new duties on LAs to improve LAC's health and education. As part of this guidance, the requirement for LAC to have high quality Personal Education Plans (PEP) within 20 days of entering care was strengthened using powers under the Children Act 2004. This placed a positive duty on LAs to improve educational outcomes for LAC. LAs were also required to designate a specialist practitioner (the LAC Education Co-ordinator) to co-ordinate PEPs and look after the educational needs and monitor progress of LAC and care leavers within the LA. Furthermore, Section

20 of the Children and Young Persons Act 2008 required the governing body of all maintained schools in Wales to designate a member of staff as having responsibility for promoting the educational achievement of LAC in the school.

3.17 However, while the Welsh Government and LAs share a strategic commitment to improving educational attainment for LAC, there are a lack of clearly defined outcomes against which progress can be assessed. For example, in 2011 the Welsh Government published its Programme for Government that included a commitment to 'improve arrangements for looked after children so that they have more stable lives'. The document stated that actions would be taken to improve the percentage of care leavers in education, training, or employment at age 19 and reduce the attainment gap at KS4 between children in need, LAC and the general child population. Unfortunately, it detailed no specific targets against which progress could be measured. The Welsh Audit Office (2012, p.12) noted that 'there is no clear overall plan or strategic document setting out how the different responsibilities within the Welsh Government or between the Government, regional bodies, local authorities and other agencies are aligned to support improved outcomes for looked after children'.

3.18 In 2006 national targets for educational attainment for LAC were dropped. The RAISE (raising achievement and individual standards in education) programme was introduced, which included funding for LAs to work on improving the educational attainment for LAC. In 2011 the RAISE grant was integrated into the School Effectiveness Grant - Looked After Children. The 2011 Child Poverty Strategy for Wales asserted that outcomes had significantly improved since the RAISE grant was introduced, but no evidence was offered to support this claim (Welsh Government 2011). The RAISE programme has now come to an end but currently the Welsh Government's Pupil Deprivation Grant targets the needs of LACYP, and those entitled to Free School Meals, by issuing primary and secondary schools with additional funds per qualifying pupil to spend on evidence-based

interventions. These interventions are aimed at helping close the attainment gap between pupils who are eligible for Free School Meals and those who are not, and also to close the gap in attainment between LACYP and others (Roberts 2014).

- 3.19 This initiative is currently being evaluated by Ipsos MORI and the Welsh Institute of Social and Economic Research, Data & Methods (WISERD). The evaluation will consider how the Pupil Deprivation Grant is being used and the extent of its impact. The evaluation will provide the Welsh Government with information on how effective the Pupil Deprivation Grant is and will contribute to future decisions about how best to tackle the achievement gap (Welsh Government 2014).
- 3.20 The introduction of initiatives in Wales has sometimes been inconsistent. Programmes based on one-to-one tuition have been reported to improve confidence and attainment of LAC. Similarly, the provision of a structured work experience programme lead to increased rates of employment and training for care leavers in LAs in which it was delivered. However, these initiatives have not been provided in all LAs across Wales. This inconsistency has been attributed to a lack of shared delivery plans between the Welsh Government and LAs and to short-term grant funding for projects (WAO 2012). The reach of policy is also impacted by the rise in the number of LAC in Wales with the figures for March 2011 recording 5,415 LAC, an increase of 20 per cent over five years. It will be interesting to see the results of the evaluation of the impact of the Pupil Deprivation Grant and to what extent it can address the current disparities in attainment.

### **Empirical research with looked after children and care leavers on their educational experiences and aspirations**

- 3.21 This review of the literature attends to Objective 2 by providing a compilation of what is known about looked-after children, young people and care leavers' 'achievement', 'attainment' and 'aspirations',

in relation to material exclusively from England and Wales. The sections build on the descriptive statistical overview in the previous section by drawing on a range of both quantitative and qualitative empirical studies focusing on LACYP.

### **Achievement**

- 3.22 It has been well documented that LAC do less well in education when compared to their non-looked-after peers (Jackson 1987; Berridge 2012). Yet, despite a plethora of legislation and policies in recent years, as discussed in the previous sections concerning Phase 1: Objective 1, the gap between the achievements of LAC and their non-looked-after peers, remains problematic (WAO 2012).
- 3.23 While the vast majority of LAC are of “normal intelligence” (Jackson and Sachdev 2001, p.1), LACYP and care leavers’ poor educational outcomes are characteristically described as ‘under-achievement’ (Welbourne and Leeson 2013). It has been suggested that due to the complexity involved in conceptualising “underachievement”, the term should cease to be used and instead one should refer to “low achievement” (Berridge 2012, p.5).
- 3.24 Low educational achievement arguably has the most serious consequences for the future life chances (Jackson 1994, p.267). It is not the only yardstick of success in life (Berridge 2012, p.1171) but it is an increasingly important one to obtain qualifications and skills in a competitive economy. In their study, Jackson and Martin (1998) investigated the qualities and circumstances associated with ‘successful’ educational achievement. Jackson and Martin (1998) located a sample of ‘ex care’ individuals (n=256) who had had spent more than a year in care and either obtained five or more O-levels or GCSEs at Grades C and above, or were in further or higher education. The study identified that, “learning to read early and fluently is one of the protective factors associated with later educational success” (Jackson and Martin 1998, p.575). In particular,

regarding their educational achievements, it was reported that there were no significant differences between the comparison and successful group's self-esteem. However, it was acknowledged that through their own self-motivation the group of high achievers had made more use of library facilities compared to the comparison group of 'ex-care' individuals who had not achieved to the same attainment level.

- 3.25 Furthermore, many of the high achievers had “extraordinary determination and persistence to succeed” (Jackson and Martin 1998, p.581). The protective factors strongly associated with later educational success were identified by Jackson and Martin (1998) as: (i) stability and continuity; (ii) learning to read at an early age; (iii) having a parent or carer who valued education; (iv) having friends who did well at school outside of care; (v) developing out-of-school hobbies; (vi) consistent support and encouragement from a significant adult; and (vii) attending school on a regular basis.
- 3.26 In an attempt to advance the knowledge base regarding what constitutes successful educational achievement through protective factors, Jackson et al. (2005) undertook a study that explored the experiences of 129 care leavers who continued into higher education. Jackson et al. (2005, p.6) note one factor that enabled a young person to continue into higher education was accessing personal tutoring in the run up to examinations paid for by the local authority. This finding was in line with previous research (Jackson and Martin 1998), which identified that support and encouragement from a significant adult reinforced later educational success.
- 3.27 Pithouse and Rees (2015) have noted that resilience can act as a protective factor, promoting motivation, self-esteem and achievement. For example, in line with Jackson and Martin (1998) and Jackson et al. (2005), Cameron (2007) described how it was through care leavers' own 'self-reliance' that they have managed and directed their own educational participation and achievement. According to Jackson et al. (2005, p.55):

...many of our participants did obtain excellent GCSE and A level grades, but this was often due to their own determination and persistence rather than good schooling opportunities.

- 3.28 However, research undertaken by Honey (2009) identified that LAC (n=99) had more positive self-perceptions than the non-looked-after comparison group (n=99). Consequently, these findings emphasise that there are complex, multi-layered, and interactional factors associated with promoting positive achievements, while rejecting the long-standing misinterpretation regarding LAC's lack of ability to benefit from higher education.
- 3.29 The argument that parents and carers play an important role in developing children's educational achievement has also been highlighted elsewhere (SEU 2003; Jackson et al. 2005). Jackson and Sachdev (2001) noted that when LACYP's achievements are recognised by a significant adult, "this boosts their confidence, gives other young people good role models and can change the perceptions of teachers and social workers" (Jackson and Sachdev 2001, p.1). A positive culture of expectation emphasises the role of significant adults regarding LACYP's educational achievement as their "own attitudes and motivation may be influenced by exposure to successful and inspirational individuals" (Berridge 2012, p.1175). This message adds to previous findings which revealed that, "being placed with highly educated foster carers who gave them intensive educational help" (Jackson and Martin 1998, p.580), meant that carers were also able to provide informed advice on further and higher education. It has thus been argued that additional training for foster carers would enable them to further support and promote educational achievement (Jackson et al. 2005).
- 3.30 It has been identified that possessing literacy skills at an early age is one of the most significant factors in supporting educational achievement (Jackson 1994; Jackson and Martin 1998). Furthermore,



there is widespread agreement that early childhood experiences are crucially important for children's long-term development and their achievements in later life. Consequently, the early years can be positioned as the foundation that society depends for its future prosperity and progress; which creates a strong economic argument for investment in early years support and intervention programmes (Welsh Government 2013).

- 3.31 However, it has also been highlighted that many young people in the care system do not have continuous support with their literacy, from a significant adult (Jackson and Martin 1998). Jackson and Sachdev (2001) identified that looked-after young people had not received any educational support at school to enable them to achieve further within their school careers and that many of the young people had felt discouraged and undermined while at school. For example, teachers and social workers were reported as having low expectations of the educational abilities and potential of the young people (Jackson and Sachdev 2001, p.2). Similarly, in a study of children and young people (n=80), who had experienced foster and residential care placements in England, Harker, Dobel-Ober, Lawrence, Berridge and Sinclair (2003) identified that there had been an absence of any significant relationships between LAC and adults. It was this lack of significant adult relationships alone which eventually contributed to the young people's low educational achievements.
- 3.32 Placement instability is a further, significant factor relating to the 'unsuccessful' educational achievement of LACYP. For example, many LACYP's care placements are, "often arranged with marked insensitivity to the rhythms of school life" (Jackson and Martin, 1998, p. 578). In their study, Harker et al. (2003) discovered that 70 per cent (n=56) of young people had experienced a change in placement and concluded that this high level of instability was unlikely to assist with their school achievement. This factor was also evident in Allen's (2003) study which identified that when young people experienced a

placement move, very often the new school they attended was following a different curriculum from that of the previous school.

3.33 For LACYP residing in residential care placements Jackson and Sachdev (2001) noted that if learning is valued within the residential home, then LAC can achieve within education. Foster carers who had good educational experiences themselves were identified as most likely to improve LAC's educational achievements (Jackson and Sachdev 2001). In contrast the young people residing in residential care reported a lack of interest in all aspects of their schooling from residential care workers. A common complaint concerned a lack of books on the premises and a lack of a designated space to complete homework; LAC often lacked a quiet space to study and there was often an absence of resources such as books, stationery and access to a computer (Jackson and Sachdev 2001). Davey (2006) tracked fourteen young people who resided in in foster and residential care in one local authority in south Wales, over three school years from Year 9 to Year 11, from 2002 to 2006. The aim of this research was to identify, mainly from young people themselves, what impeded or assisted their achievements at school. Findings suggested that:

whilst foster carers, and in one case a birth parent, were identified by the young people as aiding their achievements it was notable that no teacher, social worker or residential staff were viewed as offering this vital support (Davey 2006, p.265).

3.34 Moreover, Davey (2006, p.266) identified that "there was some evidence that key professionals tended to take a rather pessimistic view of the education potential of the young people and did not vigorously promote their inclusion or achievement". In a larger English study (n=377), Fletcher-Campbell and Archer (2003) discovered that although one-third of their sample was entered for five or more GCSEs, one-quarter of young people had not been entered for any GCSEs. Of those that had been entered for their GCSEs, only 10 per

cent achieved five or more GCSEs at grades A\*- C. However, it was noted that approximately a third of the sample of young people had had three or more different care placements during their secondary schooling. O'Sullivan and Westerman (2007) tracked the achievements of 187 LAC from their GCSE's back through Key Stages 3, 2 and 1 and highlighted how some of their sample had experienced placement moves up to ten times during their time in care, of which, "60 per cent did not sit any GCSE examinations" (O'Sullivan and Westerman 2007, p.17).

- 3.35 Berridge (2012) has emphasised how behavioural difficulties and complex learning problems experienced by LAC have been inadequately investigated. However, the impact of ADHD, antisocial behaviour, and depression upon academic achievement has been highlighted (Cassen et al. 2012). According to WAO (2012) some LAC are not achieving their potential as "the low achievement of looked after children is not accounted for by the relatively high proportion who have additional learning needs" (WAO, 2012, p.19). Moreover, Fletcher-Campbell and Archer (2003) identified in their study that one-third of the young people had a statement of SEN. It was highlighted that statements were often misunderstood and educational difficulties exacerbated. Together, this increased young peoples 'failure' and associated them with negative 'labelling' whilst undertaking KS4 assessments (Fletcher-Campbell and Archer 2003). Cassen and Kingdon (2007) argue that LAC with SEN encompass a considerable proportion of low achievers. This point is echoed by Jackson and McParlin (2006) who state that having a SEN is interpreted by social workers and teachers as meaning low intelligence. Cassen and Kingdon (2007, p.38) argue that "in far too many cases" LACYP are not receiving the support they need in school.
- 3.36 Evidently, the educational achievement of LACYP and care leavers is a complex issue. It is precisely the complexity of the achievement topic that makes it difficult to resolve (Brodie 2010; Berridge 2012; Stein 2012). Both Brodie (2010) and Berridge (2012) have advocated

that consideration of the care and educational systems combined must be explored in order to assess what constrains LACYP and care leavers' achievements. According to Jackson and Sachdev (2001, p.2) it was found that social services and education departments "often do not work together and communicate about the children in their care". Moreover, regarding the recording of LACYP's qualifications by the local authority, Allen (2003, p.12) discovered by that "many of the records were incomplete". Stein (2012) suggests that beyond measuring 'outcomes' there is a strong case for measuring 'progress' in order to understand achievements. Equally, Berridge (2012) suggests that transforming achievement is not straightforward as:

...measurement of educational outcomes for this group is a complicated issue and routine, administrative, statistical returns and performance indicators' can be problematic and inadequately reflect progress made (Berridge 2012 p.1172).

- 3.37 For Brodie (2010), central to improving educational achievement is listening to LACYP. Moreover, pivotal to improving LAC's educational achievement is ensuring that foster, residential and kinship carers provide practical support and meet the essential day-to-day emotional needs of LACYP. Professional support, placement stability, pupil motivation, and school receptiveness, are all identified as key factors in sustaining achievement (Jackson and Martin 1998; Harker et al. 2003; Davey and Pithouse 2008). Nevertheless, Brodie (2010) argues that there is a lack of evidence relating to the specific skills of front-line professionals and this needs to be "linked to wider issues of quality of care and to the much larger body of evidence relating to the skills and training of carers, teachers and other professionals" (Brodie 2010, p.34).

## **Attainment**

- 3.38 Similarly to 'achievement', it has been argued that stability and permanence within a care placement, improves attainment (Aldgate et al. 1992; Stein 1994). Attainment has been defined as the baseline standard of the acquisition of 5 A\* - C GCSEs (Welbourne and Leeson 2013). According to the WAO (2012, p.4) "the attainment of looked after children and young people is improving slowly but many are not achieving their potential, there is too much variation in attainment, and weaknesses in data hamper its evaluation". Berridge (2012, p.1172) argues that "commentators have often falsely linked the low attainments of children in care to the care experience itself - confusing correlation with causation". He also suggests that the assertion that LAC do significantly worse than their non-looked-after peers is unconvincing.
- 3.39 Thus, accordingly: "there have been few attempts to evaluate educational progress over time and take into account the child's starting point" (p.1172). Berridge (2012) notes that closely linked with educational failure are the risk factors connected with family breakdown, poverty and entry into the care system. Thus he argues it is impractical "to link low attainment with unsatisfactory social work services, which has often been the case in England" (Berridge 2012, p.1172). For Berridge (2012, p.1175) the low attainment of LAC "may be more fundamental and difficult to remedy". Berridge et al. (2008) have argued that the care system is generally beneficial and not inherently damaging to children's attainment. However, Jackson and McParlin have questioned this: "if early adversity were the main reason for low attainment, one would expect children who come into care at an early age to do better than those who enter later, but there is no evidence that this is the case" (2006, p.91).
- 3.40 The educational attainment of children in residential care was first examined in 1965 through research exploring the effects of 'deprivation' and how this relates to education processes, language development, and intellectual growth (Pringle 1965). As a remedy to

improve 'deprivation' Pringle advocated that carers involved with 'deprived' children (children in residential public care) should give as much time as possible to:

talking to the children, reading and telling them stories, getting them to make up and act simple plays about everyday occurrences, encouraging them to relate small happenings that take place during the day to express their feelings, ideas and thoughts (Pringle 1965, p.180).

- 3.41 In the following year, Ferguson (1966) highlighted that children in public care scored below average on attainment and IQ tests. Essen, Lambert and Head (1976) identified that the "relatively low attainment of children in care is associated with factors other than, or additional to, the experience of care itself" (Essen et al. 1976, p.339). They suggested that low attainment was more prevalent in children living in families with considerable social and financial hardship. Welbourne and Leeson (2013, p.137) point out that compared with residing in families with complex problems the care system "does appear to promote attainment". They also note that exposure to trauma is linked to lower educational attainment and conclude that the:

evaluation of the progress made by children in care is as important as assessment of their actual level of attainment; the trajectory of attainment is a better indicator of the effectiveness of the care system in promoting children's educational outcomes than grades (Welbourne and Leeson 2013, p.138).

- 3.42 According to the SEU (2003) low attainment is exacerbated through being excluded from mainstream school and missing long periods of schooling. The SEU (2003, p.9) suggest that "although socio-

economic and other factors contribute to low attainment among children in care, they are not the only explanation". In an effort to further understand attainment the SEU (2003) provided five reasons for low attainment: (i) instability; (ii) too much time out of school; (iii) a lack of sufficient help with education; (iv) carers are not equipped or expected to support with learning and development; (v) and LAC requiring more help with "emotional, mental or physical health and wellbeing" (SEU, 2003, p.20). Adding to the knowledge base, Cassen et al. (2012), note that factors such as: parenting, occupation, income, and housing can also impact upon children's school attainment. However, they suggest that some children in low-income households have this negative impact moderated "by the effect of other protective factors, such as parents' education, knowledge or access to wider social capital" (Cassen et al. 2012, p.77).

- 3.43 In an effort to develop an understanding of the impact of behavioural concerns upon attainment, Colton and Heath (1994) undertook a longitudinal study which specifically explored the educational behaviour and progress of children in long-term foster care and a comparison group of children 'in need' who were living with their birth families and were receiving social work support. Findings highlighted that both groups (children in long-term foster care and 'comparison' group of children 'in need') had low attainment and high levels of behaviour problems. According to Colton and Heath (1994, p.326), this research reinforced the message "that children in public care are not well served by the education system". With the objective of identifying whether LAC exhibited any differences in attainment to their non-looked-after peers, Jackson et al. (2010) explored the differences of attainment in a school for pupils with emotional and behavioural difficulties. It was found that there were statistical differences of significance between LAC and their non-looked-after peers, in that LAC "were more able to spell words correctly [and] showed a higher ability to read single words" (Jackson et al. 2010, p.73). According to Jackson et al. (2010, p.76) these findings may

have significant implications concerning how LAC “are perceived and the academic standards which they are expected to reach”. Jackson and Sachdev (2001) have argued that by raising expectations, attainment can thus be increased. They also note that groups that have been particularly overlooked in research about LACYP and educational attainment are “pregnant schoolgirls in care, those from minority ethnic backgrounds and unaccompanied refugees and asylum-seekers” (p.5).

- 3.44 Elliott (2002) attempted to determine whether teachers had lower expectations of LAC and found that teachers expected LAC to be victims of bullying and not meet homework deadlines more often than their non-looked-after peers. Thus, Elliott (2002, p.67) concluded that “findings suggest that teachers do have a lower expectation of LAC in some (but not all) areas of the education process”. A small-scale study (n=59) found that local authorities held an incomplete and patchy picture of the young people’s attainment in the records they kept (Jacklin et al. 2006). For example, there were no recorded attainment data available for twenty four of the students (40.6 percent). These findings echo Allen’s (2003) study which had also previously identified a lack of local authority data. It is suggested that this lack of data:

highlights the challenges that face professionals in the field in identifying and tracking the needs of this particular group of pupils...we are still a worryingly long way from really knowing who our looked-after children are, and even further from establishing effective methods of keeping track of their schooling experiences (Jacklin et al. 2006, p.3).

- 3.45 A study funded by the Department of Health (n=106), explored the views of young people in seven local authorities in England who were leaving the care system (Dixon et al. 2006). Dixon and colleagues



found that in 90 per cent of the young people who had left school, just over half (54 per cent) had done so with “no qualifications at all” (p.80). Regarding the professional input from leaving care teams, findings revealed that in some cases, “the motivation for encouraging participation was not always aimed at attainment per se” (Dixon et al. 2006, p.87). For example, two fifths (38 per cent) attained at least one GCSE/GNVQ at any grade, one young person was attending university and many young people “were often undertaking fairly low-level courses that may not necessarily push them up the career ladder” (Dixon et al. 2006, p.87). The authors suggest that rather than relying on a narrow definition of attainment concerned with academic ability, other youth and leisure pursuits (beyond schooling) should also be considered (see also: Jackson and McParlin 2006).

### **Aspirations**

- 3.46 LACYP have similar aspirations to their non-looked-after peers (Davey 2006; DCSF 2010). For example, the aspirations mentioned by young people include having a good job; a good career; financial security; or a loving family and a nice home (DCSF 2010). Driscoll (2011) reported that LACYP’s aspirations ranged from becoming a barber, having nice family and friends, to becoming a firefighter, and attending college and university. However, it must also be noted that many of the young people did not express confidence in achieving their aspirations (DCSF 2010). For ‘high achievers’, one study identified a difficulty whilst residing in public care in having their educational aspirations recognised:

...career advice was either absent or pitched at a very low level. Women who now hold higher degrees were advised to go in for nursery nursing or secretarial training. Catering was the career most often recommended to boys (Jackson and Martin 1998, p.580).

3.47 Another study (Honey et al. 2011) compared aspirations between looked-after young people (n=51), and their non-looked-after peers (n=99). This study identified that nearly half of the non-looked-after young people aspired to be in a professional role, while only five looked-after pupils expressed similar aspirations. For the looked-after young people, the males predominantly chose skilled manual roles, while the females chose roles related to health and beauty, or the teaching or caring professions. In Cann's (2012) small-scale study (n=9) there were marked differences expressed between young people in foster and residential care. For example, young people in foster care spoke about long-term plans for education with several mentioning that they wanted to attend university, while those in residential care were more preoccupied by achieving their GCSEs.

3.48 Fletcher-Campbell and Archer (2003) have highlighted that in some cases there is an absence of data regarding LAC's education. In particular, Fletcher-Campbell and Archer (2003) discovered that almost two-thirds of cases within their study, young person's career aspirations were unknown or missing from their case files. It has been highlighted that some social workers have been ambivalent about the educational aspirations of LAC and care leavers (Berridge 2012). Jackson and Sachdev (2001) argue that:

it is still extremely rare for looked after young people to take A-levels... they also frequently miss out on the careers advice offered to others. Their ambitions are often not taken seriously (Jackson and Sachdev 2001, p.4).

3.49 It has been argued that: "the State should have positive expectations for the children it looks after in the same way that middle class families do" (Berridge 2012, p.1175). Thus, LAC:

should have the same opportunities as other children to education, including further education. They should also be

offered other opportunities for development, such as leisure and extracurricular activities (Jackson and Sachdev 2001, p.1).

- 3.50 Brodie (2010) has pointed out that in order to ensure that LAC have high aspirations, the support from carers and the home learning environment must be a positive overall experience. Banbury et al. (2014) identified that past family experiences such as: time spent with biological parents, family trips to the seaside, relationships with significant adults such as teachers, foster carers and mentors, were all key factors that influence the formation of aspirations in LAC. Jackson et al. (2005) argue that if LAC's aspirations are to be raised then they need to have something to aspire to. What this suggests is that more progress is required to ensure that all LACYP and care leavers have opportunities, in order to identify, and realise, their future aspirations.

### **Systematic review of successful educational interventions for looked after children**

- 3.51 This section attends to Objective 3 by providing the results of the review of successful educational interventions for looked after children. The review was conducted in adherence with the PRISMA statement for the reporting of systematic reviews (Liberati et al. 2009; Shamseer et al. 2015).
- 3.52 Searching of electronic bibliographic databases retrieved 2,514 studies. Consultation with experts identified sixteen studies, the majority of which were unpublished theses or reports. Scanning of relevant publications and scoping review reference lists elicited an additional three studies. After the removal of duplicates 1,620 studies remained comprising 1,601 from databases, sixteen from author recommendation and three from reference checking. The title and abstracts of these studies were assessed against the inclusion criteria. 1,560 were excluded at this stage, leaving the full texts of

sixty studies to be appraised. During this process a further forty-six papers were excluded. Reasons included: children and young people in care were not the focus of the study, either as the primary population or a subgroup (n=11); the intervention did not include educational outcomes, either as a primary or secondary outcome (n=29); evaluation did not include a RCT or quasi-experimental research design (n=5); one study could not be located, although it was requested from the author. Fourteen studies, reporting eleven educational interventions were included in the review. Details of the interventions are reported in the table in Annex P. The process of study screening and selection is documented in the PRISMA flow diagram (Annex D).

### *Study Design*

- 3.53 The fourteen studies utilised the randomised controlled study design. Randomisation was conducted at the level of the individual subject, although in the evaluation of Head Start clustering was addressed in analysis to accommodate for the nesting of multiple children within specific Head Start centres (Lipscomb et al. 2013).

### *Intervention Setting, Delivery Agent, Timing and Duration*

- 3.54 Kids in Transition to School (Pears et al. 2013) is a classroom-based programme with two delivery phases: two months prior to kindergarten entry (school readiness phase) and the first two months of kindergarten (transition/maintenance phase). During this period children attend 24 school readiness sessions that addressed early literacy skills, prosocial skills, and self-regulatory activities.
- 3.55 In the Kids in Transition to School programme, sessions comprise 12-15 children and are delivered for a period of two hours, twice weekly in the first phase, and once weekly in the second phase. Carers attend eight parallel meetings intended to develop their capacity to support their child in practicing their new skills, introduce routines

around school activities, prepare the child for transition into kindergarten and use behaviour management techniques. Groups are delivered for two hours every two weeks. The school readiness sessions are delivered by a graduate-level teacher and two assistance teachers, and the carer group is delivered by a facilitator and assistant, with all completing a standardised 40 hour training programme. Participants also receive supplemental materials to support the implementation of new skills.

- 3.56 One intervention was delivered in the care setting where undergraduate and graduate students were the delivery agent. The Early Start to Emancipation Preparation (ESTEP) programme (Courtney et al. 2008; Zinn and Courtney 2014) is intended to improve the academic skills of young people in foster care. On referral to the intervention, participants are matched with a tutor based on age, proximity and availability. Tutors receive one day training at commencement of the intervention and ongoing development twice a year. Tutors meet with the youth twice a week within the care setting, providing up to 50 hours of tutoring in a math, spelling reading and vocabulary curriculum. A mentoring relationship is also anticipated, with the youth acquiring the skills and experience to develop healthy relationships with other adults.
- 3.57 Five interventions were delivered by carers within the care settings. Three were versions of the Teach Your Children Well (TYCW) approach (Flynn et al. 2012; Flynn et al. 2012; Harper 2012; Harper and Schmidt, 2012; Marquis 2013) and two were focused on Multidimensional Treatment Foster Care (Leve and Chamberlain 2007; Green et al. 2014). The individual-level TYCW focuses on direct one-to-one instruction by trained foster carers (Flynn et al. 2012; Flynn et al. 2012; Marquis 2013). The intervention includes three hours instruction per week, comprising two hours one-to-one instruction in reading, 30 minutes reading aloud by the foster child to the carer and 30 minutes self-paced instruction in maths. The small group-based TYCW builds on the individualised approach and

involves one or two trained university students delivering the curriculum to small groups of 3-4 children (Harper 2012; Harper and Schmidt 2012). Although both studies report on the same evaluation, the duration on TYCW in Harper and Schmidt (2012) is 25 weeks and 30 weeks in Harper (2012).

- 3.58 Green et al. (2014) evaluated the Multidimensional Treatment Foster Care (MTFC) approach. Based on social learning theory, the intervention delivered training and supervision to specialist foster parents, on the assumption that families may provide positive socialisation contexts. The duration of the intervention is around 9 months, with a short period of aftercare. Intervention components focus on providing a positive reinforcing environment for young people, with clear structures and specified boundaries for behaviour. Behaviour is monitored and rewarded through a system of points and levels, with participants moving from early restrictions through a series of levels which bring increased privileges and enhanced incentives.
- 3.59 The MTFC intervention reported by Leve and Chamberlain (2007) caters to a different population, focusing on young girls in the juvenile system. The intervention involves them moving into a specialist foster placement, and in the study this was for an average duration of 174 days. The intervention involves: monitoring behaviour and intervening when required; coaching foster parents; weekly therapy sessions for the young person; and a family therapist who works with 'aftercare resources', which usually comprises birth parents.
- 3.60 Three interventions were non-standardised in their setting, delivery agent and duration. Head Start is a holistic, wraparound set of services intended to support disadvantaged pre-school-age children. As the largest publicly financed early education and care program in the US, it has been subjected to numerous evaluations, but Lipscombe et al. (2013) provide the first evidence of effect in children in state care. The Fostering Individualized Assistance Program (FIAP) is delivered by family specialists who serve as family-centred, clinical

case managers and home-based counsellors working across all settings in tailoring services for individual children (Clark et al. 1998). Each specialist has a graduate degree and between 3-12 years of experience in working with challenging youth and families within treatment programmes. Specialists carrying approximately 12 active cases and up to 10 maintenance level cases.

- 3.61 In FIAP, there are four intervention components: strength-based assessment; life-domain planning; clinical case management; and follow-along supports and services. Zetlin, Weinberg and Kimm (2004) report on the effect of introducing education specialists. As a certified special education teacher, with knowledge of the rules and regulations of the school system and resources in the local community, the specialist receives referrals from child welfare agencies when social workers are unable to resolve educational difficulties. On receipt of a referral, the specialist advises the welfare agency, advocates for the young person, and investigates alternative school options. Specialists also receive legal training from a non-profit advocacy law firm, who provide technical assistance on cases. During the first year of the program a total of 160 cases were referred to one education specialist.
- 3.62 One intervention was delivered to young people who had left residential care. *On the Way Home* (Trout et al. 2012) is a twelve month intervention to support the transition of youth with or at risk of disabilities as they reintegrate into home following a stay in out-of-home care. Each family is assigned a trained family consultant who delivers the majority of the intervention. The programme integrates three interventions: Check and Connect, which entails the consultant working with a school mentor to monitor school engagement and communicate with the youth and parents to ensure engagement in educational goals; Common Sense Parenting which is a series of six one-to-one sessions to educate parents in the skills required to support academic and behavioural success; and homework support.

Over the duration of the intervention family consultants spend approximately 138 hours with each family.

### *Sample Characteristics*

- 3.63 Care Placement: Nine interventions were primarily aimed at children and young people in foster care, although the sample in some evaluations comprised a small number in kinship care, group homes, or other residential care settings (e.g. Courtney et al. 2008; Zinn and Courtney 2014). Lipscombe et al's (2013) evaluation of Head Start mainly comprised kinship care, with 83 per cent living with a family relative. Meanwhile, On Your Way Home focused on young people with or at risk of disabilities leaving residential care and transitioning back into the home setting (Trout et al. 2013).
- 3.64 It is notable that the inclusion criteria for some evaluations specified that the caregiver had to demonstrate willingness to participate, so they may represent atypical care settings to some degree (Flynn et al. 2011; Flynn et al. 2012; Marquis 2013; Pears et al. 2013). For example, in order to participate in the individual-level TYCW foster parents had to be nominated by Children's Aid Society staff as being: sufficiently motivated; literate; willing to undertake training and have training subsequently monitored; committed to delivering the intervention; internet users; willing to communicate with project staff (Flynn et al. 2011; Flynn et al. 2012; Marquis 2013).
- 3.65 Age: The sample for two intervention evaluations, Head Start (Lipscombe et al. 2013) and Kids in Transition to School (Pears et al. 2013) were pre-school children aged 6 and younger. Five evaluations included children aged 6 to 13 (Flynn et al. 2011; Flynn et al. 2012; Harper 2012; Harper and Schmidt 2012; Marquis 2013). Four evaluations included young people aged 13-18 (Leve and Chamberlain 2007; Courtney et al. 2008; Zinn and Courtney 2012; Trout et al. 2013) Three studies had a broader age range in their



sample, ranging from 5-17 (Clark et al. 1998; Zetlin et al. 2004; Green et al. 2014).

- 3.66 Gender: Thirteen studies included both males and females, with the percentage of males ranging from 46 per cent (Courtney et al. 2008; Zinn and Courtney 2014) to 65 per cent (Green et al. 2014). Two of these studies did not indicate the ratio of males to females (Zetlin et al. 2004; Lipscombe et al. 2013). Leve and Chamberlain's (2007) study of MTFC was only aimed at girls leaving the criminal justice system.
- 3.67 Race and Ethnicity: The majority of studies defined the predominant ethnicity of their sample as white, Anglo-American or Caucasian. The evaluation of group-based TYCW (Harper 2012; Zinn & Harper, 2012) included a sample that was 78.2 per cent Aboriginal, as this population is largely over-represented within the care system in Canada. The ESTEP programme was predominately defined as black (60 per cent) (Courtney et al. 2008; Zinn and Courtney 2014). The Head Start evaluation included almost equal proportions of Anglo-Americans (43 per cent) and African Americans (39 per cent).
- 3.68 Special Educational Status or Additional Needs: A small number of evaluations were aimed at the general population of children in care, and excluded those who were already strong students, or were academically weak or behaviourally challenging (Flynn et al. 2011; Flynn et al. 2012; Marquis 2013). Others included those who were behind on educational outcomes and displayed a range of internalising and externalising problems, but were not necessarily defined as having an intellectual disability (Clark et al. 1998; Zetlin et al. 2004; Courtney et al., 2008; Lipscombe et al., 2013; Zinn and Courtney 2014; Green et al. 2014).
- 3.69 For example Zetlin et al (2004) include a sample where 68 per cent of the intervention group and 41 per cent of the control group required special education. Equally Lipscombe et al.'s (2013) sample for Head Start had a prevalence rate of special needs that was twice the rate of

the general population. Trout et al.'s (2013) evaluation of On the Way Home was specifically targeted at young people with disabilities who were leaving residential care. Meanwhile Leve and Chamberlain (2007) did not focus on educational status, but included young girls on the basis they were not currently pregnant and had at least one criminal referral in the past 12 months.

- 3.70 Comparison Treatment: The 'usual care' received by the control group during the intervention period was largely undefined in the studies. These individuals tended to receive comparable state care (e.g. foster care) and the broad mix of educational, counselling or psychotherapeutic services that are generally made available to this population. In Leve and Chamberlain's (2007) evaluation of MDFC the control group receive Group Care, which involves a range of community-based group care programs including residence in some instances. The individual-level TYCW (Flynn et al. 2011; Flynn et al. 2012; Marquis 2013) employed a wait list approach, where the control group received the intervention a year after study completion. During the trial period usual care comprised a Registered Education Savings Plan, which was a total of \$1000 with matched funding of 40 per cent from the government. As outlined in the risk of bias section contamination in the control group was apparent in some studies, with individuals in the control group either receiving the intervention or a comparable programme (Courtney et al. 2008; Zinn and Courtney 2014).

#### *Study Power*

- 3.71 To detect the intended effect of an intervention it is necessary to conduct a power calculation in order to determine the appropriate sample size for the study. Both the evaluation of the individual-level TYCW (Flynn et al. 2011; Flynn et al. 2012; Marquis 2013) and the group-based TYCW (Harper 2012; Harper and Schmidt 2012) were powered to detect a medium effect size for reading and writing skills.

However, Green et al. (2014) calculated a target sample of 130 participants in order to yield an 80 per cent chance of the RCT finding a significant difference, but only a sample of 34 was achieved. Eight of the studies did not report a power calculation, so the results must be interpreted with caution as it is unclear if the sample size was sufficient (Clark et al. 1998; Zetlin, Weinberg and Kimm 2004; Leve and Chamberlain 2007; Courtney et al. 2008; Lipscombe et al. 2013; Pears et al. 2013; Trout et al. 2013; Zinn and Courtney, 2014).

### *Risk of Bias*

- 3.72 Risk of bias was assessed using the Cochrane collaboration tool (Higgins and Green 2011). The level of risk in each domain across the fourteen studies is presented in the table Risk of Bias Assessment (see Annex Q). The primary limitation with studies was a lack of adherence to systematic review reporting procedures, such as those issued by CONSORT. As a result there was a lack of clarity around how risks of bias were addressed.
- 3.73 Random Sequence Generation: Seven studies did not report use of random sequence generation in the randomization process. Seven studies stipulated using randomizer programmes (Clark et al. 1998; Harper and Schmidt 2012; Harper 2014; Green et al. 2014) or a table of random numbers (Flynn et al. 2011; Flynn et al. 2012; Marquis, 2013).
- 3.74 Allocation Concealment: Thirteen of the studies did not report on allocation concealment and it was unclear if effort was undertaken to prevent evaluators from knowing which group participants were assigned to. Green et al. (2014) randomised according to a predefined randomisation schema, with the process being independently carried out by a different statistical group.
- 3.75 Blinding of Participants or Personnel: Due to the interventions being undertaken, blinding was unfeasible and it is inevitable that participants and personnel were aware of their receipt of a

programme. As a result, although studies were unclear how much knowledge individuals had of their status in the trial, we can assume a level of risk.

- 3.76 **Blinding of Outcome Assessment:** Twelve studies were unclear as to whether evaluators were blinded when assessing outcomes. Two studies had a lower level of risk. Green et al (2014) state that all outcome measures were coded and masked to group allocation, with the data being pooled and triangulated across reports, records and telephone interviews in order to minimise reporting bias. Pears et al. (2013) report that all data collection staff was blind to the group assignment of both children and caregivers.
- 3.77 **Selective Outcome Reporting:** None of the studies stipulated that a protocol was published in advance of the review, and no such protocols could be located. It is therefore unclear if all outcomes are reported on.
- 3.78 **Incomplete Outcome Data:** Five studies were judged to have low risk of bias with more than 80 per cent retention at follow up, and where data was missing on one or more outcome variables analysis had often been employed to provide unbiased estimates (Leve and Chamberlain 2007; Harper 2012; Harper and Schmidt 2012; Trout et al. 2013; Pears et al. 2013). Seven studies were judged to have a high risk of bias either due to a retention rate of less than 80 per cent at follow-up, an imbalance of incomplete data across intervention and control groups, or failure to generate unbiased estimates of missing data in analysis (Zetlin et al. 2004; Courtney et al. 2008; Flynn et al. 2011; Flynn et al. 2012; Marquis 2013; Green et al. 2014; Zinn et al. 2014).
- 3.79 Although retention and reporting of outcomes were high in the evaluation of the ESTEP programme (Courtney et al. 2008; Zinn et al. 2014) 38.2 per cent of the intervention group did not receive the intervention and were excluded from analysis. The differences between those in the receipt of the intervention and those who were

not is not fully addressed in the analysis. Equally, in Green et al.'s (2014) evaluation of Multidimensional Treatment Foster Care there was minimal loss to follow-up, but only 60 per cent of those assigned the intervention actually went on to receive it. Two studies were unclear about the completeness of outcome data (Clark et al. 1998; Lipscombe et al. 2013).

- 3.80 Confounding: Although RCTs should prevent the issue of confounding, as the intervention constitutes the only significant difference between the intervention and the control group, reported baseline differences in some studies, combined with risk of bias in the conduct of randomization, ensure that it remained a potential problem. Only four studies controlled for a range of covariates in their analysis (Leve and Chamberlain 2007; Lipscombe et al. 2013; Pears et al. 2013; Trout et al. 2013). Six studies controlled for baseline scores of the outcome measurement (Flynn et al. 2011; Flynn et al. 2012; Harper 2012; Harper and Schmidt 2012; Marquis 2013; Green et al. 2014). Five studies did not report controlling for any covariates (Clark et al. 1998; Zetlin et al. 2004; Courtney et al. 2008; Zinn and Courtney 2014). Therefore in a number of the studies there may be an underlying extraneous variable that explains the association between the intervention and outcomes.
- 3.81 Contamination: Although contamination was not explored across all studies, the transience of the sample and limited awareness of the trial status of young people by delivery agents ensured that it was a risk. For example, in the evaluation of the ESTEP programme (Courtney et al. 2008; Zinn and Courtney 2014) 12.3 per cent of the control group received the intervention. Also of relevance is that 18.9 per cent of this group received school-based tutoring from a non-ESTEP provider during the trial. This contamination undermined the intended intention to treat analysis.

### *Outcomes of Intervention Evaluations*

- 3.82 The educational outcomes of the evaluations are presented in the table, Outcomes of Intervention Evaluation (see Annex R). Outcomes mapped onto the following key areas: academic skills; academic achievement and grade completion; homework completion; school attendance, suspension and drop-out; number of school placements; school relationships; school behaviours.

### *Academic Skills*

- 3.83 Academic skills, which predominantly constitutes reading and mathematical computation, were assessed in eleven studies. Two validated measures were routinely employed, with five utilising the Wide Range Achievement Test (WRAT-4) and four implementing the Woodcock Johnson Tests of Achievement III. Pears et al. (2013) used the Dynamics Indicators of Basic Early Literacy Skills (DINELS), while Zetlin et al (2004) did not report the measure construct.
- 3.84 Seven studies reporting on five interventions found some evidence of effectiveness. Kids in Transition to School measured early literacy skills in children aged 6 and under, finding a small effect ( $E.S.=0.26$ ) (Pears et al. 2013). Head Start also found a small effect at six month post-baseline ( $E.S.=0.16$ ,  $p=0.02$ ) which was reported as significant (Lipscombe et al. 2013). At 18 month post-baseline there was no significant direct intervention effect, but there was a modest indirect effect, with gains in pre-academic skills and the establishment of positive teacher-child relationships during Head Start predicting higher pre-academic skills in the following year.
- 3.85 The individual-level TYCW also reported positive effects on sentence comprehension ( $E.S. =0.38$ ,  $p<0.05$ ), reading composite ( $E.S. =0.29$ ,  $p<0.01$ ) and math computation ( $E.S. =0.46$ ,  $p<0.01$ ) (Flynn et al. 2011; Flynn et al. 2012; Marquis 2013). There was no significant impact on word reading or spelling. To note, Flynn et al. (2011; 2012) report Hedges  $g$ , which have been included in this review rather than

the Cohen's *d* presented in Marquis (2013) as they are more appropriate with small sample sizes. However, they do provide a more conservative estimate of effect. Marquis (2013) conducted further analysis and considered if the child was taught individually or in a sibling pair. It was reported that single children had significant improvements in word reading, sentence comprehension, reading composite and maths, whilst sibling pairs only indicated significance for math computation. Equally, the evaluation found that ADHD, mental health and internalized and externalized behaviours, as defined by the 'Child Behavior Checklist', moderated the relationship between the intervention and academic skills.

- 3.86 The 25 week group-level TYCW also assessed academic skills, although the WRAT-4 has not been validated for use with the aboriginal population, who comprised most of the study sample (Harper and Schmidt 2012). The study found a significant effect on reading (E.S. =0.42,  $p=0.002$ ) and spelling (E.S. =0.38,  $p=0.004$ ), but not sentence comprehension or math computation, although the latter fell within the substantively important range. Harper's (2012) evaluation of the 30 week, group-level TYCW found an effect on reading (E.S. =0.40), spelling (E.S. =0.25,  $p=0.004$ ), but not on sentence comprehension or maths. The study found a moderating role for school stability on reading scores, with only a significant effect for the intervention when school instability was high ( $p<0.001$ ) or medium ( $p<0.001$ ). There was also evidence of ADHD as a moderator, though none for residential instability. The variation in effect across subsets of academic skills between the individual-level TYCW (Flynn et al., 2011; Flynn et al. 2012; Marquis 2013) and the group-level TYCW (Harper 2012; Harper and Schmidt 2012) is explained by differences in the individual and group format and the different ways components were implemented.
- 3.87 Four studies reporting on three interventions found no evidence of effect. Green et al.'s (2014) evaluation of group-based MTFC indicated no impact on scholastic or language skills. In the trial of

education specialists Zetlin et al. (2004) reported differences between the intervention group and control group at baseline but no significant differences at follow-up for maths test achievement scores ( $p=0.082$ ) or English test achievement scores ( $p=0.448$ ). The ESTEP programme found no impacts on letter word identification, calculation or passage comprehension (Courtney et al. 2008; Zinn et al. 2014). The authors hypothesise that a large number of young people enter care due to mental health and behavioural problems, with this being evidenced by the fact that 6.5 per cent of the study sample tested positive for post-traumatic stress, 35.1 per cent reported having been in special educational programmes prior to the study, and 26.7 per cent reporting a learning disability. They suggest that the graduate students who delivered the intervention did not have the specialist training necessary to serve these youth, and a more appropriate model may be to have specialist teachers.

#### *Academic Achievement and Grade Completion*

- 3.88 Three studies reporting on two interventions measured Grade Point Average (GPA), General Education Development (GED) or grade completion (Zetlin et al. 2004; Courtney et al. 2008; Zinn and Courtney 2014). The evaluation of education specialists indicated no impact on GPA at 24 months post-baseline (Zetlin et al. 2004). Meanwhile the one-to-one tutored ESTEP programme found no effect on GPA or GED as follow-up, which was approximately at 26.8 months (Courtney et al. 2008; Zinn and Courtney 2014). The study also found no effect on grade level completion.

#### *Special Education Status*

- 3.89 The evaluation of education specialists measured special education status amongst the foster care sample (Zetlin et al. 2004). At baseline 68 per cent of the intervention group and 41 per cent of the control group were of special educational status, which was either delivered



in public schools, non-public schools or residential schools. At baseline 18 young people in the intervention group were in special education, and this was reduced to nine at 24 month follow up. In the control group the number decreased from 10 to 7. The significance of these reductions was not presented by the study.

#### *Homework Completion*

- 3.90 One study reported on homework completion. In their evaluation of MTFC for young girls leaving the youth justice system, Leve and Chamberlain (2007) assessed homework completion on three days in a one week period at 3-6 months and 12 months post-baseline. At both time points the intervention group spent more days on homework than the control group. Indeed, the young girls in the intervention spent approximately 150 per cent more time on homework at 12 months post-baseline, whilst the control group experienced a decline in the time allocated to this task.

#### *School Attendance, Suspension, and Drop out*

- 3.91 Four studies reporting on four interventions assessed school attendance, with two finding some evidence of effect. Green et al.'s (2014) evaluation of the MDFC intervention on educational attendance (OR=2.5, 95 per cent CI=0.48-13.1). However, Leve and Chamberlain's (2007) evaluation of MDFC for young girls leaving the juvenile system had an effect at the  $p < .01$  level. In the evaluation of educational specialists Zetlin et al. (2004) found there was no significant difference between intervention and control group at baseline but one at 24 month follow-up in favour of the control group. In Clark et al's (1998) evaluation of the FIAP there was no significant difference in extreme school absences (>40 per cent of school days missed) between the intervention and control group at follow-up, but when the sample was restricted to the older subset (11.5-16) the

control group was more than two times likely to be engaged in school absenteeism.

- 3.92 One study addressed suspension rates. Clark et al. (1998) indicated that at the 42 month follow-up those in the control group were 2.5 times more likely to be engaged in an extreme proportion of days on suspension (>1 per cent of schools days). When the population is separated into a younger and older subset, there is no significant effect for the younger group but a significant impact is retained for the older category, with the control group being more than four times as likely to be suspended.
- 3.93 Two studies considered school stability and drop-out. Trout et al.'s (2013) evaluation of On the Way Home reported that young people in the control group were more than three times more likely to leave school compared to those in the intervention group at 12 month post-baseline, which was significant (95 per cent CI=0.12-0.75). However, it is noted that both groups tended to fare better than youth in comparable studies of populations of disabled young people, suggesting that these individuals were better prepared for the transition from out-of home care. Clark et al. (1998) also measured school drop-out and found no significant effects, even when the group was separated into a younger and older subset.

#### *Number of School Placements*

- 3.94 Two evaluations reporting on two interventions measured the number of school placements. Zetlin et al. (2004) assessed the number of schools attended by young people prior to the introduction of an educational specialist, and at twenty-four month post-baseline the number of schools attended dropped from an average of 1.30 to 1.18 in the intervention group, and from 1.28 to 1.12 in the control group. There was no significant difference between the group at baseline but significance at the  $p < 0.05$  level at follow-up, with suggestion of a more

favourable outcome in the control group. Clark et al.'s (1998) evaluation of the family specialist coordinated programme did not find any impact on the extreme number of school-to-school movements, which is defined as more than 3 placements per year.

#### *Teacher-Student Relationships*

- 3.95 Only the Head Start intervention evaluation measured teacher-student relationships as an outcome (Lipscombe et al. 2013). At six months post-baseline there was a significant effect for the intervention (E.S. =0.30,  $P < 0.01$ ), with an indirect intervention effect being present at 12 month follow-up. The study highlights the unique contribution of Head Start on relationships in children in non-parental care, as this effect was not detected in the general population sample.

#### *School Behaviour*

- 3.96 The one-to-one tutored ESTEP programme assessed impacts on school behaviour, which was a composite measure comprising: getting along with teachers; paying attention in school; getting your homework done; getting along with other students; arriving on time for class; (Courtney et al. 2008; Zinn and Courtney 2014). At approximately two year post-baseline the intervention demonstrated no effect on school behaviour. Although other studies considered externalised behavioural repertoires, these were deemed to be outside of the purview of the review as they are a broader outcome measurement than school behaviour.

#### *Subgroup Analysis and Assessment of Inequalities*

- 3.97 Twelve studies reporting on nine of the interventions did not conduct subgroup analysis by age, gender, ethnicity or other social markers. Clark et al's (1998) evaluation of the FIAP created a younger (7-11.5) and older (11.5-16) subset. Although drop-out and school-to-school

movement was not impacted by the intervention, extreme school absences and extreme days on suspension demonstrated significant improvements. This effectiveness was not evident in the younger subset but was retained in the older subset, suggesting the potential for these problems to become more evident as young people mature and progress through the education system. The study explored gender and ethnic differences, but found no difference and as a result this data is not reported.

- 3.98 Analysis by gender was conducted in the evaluation of the individual-level TYCW (Marquis, 2013). There was some variation in effect sizes for boys and girls across the domains of the Wide Range Achievement Test (WRAT-4). Notable differences included boys not experiencing an effect for word reading, whilst girls experienced a positive impact from the intervention ( $d=0.39$ ). There was a substantially greater improvement in sentence comprehension for boys ( $d=0.44$ ) than girls ( $d=0.12$ ). Meanwhile the effect of the intervention on mathematical computation was almost twice as high for girls ( $d=0.41$ ) than boys ( $d=0.21$ )

#### *Process Evaluation*

- 3.99 Process evaluation data was extracted according to: reach and receipt; contamination; adherence; and acceptability. Contextual influences on intervention delivery were also considered in terms of providing facilitators and barriers, but also potentially constraining the generalizability of outcomes.
- 3.100 A small number of studies addressed barriers to intervention receipt. In the ESTEP programme there was a problem with only 61 per cent of the intervention group receiving treatment (Courtney et al. 2008; Zinn and Courtney 2014). This was explained by the average length of 15.3 weeks between assignment to the intervention and actual commencement, with 13 per cent waiting between 24 weeks and 2 years to start the training. Due to the transience of placements, many

youth were no longer situated in the foster home listed for tutoring at the time of commencement. The individual-level TYCW intervention also experienced problems of uptake and retention (Flynn et al. 2012). A number of endogenous reasons for drop-out were reported including: it took too much time for busy caregivers; it was a source of conflict between carer and children; it was not needed because the child was already doing well in school. Exogenous reasons extended to include: carer illness; changes in young people's placements; or practical barriers to completing evaluation assessments. Due to a combination of these factors, 29 per cent of the intervention group did not receive any tutoring. Studies also reported concerns around contamination. Courtney et al. (2008) identified it as a problem in the ESTEP programme, and explained this by young people being placed in homes where a tutor was already working with another youth and unaware of the youth's status as a control in the study.

- 3.101 Nine studies reporting on five interventions documented adherence and dosage, with measurements suggesting variation in implementation practices across studies. Pears et al's (2013) evaluation of Kids in Transition to School reported high levels of fidelity, with 100 per cent of intervention materials being covered. In the ESTEP programme, Courtney et al. (2008) assessed variations in dose, finding that 28 per cent of young people received more than 20 hours, 33 per cent received between 21 hours and 50 hours, and 28 per cent received more than 40 hours. As a result, numerous young people received less than the programme's guidelines stipulated. Equally, Green et al. (2014) monitored dose of MTFC, and found that by the end of the intervention only 45 per cent of participants remained in the specialist foster placement, meaning that the full course of the programme was not delivered to many. In the individual-level TYCW (Flynn et al. 2011; Flynn et al. 2012; Marquis 2013), 21 cases reported high fidelity, two medium fidelity and seven low fidelity. Although there was a battery of assessments of delivery, including post-test questionnaires and weekly performance data, there were

challenges in reliably assessing fidelity for the maths curriculum, as the self-paced, computer based format was looser and more informal than the reading curriculum. The group-based TYCW also reported issues with fidelity to the maths curriculum, where tutors struggled in delivery (Harper 2012; Harper and Schmidt 2012). Although Clark et al. (1989) do not quantify adherence they offer further insight into how implementation problems may emerge, commenting that adherence may be impacted by variations in delivery agents, the quality and consistency of supervisors for these individuals, and the broader context of social care with high caseloads and transient young people.

- 3.102 However, despite inclusion of process evaluation data in these studies, they were rarely linked to outcome data with limited mediator or moderator analysis, or subgroup analysis according to adherence level. Marquis (2013) evaluation of the individual-level TYCW was the only study to construct implementation as a moderator for intervention outcomes. Higher levels of fidelity in delivering the reading curriculum offered an advantage in maths scores. The same trend was also apparent for the maths curriculum, with those receiving a higher level of exposure making significantly higher gains on the math computation. Such results provide evidence of implementation as a moderator.
- 3.103 Five studies reporting on two interventions explored acceptability for both delivery agents and participating young people. In the TYCW (Flynn et al. 2011; Flynn et al. 2012; Marquis 2013), 79 per cent of foster parents stated they would recommend it, with a further 14 per cent claiming they would recommend it with hesitation. The acceptability of the young people was not reported, although there was discussion of challenging behaviour and resistance to tutoring. With regards to the ESTEP programme, there was conflict with the large number of additional educational interventions available, with some young people preferring school-based approaches to those delivered at home, potentially due to them being less stigmatising (Courtney et al. 2008).

### *Economic Evaluation*

- 3.104 No studies incorporated a full economic evaluation of the intervention. As Clark et al. (1998) highlight, where interventions constitute changes to existing practices amongst those already operating within the system, as opposed to the insertion of a discrete intervention package, estimation of costs can be challenging. Where discussions pertained to costs they focused on the limited available resources within the social care system, which inhibited intervention sustainability (Zinn and Courtney 2014).

### *RCTs in Progress: Fostering Healthy Futures and the Letterbox Club*

- 3.105 Expert recommendations revealed two RCTs that are currently being undertaken and are due to report imminently. Although they could not be included in the existing review, we highlight them for inclusion in future summaries of research in this area. Evaluation of the Fostering Healthy Futures programme was conducted in the USA between 2002 and 2009 (Taussig et al. 2007; Taussig and Culhane 2010; Taussig et al. 2012). The intervention involves a manualized skills group which aims to reduce stigma and provide opportunities to learn social and emotional competencies within a supportive environment. Groups are delivered for 30 weeks, lasting approximately 1.5hrs each week, and comprise two trained facilitators and 8-10 children. The intervention is informed by the evidence-based PATHS curriculum and the Second Step approach. Mentoring is also provided by graduate students in social work, who act as a role model and advocate for the young person, meeting with them for 2-4 hours per week. Evaluation was conducted with 156 children aged 9-11 who were in foster care due to a court order for maltreatment. 79 were randomly assigned the intervention and 77 the control group. The primary outcome was mental health, and at fifteen months post-baseline the intervention groups scored significantly lower on multi-informant measures of poor mental health (RR=-0.51, 95 per centCI=-0.84,-0.19). Secondary

educational outcomes were measured as part of the trial and analysis is currently being undertaken.

- 3.106 The Letterbox Club was originally delivered in England and has been subsequently implemented in Wales, Scotland and Northern Ireland (Winter et al. 2011; Griffiths et al. 2008; Griffiths et al. 2010a; Griffiths et al. 2010b). The intervention is aimed at children in care aged 7-11 and is delivered for six months. It entails regular delivery of personalised parcels to intervention recipients, containing books, stationary and mathematics games. The intervention does not necessitate participation by carers in reading and playing games, but it is hoped they will be involved. Evaluation undertaken by Griffiths et al. (2010a; 2010b) indicated that children in the intervention made significant gains in reading scores and a 39 per cent improvement on their national curriculum level in maths. Prior to conduct of the current RCT in Northern Ireland, secondary analysis of routine pre-test and post-test monitoring data was undertaken with a sample of 268 children (Winter et al., 2011). The study reported significant improvements in standardised reading accuracy ( $p < 0.0005$ ), reading comprehension ( $p < 0.0005$ ), and completion of number problems and fluency with mental arithmetic ( $p < 0.0005$ ).

#### *Intervention Vignettes*

- 3.107 Vignettes of eight of these interventions were produced to discuss in focus groups with care leavers (see Annex E), their evaluations and feedback on the interventions can be found in Chapter Four.



## 4. Findings: Phase 2

### Introduction

- 4.1 This chapter presents the key findings from Phase 2, which relate to the Welsh Government requirement to conduct an in-depth qualitative research study with LACYP, to provide insight into their experience of education and their opinions on what could be done to improve it. The data for Phase 2 was generated in interviews, focus groups and a suite of activities. It is presented in relation to the themes of aspirations, educational experience and educational interventions for LACYP. A detailed explanation of the research design and the individual research techniques was set out in Chapter Two.

### Aspirations and jobs: When I grow up I want to be a ...

- 4.2 The LACYP that participated in our research discussed a wide range of aspirations related to future employment. Chosen vocations included hairdressing, teaching, farming, acting, policing and being a vet, a chef or owning a hotel. Most frequently children connected their choice of future career to something they were familiar with or had some experience of. For example, as her first choice Elsa<sup>6</sup> (age 7) wanted to grow up to be Elsa from the Disney film Frozen and “*have a dress... and shoes and powers*” but as an alternative she wanted to be a “*shopkeeper*” just like “*the one in [the area]*” where she lived.

Future aspirations were often influenced by family and friends:

*“[I] might be a builder ... or a carpenter ... Might even be an engineer.... My Bamp does it. He’s an engineer”.* (Neymar, age 9)

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<sup>6</sup> All the LACYP’s names in this report are fictitious. Pseudonyms were selected by the participants to maintain their anonymity.

*“My grandfather was in the army, my dad was in the army, my uncle has been in the army, my best mate is going in the army and my other mate is going in the army” (Jeffrey, age 16)*

- 4.3 For Alesha and Bob, future aspirations were connected to personal interests and activities they enjoyed:

*“It’s just through my whole life I’ve been looking after my younger sister and my nieces, because they are all younger than me ... I’ve always wanted to do it [work in childcare] and it makes me happy”. (Alesha, age 16)*

*“I want to become a mechanic when I’m older .... Like I help my foster brother a lot with his car, if he’s got anything wrong with his car, so we do a lot with that... he teaches me what he knows and then if I know something that he doesn’t know we like to teach each other”. (Bob, age 15)*

- 4.4 Future career aspirations that related to current interests and activities were also apparent in other children’s comments. For example, Dafydd (age 10) told the researcher he wanted to be a professional sportsman when he was older. As a first choice he would play football for Manchester United, second choice would be a rugby player, *“because I used to play for a rugby team”*, third would be a basketball player *“because I’m good at basketball. ... If I don’t play one of them I will probably be a tennis player because I’m good at that as well”*. Similarly, Messi age 11 who had described his interest in playing football stated, *“I think I would like to be a PE instructor or like a PE teacher”*. Several children hoped to work with animals. When asked what she would like to do or be, Caitlyn age 11 answered *“In the future, when I get older...hmm be a vet”*. Another young person who

was a member of a pony club wanted to be a horse riding teacher and Harry (age 8) stated he wanted to be a “*RSPCA person ... like take animals to a safe place*”.

- 4.5 For others, aspirations were motivated by a wish to make a positive contribution or impact through their profession. Thor (age 14) stated: “*This is what I want to be when I’m older, a hero*”. Asked what sort of job that may involve “*I would join the police or something.... I also want to be a builder of stuff so then, so a machine like builder. So then I can change the world. Because that’s what heroes do, change the world.*” Likewise, Bishop (age 11) discussed helping in humanitarian crisis situations and working for the fire service, while one of the focus group participants hoped to offer meaningful support to other looked after children:

*“I’m choosing childcare for college and I want to work with kids in care when I’m older because I know what it’s like and I’ve been through it most of my life. So I can actually be one of those people who turn around and say ‘I understand’, and actually understand”.* (Female participant, 16+ group)

- 4.6 In summary, the majority of children and young people we consulted with were not lacking aspiration. Many were able to voice clear aspirations for future careers and employment with their choices influenced by a range of factors. Participants also discussed wider aspirations such as loving family, pets, a car and a nice home. Younger children in particular often had lots of ideas, were confident in their abilities and enthusiastic about their future lives. These findings resonate with the evidence presented in the Phase 1 literature review that LAC have similar aspirations to their non-looked-after peers (Davey 2006; DCSF 2010). The point that younger children voiced higher aspirations than older age groups could be interpreted as a gradual decrease in aspiration. However, it is

important to note that what might look like 'low aspirations' may often be high aspirations that have been eroded by negative experience (Carter-Wall and Whitfield 2012).

#### *Uncertainty about the future*

- 4.7 Despite these findings, some participants found the aspirations activities and questions more challenging and such difficulty may be attributed to several factors. For example, some LACYP may have had more modest ambitions, which also corresponds with the previous literature reviewed (Honey et al. 2011; Cann 2012). Roxy (age 12) stated: *"I don't know exactly [what I want to do when I'm older] just like anything really that I can like be, because it's just like a job is a job at the end of the day"*.
- 4.8 The experience of being looked after may have also inhibited some young people from discussing their future education and employment aspirations. LACYP are often afforded little choice and control over their daily lives (Chater and Le Grand 2006). Over the course of the research, participants described changeable placements and unstable relationships with family members, friends and professionals. Describing his unanticipated admission to care Jeffrey (age 16) stated:
- "We just got picked up and taken there basically. Came in, I was all happy, I was munching on biscuits and having a cup of tea and next thing I know they told me I would have to go and within half hour I was in foster care"*.
- 4.9 Viewed in this way, children and young people's awareness or belief in their personal autonomy, in respect of career trajectory or other aspects of their lives, may be an unfamiliar concept. Alternatively, hopes for the future may be predominantly focused on family life and

stability, as opposed to education or employment. Asked about his future life, Kai (age 8) stated he would be living with his brother and “my real mum and dad”, while Thor (age 14) told the researcher:

*“... what I want is just someone to be with forever when I’m older, just someone to be with. Someone who will look after me, someone... and I also want a family. I just want to have a family”.*

- 4.10 The impact of support and expectations from significant others on young people’s future aspirations was evident in several cases. When Bob moved to a new area, he stated his new foster carers involved him in deciding which school to enrol in and encouraged him to have high expectations. Discussing his place at the ‘best school in the area’ Bob (age 15) stated:

*“I had a tour around the school, I was like ‘this is nice, I like this’. And I knew about and I researched the other schools around it, I was like I’m not going to get anywhere where I can get better qualifications”.*

- 4.11 Foster carers also had the potential to encourage a positive work ethic and bolster self-belief. Connor (age 13) stated: “My foster carer said I could make it [achieve his aspirations of joining the army] if I try hard enough and I train hard enough and like I do”. Similarly, Nadine (age 21) recalled how her carer: “put a lot of belief in me and she always told me that I could do it [go to university]”. Recalling a conversation about the low numbers of looked after children who would achieve a university education, Nadine stated:

*“My foster carer at the time, she was like ‘you’re going to be that 1 per cent’ [who study at university]. And I don’t know it kind of just put a little bit of more belief in me and it just made me want to do it that little bit more”.*

- 4.12 For Nadine, the encouragement of her foster carers was vital in combatting less encouraging messages from her sixth form teacher:

*“She basically told me I had no chance of getting into university because I didn’t work hard enough or whatever. I don’t know if she done it to try and make me work harder or what, but she made me feel quite rubbish sometimes..... I remember telling her I wanted to be a teacher and whatever, and she said “you should look at college courses” and stuff, and I was like ‘no I want to go to university”.*

- 4.13 Similar to Nadine, Megan (age 21) also discussed how other people had attempted to dampen her aspirations of going to university:

*“Everyone always told me that I couldn’t ... various foster carers and various people to do with the care system were like ‘oh people in care don’t go into higher education kind of thing”.*

- 4.14 Such examples coincided with a general expectation, felt by some participants, that looked after children would not be successful in education or future careers. For example a female participant in a 16+ focus group stated *“I think with people in care, some other people look at us and say that ‘oh they’re in care, they’re going to fail”*. Similarly Megan (age 21) noted: *“even other care leavers ... are like ‘oh why are you bothering, everyone knows that we don’t get anywhere’, kind of thing”*.

*Making aspirations reality*

- 4.15 Young people's understanding and plans of how to achieve their career and employment goals varied. During the interviews and focus groups children and young people stated it was important to behave well, work hard and 'get a certificate'. Alesha, age 16, discussed the importance of learning to drive for work due to the infrequent buses in her area while Connor was in the army cadets to prepare him for his chosen profession. Ryan, age 14 stated that he had told his friends he was going to "wisen up" because he was moving up to year ten in the following school year. He told the researcher "*I'm not going to get far in life if I mess around in school, I'm not going to get to college and then university...I want to do the whole lot*". Similarly Isabelle (age 11) stated:

*"When I have finished university and I'm going to find a school and ask the headmistress if I can join because they give us interviews. So when they give us interviews they might say yes, and if they say yes I will be a teacher for younger children"*.

- 4.16 Despite Isabelle's relatively clear understanding of the progression route into teaching, she was also aware of some potential barriers to achieving her ambitions:

*"Yeah but some people when they go to university or college they can't afford it. And you never know, with me, I might not be able to afford to go to a university or college because of all the money that I need because it's thousands and thousands of pounds"*.

- 4.17 In other cases, children were sometimes unsure of who or where they could gain further information or experience in pursuit of their goals.

For example, Harry's interests in working with the RSPCA had developed through watching television. However opportunities to develop this interest appeared limited. Talking about his favourite animal, a dog he told the researcher, "*I want one for my birthday but I'm never going to get one*". Asked what or who might help him to become an RSPCA person "*I don't ..., in our classes we don't do animal stuff.*"

### **Looked After Children's experiences of education**

- 4.18 The report now moves on to analyse participants' experiences of school, the barriers and their views on what enabled them to take part in education, learning and school life. A clear thread running through the educational experiences described by the LACYP who took part in this research were their feelings of being either the same or different to children who are not in care. The younger children generally presented themselves as being no different to other children. Mention of their home and care circumstances, or their status as a LACYP, were very rare across all of the younger participants' interviews.
- 4.19 The impact of either of these aspects on their school experiences were equally absent. When younger children talked about school they focused on the things they liked doing – counting, painting, story-time, spelling. They liked their friends, they liked their teachers because they helped them, and they each identified a favourite teacher; favourite for being nice to the class, or mean teachers who were mean to everyone. What the children said about school tended to be evaluative – and revolved around school being school; some enjoyed it or loved it – for example Caitlyn (aged 10) described school as "*great, super, supercalifragilisticexpialidocious*" – and others thought it was okay, alright, fine. As Musa (aged 8) described, school is "*work, work and work. School is a bit boring*".



4.20 In strong contrast, the young people had much to say about the experience of school and college life, and related this to their care experiences, and considered how this gave them a different experience to other children and young people. It is acknowledged that these differences between the younger children and older young people in the study may be because the young people are reflecting back on their experiences, so are in more of a position to evaluate their experiences of school, and the perceived implications of them. However, this striking difference between the accounts of the younger children and the young people in the 16+ age group was a key finding. As the discussions below indicate, length of time in care and changes to care circumstances, combined with the changes in schooling – such as the gradual move to increased study (and less play) and gradual increased move to independence in studying, means that being in care can act as a barrier for participation in school and college life for young people. A consequent lack of routine and inconsistency in their home life impacted on school life, whilst also increasing the likelihood of experiencing inconsistency and a lack of routine in school. Equally, a lack of parity and a lack of equity in various ways between LACY and other young people can also become more obvious and may be experienced negatively.

### **Being a Looked After Child in school**

4.21 The older participants, teenaged years and older, displayed an increased awareness of their status as 'Looked After Children'; and of the number of negative connotations that this status seemed to carry for them. Even if they expressed holding high hopes for their futures, they described battling with the feelings and messages that they were potential failures, problems in the making, or troublemakers. All of the young people spoke of feeling themselves marked out as being 'different' by peers and by teachers. They talked about the labels children in care have, such as 'troubled', 'problem child', 'scroungers', 'of concern'. Some of the young people described themselves, in

quite strong terms, in ways which illustrated that they had begun to feel themselves as different. Many aligned their negative experiences in school with being in care, and explained the effects of these on their feelings about themselves:

*“Obviously if your life is unstable your education is unstable, and then that’s your future ruined”*. (Female participant, 16+ group)

*“Being made to feel like an outcast because I was in care and not getting enough private support, one-to-one. And that made me feel alienated, frustrated, lonely and vulnerable”*. (Male participant, 16+ group)

4.22 Many of the young people described feeling singled out or ostracised, and how they felt themselves defined by being in care. They considered the ways in which they and their behaviours were all attributed to, and understood through the lens of, being Looked After.

*“We don’t want people to be ‘Looked After’, you want to be a normal kid too you know because it’s only one, its only label of you”* (Female participant, 16+ group)

4.23 They talked about the embarrassment of knowing that teachers knew personal things about them; things which teachers would not know about other children in their school, but did about them, simply because they were in care. They felt that this affected the ways that teachers treated them. Whilst some spoke of feeling singled out in a bullying way by teachers, the dominant message from the young people was that they felt pitied, and treated with (sometimes false) sympathy.

*“I hate people feeling pity for me, I’m just a normal child, like...I’m in foster care, it doesn’t mean you’re just like some pity child...”* (Male participant, 16+ group)

*“If we was a child that wasn’t in care we’d be made to sit there and get on with our work or something, like if we wasn’t having family problems if we were just in a mood. Then some children that are in care could go into school and just go, ‘I ain’t doing this today’, and then they’d just be left to the side because they think it’s just family problems, but it might not be, it might just be them being a normal child”.* (Female participant, 16+ group)

4.24 As the quote above illustrates, young people explained how they were not pushed to perform, or go to school. They were allowed to miss lessons, because teachers and foster carers were too ready to presume they needed additional support, or leniency, because they were children in care. They described how it was good when people listened, or understood their outbursts. However, interestingly, the teachers who they talked about as being best at this were those who also encouraged them back into lessons or school.

4.25 Similarly, young people spoke about how they felt that many teachers and foster carers had lower expectations of them, or made assumptions about their intellectual capabilities, based on them being in care:

*“I genuinely felt oh she’s in care now, she’s thick”* (Female participant, 16+ group)

*“I knew what subjects I wanted to take, but the carer at that time was like no you’re not taking that, or that, or that, because you’re just going to fail. She was telling me to go with the other ones, which I failed then”.* (Male participant, 16+)

*“As soon as I went into care, then went back to school and my teachers majority of them treated me completely different, because I was in care they moved me down sets, they put me in special help, they gave me – put me in support groups. And I was just like I don’t need all this shit, I’ve only moved house, that’s it I was like yeah I might be in care but the only difference to me is I’ve moved house, that’s it... they looked at all my papers and where I was in my levels and that and they was like you’re more than capable of being in top set but we don’t think you’re going to be able to cope”. (Female participant, 16+ group)*

- 4.26 Young people also discussed being highly visible to others as ‘different’. There were many ways in which their differences were made visible to their peers. For example, participants described the embarrassment of having LAC reviews and meetings with social workers in school, in rooms where their peers could see through the window. Or they had social workers come along and call them out of class, or support workers who came to sit with them in school. These were described as exposing of their personal lives and of making their difference to other children obvious and visible.

*“I don’t know bad bit was like the LAC Reviews and whatever because the teachers kind of knew that you were in care and whatever and that, they all were, people would be like, ‘oh why are you are going with Miss so-and-so?’ (Nadine, age 21)*

*“I used to try and skive and that because my carer was sitting there and I just didn’t want it, I was like I don’t need that, it’s singling me out and its making me seem special when I’m not, I’m a normal person”. (Female participant, 16+ group)*

- 4.27 Other ways in which young people in care felt exposed, and where the difference was accentuated, included events like parents evenings and sports days. They described not having anyone to come along to support them at these events, or it became obvious that the people who did come were not their parents, for example when different foster carers attended because of placement moves.
- 4.28 What the young people wanted was to feel the same as other children. They described how it was important that children could get extra help, but only if they wanted it. They emphasised that children should be asked first, so that assumptions were not made about them. They also talked about how the extra support – a person to go to, or the facility of a safe room – should be offered to all children, so that no one was singled out and made to feel or look different to those who were, what the young people referred to over and over again as, ‘normal children’.

### **Missing out on education**

- 4.29 A common and consistent theme across the data was the various ways in which children and young people miss out on education in ways that are not of their own volition. Participants reported many instances in which they missed lessons, opportunities to study, or missed significant periods of the key stages of education due to their involvement in care services and placement or school moves.

#### *Placement moves and school moves*

- 4.30 Almost all participants had experienced placement moves, some had experienced a high number of multiple placements, and these were often accompanied by changes in schooling or educational institution.

*“But it’s like what placement are you suited at, and if you’re not suited at a certain placement your school is not going to go well,*

*but if you love your placement then you're going to do well... I got moved onto over 20 placements..."* (Male participant, 16+ group)

- 4.31 Aside from the disruption that this caused, many of the participants also described or spoke of the ways in which changing schools affected their education and their interest in learning. For example, some talked about having to repeat the same topics that they had already learned and about getting bored in class because of this.

*"And like schools don't do the same type of work different times of the year. So like I went to one school we had just done a piece of work, I went to the new school and they were doing it, I was like oh! And I couldn't be exempted, I had to do it, it sucked".* (Female participant, 16+ group)

- 4.32 Others described selecting subjects for their GCSEs and then moving schools and having to change their options, or the course being different to what they had signed up for. This lack of consistency also contributed to a disengagement with school and learning. Others spoke of being out of school for lengths of time due to the lack of school placements in the (new) local area. They also discussed their awareness of incidents of 'bickering' and disagreement between local authorities over who was responsible for their educational arrangements:

*"I found, obviously, moving around schools a lot, because I moved from Wales to England and it was like during that transition of like for a year I was out of education so I was playing a catch-up game, always, like right the way up through*

*school until I left, I was always trying to catch up". (Male participant, 16+ group)*

### *Appointments*

- 4.33 Other ways in which children and young people miss out on education is through the number of appointments that occur in school time. Many of the older participants in particular described frustration with the number of times in which they were called out of class, unarranged, to meet with different professionals such as their social workers. Or they spoke of the number of pre-arranged meetings and appointments such as LAC reviews, health assessments, counselling, and social worker visits, all of which occurred within school time.

*"If I went to school she would just come and take me out of the lesson...The school just kind of let her get on with it and I'd be in a lesson, she'd usually wait until it was my favourites because she knew that I'd be there, and then she'd like knock on the door and be like 'oh can I have a word?' And just take me out".*

*(Megan, aged 21)*

*"They used to have it [LAC review] during the day and obviously I wanted to be a part of it because I want to know, I want to find out what they're saying about me. So sometimes I would have to miss the day off school and my school was absolutely brilliant you know the social worker would ring a week or a couple of days ahead, '[name] is going to be off of this day because she's got a LAC Review'. They'd put it down in their diary and then let the teachers know that I was missing that day off and they'd write because obviously you've got the register they'd write a little note, [name] LAC Review to let them know that I wouldn't be in that day. Because I want to know what they're saying about me". (Female participant, 16+ group)*

- 4.34 Attending these meetings not only meant that they missed classes whilst these meetings occurred, but their school day was disrupted. Many of them described waiting anxiously for the meetings, or feeling unsettled, or losing focus in lessons. Some described missing more classes because they felt unable to return to the classroom after these meetings and visits, and of being excused from class for these reasons. Whilst being excused from classes may have helped them in the short term, many spoke in ways that indicated they were aware that this disruption all amounted to a missed, inconsistent and fragmented education.

*Missing mainstream education*

- 4.35 Some of the young people participating in the research had attended non-mainstream forms of education for periods of time in their education. Whilst many of the participants described appreciating the smaller classes and a more relaxed learning style, they reflected that they missed out on studying for certain subjects, or had limited options. They described having a lack of teaching faculty, or inexperienced or non-expert staff. Moreover, they described how lessons were often boring or workbook based and centred on lone learning, often at basic level.

*“Because we’re in (name of school) we don’t choose the subjects – we just have the four lessons...they do lots of normal lessons, we normally have picked but like we don’t do History and we don’t do like Welsh”.* (Alesha, age 16)

*“They were set up for GCSE but it was Foundation, basic, minimal, little. English, Maths, Science and you had to do Art because they were the only ones you could do and out of, me, I picked Music, Drama, Art, I had loads of stuff going, I just didn’t do any of them”.* (Female participant, 16+ group)



## Provision

- 4.36 Provision was talked about as an important aspect in enabling LACYP to participate fully in school and college life. Having access to computers and other resources such as pens and papers, pencil cases, books, was talked about as essential to being able to complete homework. These resources added to a sense of feeling equipped for day-to-day school life, or ill-equipped, as was sometimes the case.

*“She [foster carer] went out and bought everything I needed, rucksack, books, pens, everything I needed”. (Male participant, 16+)*

*“They (the school) gave me a laptop for like three months to use because I’m dyslexic and I can’t read or write. So they gave me a laptop to use but after that they just goes ‘nah you can’t have it anymore’ and took it off me” (Jeffrey, aged 16)*

- 4.37 Similarly, money and the necessary permissions and transportation for school activities and after school activities and events was also an important feature of school life for children and young people.

*“Also say like with the after-school and all of that and the distance, sometimes what is a problem is that say the foster carers can’t get you there or can’t pick you up so there should be like an extra, almost just like transport really, transport and support workers that all their job is, is to make sure you get to what you want to get to”. (Male participant, 16+ group)*

*Difficulties with access*

- 4.38 The importance of accessing these provisions were emphasised either through having been in receipt of them, or because of the lack of them. Participants spoke of the 'red tape', and being passed 'to and fro', and not knowing what they were entitled to. Many felt that they were missing out, or described frustrations with not being able to complete homework. Others spoke very positively about being given a laptop computer on request, and having ready access to funds for essential school items.

*"it goes through school so we've been like chasing it up for three years so and they've just finally give it to us, they gave it to us before the last half-term. And they were like it has to be spent before this half-term, they gave us three days". (Bob, 14)*

*"It didn't specifically affect me but I spoke to a lot of other young people in care, I was always in [area name] I was lucky but if I'd been put in another council there is no doubt that they would be arguing about who pays for this and who pays for that and it's just bogus, it's just so ridiculous". (Male participant, 16+ group)*

- 4.39 'Fairness' seemed to matter to many of the LACYP, and many of the those we consulted with alluded to concerns about equity and parity in their narratives. Many of the young people who participated in the research demonstrated an awareness that access to these resources was not always fair or the same. They often spoke about how unfair it was that other LACYP struggled to get the necessary provisions, even if they had access themselves.

### *Extra provisions*

- 4.40 As discussed in the previous section, many of the young people talked, albeit with some hesitation, about the need for schools to have extra provisions for LACYP. They spoke of things which align with the sorts of additional help that children with supportive carers and parents might get. For example, they valued teachers who stayed late, or and set up small after-school homework clubs to help them with homework, revision classes, having the opportunity for one-on-one tuition, and having people to talk to about worries, bullies, and school work. Yet they suggested that the need for these sorts of provisions were not particular to LACYP, and might benefit all young people. If provisions were universal this would also act as preventative measure against singling out LACYP as different or more 'in need' than their non-LACYP peers.

### **Friends and peers**

- 4.41 Friends and peers play an important role in children and young people's experiences of school. Friends were often talked about as participants' most-trusted or only supports. They were talked about by older participants in particular as forming their 'shields' – their protectors and help – throughout their school and college life. It was often only through participation in school that children and young people were able to form these sorts of important friendships. Conversely, the absence of these friendships and the effects on their education was significant too. Many of the participants linked their experiences of being in care to their lack of friendship, which then impacted on their participation in school.

### *Well-being*

- 4.42 Some participants talked about friends helping them with their confidence and helping them cope with the things going on outside of school. Similarly, other participants spoke of how their friends in

school helped to make them feel 'normal' and to forget that they were 'a child in care'.

*"I always have good days in school... just having, doing normal lessons and being with my friends". (Alesha, aged 16)*

*"You could just be a kid at those after-school things you know, you weren't any different". (Female participant, 16+ group)*

- 4.43 This contribution to a general sense of well-being seemed to underpin reasons why some children and young people found being in school easier than others. The following quotes stand for much of what the children said about the importance of friendship:

*"And we'd (group of friends) all walk in together, walk out together. School... personally that's what I thought school was for everyone really. I knew some people had a bit of problems but generally like when you look around everyone seems to be getting on with it". (Male participant, 16+ group)*

*"My thing was about having friends and when I was younger I was really into netball so I kind of just you know I played netball at every break and I kind of you know had my group of people and I think that helped in that you know you are part of the gang, you know what I mean? So you're when you get into class you're more ready to learn because you're with your friends". (Female participant, 16+ group)*

- 4.44 Participants who did not have friends, or many friends, spoke more of isolation and a sense of feeling different. They discussed an

awareness of being excluded from events, like parties, sleep-overs, and play after school that were features of other children's lives. This exclusion was sometimes connected to changes in placements and the related changes in educational provider.

*"I never got invited to parties outside of school or social events outside of school because I wasn't as well-known as, you know obviously they all knew each other"* (Male participant, 16+ group)

### *Stability*

- 4.45 Some of the children and young people we engaged with spoke either indirectly or directly, about the important role that friends in school play in contributing to their sense of stability and continuity. For those who experienced placement moves, and changes in carers and social workers, often their friends in school were the only consistent relationships that they had. However, experiences of placement moves had for some, resulted in the disruption of important friendships. Having to develop new friendships because of a change in schooling was a barrier to learning for some young people. This was in relation to the social aspect of school, but also in the informal learning opportunities such as asking people for the help and encouragement, that these friendships bring.

*"you may worry about going to school and not knowing anyone, so like you're always trying to like make new friends and then because as ... you're always falling out, like you could fall out with them then because you haven't got the same bonds, you've just got to make them again. And it's never like, and then you've got to do your education as well but then you're struggling because you haven't got no friends"*. (Female participant, 16+ group)

4.46 Some of the younger children too spoke of the importance of friendships, and the role friends play in creating some stability when there are placement moves. Isabelle (aged 11) talked about how she had moved placement and then school and how it '*was hard with the friends*'. Because of the efforts made by her foster carers, she was able to stay in contact with her best friend from her previous school. However she then went on to say:

*"We are still best friends, but not we're not, because we're not in the same school and we don't see each other that, as much as we used to..."*

4.47 Similarly, Jeff age 12 who had moved schools commented "*it's rubbish because when you move school basically you don't know no one there*". Jessica (aged 9) also talked about how her change in school placement had affected her friendships:

Researcher: "*So was it hard to change schools?*"

Jessica: "*A long time ago*"

Researcher: "*Did you miss your friends when you changed school?*"

Jessica: "*Yeah but I forgot all my friends now. It was like a long time ago when I was 5*".

Researcher: "*Ah ok. So you made new friends?*"

Jessica: "*I've not made any friends...no*".

### *Bullying*

4.48 Bullying, in particular, featured in many of the participants' accounts. For some they talked about 'bullies in school' and their friends helping to protect them. For others, they described being taken out of school

because of bullies, and this meant they were further isolated and excluded from school. Bullies, and the absence of friends could also lead to a lack of confidence to attend school or college, or to mental ill-health.

*“One-to-one home tutoring it was easier...but in a sense that was also probably one of the most unhelpful...I have suffered in social situations all my life and the only social situation I had at that point in my life was my education and they took it away from me. And it caused a massive decline in my mental health, and I ended up back in hospital”.* (Female participant 16+ group)

## **People**

- 4.49 Children and young people’s relationships, and the important role that foster carers, teachers, advocates, social workers and peers have to play in enabling children who are in the care of the local authority to have positive (or negative) experiences of education, was a strong feature of participants’ accounts. LACYP raised points that resonated with research presented in the Phase 1 literature review, which identified that support and encouragement from a significant adult reinforced later educational success (Jackson and Martin 1998; Jackson and Sachdev 2001).
- 4.50 For example, Roxy, age 12, chose a fireman to represent her head teacher in school, and explained that *“if anyone in school needs help, he sends people to help us”*. Alesha, age 16 spoke of teachers who help, and who understand, and listen, as being the best thing about school and Suarez, age 15 described how, if he is having a bad day at school he has to *“get out of the situation and but I have got good people to go and talk to like Miss [Teachers Name]”*. Many of the children and young people referred to instances when someone encouraged them, or told them they believed in them, or did seemingly small things to show that they cared.

4.51 For Gareth, age 13, teachers praising him when he did well in school made him feel good because it got fed back to his foster carer which gave him further encouragement: *“they [teachers] say, ‘oh good you’re trying your best every time’, and stuff...so every time my foster mother she’s going to a like parents evening she will say, ‘I’m so proud of you’, because I’ve done really well in school”*. For others individual teachers played an important role, Messi age 11 who had just finished year 7, described his PE teacher who *“encourages me to do more than like if say I’m struggling with something he will help me do it”*. Other young people discussed positive experiences with individual teachers:

*“My head of year stayed with me three hours after school finished, because social services were trying to look for a placement for me so that like meant a lot, he went out of his time just to help me”*. (Female participant, 16+ group)

4.52 Participants also spoke of the important role that advocates and social workers played in ensuring that they had access to things that they needed. Others spoke of people, such as foster carers and residential care workers, going out of their way to make sure they got out of bed, or to school, or encouraged them in their learning, or to complete their homework:

*“So she had a look at it with me and she said well I can do this by hand, so she sat down with me and helped me do my homework... if you don’t bring your homework in on time they put a black mark next to your name, like a demerit and they’d add them up and then like at the end of the month they’d have a school trip and if you had too many black merits you wouldn’t be able to go. So that member of staff sat down with me and said*



*we can do your homework here and there*". (Female participant, 16+ group)

- 4.53 As with their sense of progression and their thoughts about achieving their aspirations, underpinning much of what the participants said about the barriers and enablers in education, were relationships with people who helped them or who had never been there to help them. Being listened to, being understood, consulted with, and having the choice to ask for help were the things that made the differences for them.
- 4.54 In addition, along with the important role that friends and peers have in children's participation in school, is the role that other LACYP played in participants' lives. Many talked about benefitting from and valuing the opportunities they had to meet with other children who were in care. These opportunities gave them a feeling of being similar, of being around people who could understand and who had shared and similar experiences. It was often only around these other care leavers, other 'different' young people that they could find a way to feel ordinary. This was particularly the case for those who were made to feel so different from other children around them, in their search to feel similar, the same, normal.

### **Interventions**

- 4.55 The following sections identify themes emerging from the focus groups with young people age 16+, which captured the young peoples' views on what might help raise the educational achievements of LACYP in Wales. The focus groups considered a range of possible educational interventions systematically reviewed in Phase 1, which were presented to them in the form of vignettes (Barter and Renold 2000) (see Annex E) as well as a suite of activities designed to explore their views on opportunities for improvement (see Annex N). Many of the themes that emerged from these focus groups

which were considered to be some of the biggest barriers to education mirrored the findings discussed in the previous section.

*Missing out on education*

- 4.56 Missing long periods of schooling was noted by many of the young people as detrimental to their educational achievements, and they felt that education was often given a very low priority:

*“That tends to, that’s a bit of a dodgy ground by there, because people tend to focus on behaviour instead of education, it’s like we will fix their behaviour and then we’ll give them an education. It doesn’t work, it’s got to go at the same time. Because what happens is youngsters lose chunks of their education because people are trying to fix their behaviour and then they know that type of thing, that doesn’t really you don’t get anywhere for the kid” (Male participant, 16+ group)*

- 4.57 The young people felt that education should be prioritised and that other difficulties could be addressed at the same time. They appreciated that once they had fallen behind because of poor attendance it was very difficult to catch up. The young people found that constantly moving home and school had also impacted on their education. In addition, they were aware that they were perceived as a problem, and that they would not be greeted with open arms when applications are made for them to change school:

*“And also I don’t know if this applies to ordinary kids but in foster care especially and residential care as well, if you’re moved out of county then one county will argue with the other county about who pays for transport, who pays for the schooling, who pays for food, who pays for everything that has something*

*to do with your education. And they do, they can be, councils are just like no that's your problem, no that's your problem, palming young people off sort of thing and it's just really unpleasant". (Male participant, 16+ group)*

- 4.58 This public wrangling over resource implications between LAs delays and reduces school attendance, further compounding the young person's difficulties. It is also damaging for the self-esteem of young people. Participants discussed the potential damage caused by LACYP being a party to these resource based discussions.

#### *Meetings*

- 4.59 The young people felt that they were required to attend too many meetings in school time; this also impacted on them falling behind and contributed to them feeling and being seen as different. They felt that schemes which involved meeting with a team of people, as with 'The Fostering Individualised Assistance Programme' (FIAP), were not helpful:

*"And also I don't know if this applies to ordinary kids but in foster care especially and residential with kids in care that they're not involved in anyway'. Yeah but they never listen to you". (Male participant, 16+ group)*

*"Any meetings, if they are necessary, should be held outside of school time, not just at a time that is convenient for the professionals". (Female participant, 16+ group)*

#### *Placement moves and school moves*

- 4.60 On balance the young people felt that moving school when they moved placement was helpful:

*“I would like to say that I think it is a good idea that the child should be made to, or the local authority, the school should get made to have that young child because that child has moved to a new placement, they don't know anyone there in the area the only way for them to have a good, to build a good friendship group is with by moving to a school that is near where they live. If they move to a school that's far away they're not going to get the bonds that, but I think that does apply to normal children as well”. (Male participant, 16+ group)*

4.61 They felt that becoming part of the new community and friendship networks might give their new placement a better chance of success and that pressure should be placed on schools to accept them into the school. As a result the Education Liaison officer (ELO) was positively evaluated by the young people.

4.62 The young people liked the description of the ELO and saw this as an essential role to support LACYF. They liked the notion of making schools accountable, when many people in their lives had not delivered on promises. This was one of the only times young people mentioned their entitlement and right to receive ‘*a half decent education*’. The young people felt that the pressure that an ELO could bring to bear was essential as:

*“school should get made to have that young child because, because schools might just be because they don't want to spend money on looking after the emotional needs of foster kids you know”. (Female participant, 16+ group)*

4.63 Again the young people felt that arguing over resources made them feel less valued and they were clear that a young person in care would ‘*need someone to fight on his behalf*’. Interestingly the young

people felt that the person should not be paid by the 'Council' but should be independent and outside of the local education authority.

*Significance and role of foster carers*

- 4.64 The young people thought that foster carers could be doing more to support their education and felt that this is a basic role that any parent would play:

*"It's being a normal parent really isn't it? It's what they basically are. If you had children you would sit down with them and help them with their homework so why can't foster carers?"* (Female participant, 16+ group)

- 4.65 The participants also discussed the educational qualifications of foster carers, and felt that they should have a set of basic skills:

*"To become a foster carer obviously you would have had to like go to school and go to like college or something surely".*

(Female participant, 16+ group)

*"They need to have like regular like Maths and English skills".*

(Female participant, 16+ group)

- 4.66 The young people felt that it would be a good thing to raise the required educational qualifications of foster carers, but also recognised, given the scarcity of foster carers, that it might be unrealistic to do so. They noted that many carers would not have the knowledge and skills to provide homework support:

*“They didn’t know how ...though because my English was like ...they had no idea what it was talking about”.* (Female participant, 16+ group)

*“Yeah they did sit there and they did like give me time and they did like try and help me but they, I knew that they couldn’t, RE they had even less clue about”.* (Female participant, 16+ group)

4.67 In fact, some young people reflected that they had found themselves supporting their carers:

*“Yeah any words she couldn’t help she’d be like how do you spell this and would sit there and help her”.* (Male participant, 16+ group)

4.68 The young people believed that carers often needed assistance to enable them to provide homework support, as the ‘Teach Your Children Well’ (TYCW) scheme offers, and saw this as being very useful. They also really liked the idea of reading aloud to their carer, and felt that this might also enhance their relationship *‘Its bonding you know’*. They believed that such a scheme which supported their learning in the home (which brought them in line with other children) might prevent looked after children ‘falling behind at school’.

4.69 There was much discussion about the limitations on the time that foster carers could spend with children, particularly in supporting their education and they valued any initiative that encouraged more time to be spent individually with a young person in the home, for example, they saw The Letterbox Scheme as beneficial as:

*"It gets your foster carers to spend time with you as well".*

(Female participant, 16+ group)

- 4.70 Many noted that foster carers were not always willing or able to provide such assistance:

*"Some foster parents you know ....young person goes 'oh I need help with my homework' (they say) 'oh I'm too busy'".* (Female participant, 16+ group)

- 4.71 The value of interaction between a young person and their carer was also recognised. They saw the opportunity for bonding to take place through helping with homework *'Yeah it builds bonds doesn't it?'* and through the sharing of more informal activities with carers, for example baking;

*"It's challenging them because they're learning how to bake, but they're also learning how to do numbers, and they're also learning like with the colouring stuff". 'It's like number games and counting games and stuff so you can help them with their maths and whatever else'.* (Female participant, 16+ group)

- 4.72 Both 'The Letterbox' scheme and the 'Teach Your Child Well' initiatives were valued as they helped the carer to support the young person in the home environment, and were seen as more normalised interventions which did not single LACYP out or treat them as a problem to be 'solved'. They were also interventions which happened in the home, rather than risking being exposed at school, and had elements of bonding with carers.

*Access to learning resources*

- 4.73 There were discussions about the need for computers (and for foster carers to have computer skills) and it was recognised that not all LACYP had access to their own IT equipment. The experiences of these young people were very varied:

*“I think renting the computers from like obviously the IT department in [school name] but then if you were in [school name] and you moved out of county you don’t have that privilege. I never got that privilege”. (Female participant, 16+ group)*

*“I asked for one but I had to save for it”. (Male participant, 16+ group)*

*“I wasn’t able to use my own in the care home because obviously there was no Wi-Fi or anything like that”. (Male participant, 16+ group)*

- 4.74 Young people require access to computers within their homes to complete set homework tasks, yet this was frequently not the experience of our participants. There was a sense from the focus groups that young people also had little access to books and literature whilst they were being looked after, and these resources were not part of their everyday lives. One young person noted some of the benefits of the Letterbox Scheme were very much in contrast to his current life:

*“To be honest it’s a really good way of encouraging people to read because I think the only time I read is when I’m on my smart phone or when I’m on my tablet. I don’t pick up a book. I*



*haven't picked up a book for years". (Male participant, 16+ group)*

4.75 Other young people noted the importance of reading and access to books as a means of escapism for the difficulties they often faced and regarded reading as like *'going into a different world'* and giving *'a sense of release like people often read to get away from things'*. The young people recognised reading as having a therapeutic potential, despite it not being something that they often did, or had access to. Whilst recognising the value of the Letterbox scheme reading materials, the young people were also concerned about the cost implications and certainly did not see these resources as their entitlement, as any other child might. The young people were generally very aware of the economic climate and the impending cuts across the social care and education which would further impact on young people's life chances.

4.76 Many of the young people reflected that LACYP had few belongings and the Letterbox scheme was valued because of this. They particularly liked the idea that a young person might be made to feel special and worthy if they received things through the post:

*"I think coming through the post is like a surprise". (Female participant, 16+ group)*

*"It gives you something to hope for....And it makes you feel special and it probably helps a lot with your reading and stuff". (Female participant, 16+ group)*

4.77 They also suggested that it could also include other significant items. Memory boxes and teddy bears were discussed as being important gifts:

*“I had a teddy from my foster carers when I was 11, my comfort teddy and I’ve still got one now and I’m 21”.* (Female participant, 16+ group)

- 4.78 The young people also thoughtfully suggested that a ‘starter pack’ for care leavers would be a good idea.

#### *Developmental age*

- 4.79 The notion of having differing developmental ages was mentioned in numerous discussions: *‘Some people have learning difficulties and they obviously can’t read at their real age’*. Young people stressed the importance of educational schemes being individualised and tailored for their specific needs and developmental age:

*“But some people are, they take longer than others to develop and there’s nothing wrong with that, it’s your own pace”.* (Male participant, 16+ group)

- 4.80 This is an important factor in all of the interventions including the Letterbox Scheme as it would be important to have a knowledge of the child and their current abilities rather than offering provision based on a homogenous policy rather than individual needs and circumstances.

#### *Skills and managing emotions*

- 4.81 Several of the programmes evaluated in the systematic review focused on skills development and on training young people on how to manage their emotions. These types of interventions were judged by the young people in this study as potentially very beneficial:

*“I do like the fact that they are role-playing with her because she can have a flip-side and understand better with how her like behaviours let down people and what’s the correct way to behave in situations, because maybe she doesn’t know you know? So by role-playing she would be like oh right so I can see why or how I did wrong there you know?”.* (Female participant, 16+ group)

- 4.82 The young people often recognised that they do not always have the social skills required to navigate educational settings successfully:

*“But at 16 I am, I was. And probably my emotional and behavioural level or social, the social side of it was below, was below that level anyway”.* (Male participant, 16+ group)

- 4.83 Training on managing emotions was seen as a potentially helpful aspect of any intervention as young people may well have been without positive role models in this area. Similarly young people recognised the need for assistance with their emotions:

*“But there is a great need in foster care for people to have help with their emotional needs because it’s severely lacking”.*  
(Female participant, 16+ group)

#### *Communities and labelling*

- 4.84 Head Start is a holistic, wraparound set of services intended to support disadvantaged pre-school-age children in marginalised areas and in general, the young people received this project well:

*“It’s good because its bringing the communities back, obviously they’ve lost a lot of communities have been lost due to various reasons over the past. So it’s good to see that”.* (Male participant, 16+ group)

- 4.85 Many young people said they had often experienced minimal community support in the past; they very much liked the idea of services that were available for all within the community, noting that:

*“This programme is for everybody, which I think is good because it’s not just focused around young people in care”.* (Female participant, 16+ group)

- 4.86 This was seen as helpful, rather than seeing themselves as segregated and labelled. There were also discussions around universal programmes for all children in communities such as Community First programmes, Flying Start and Parenting Classes. These forms of additional supports, only available in designated low income areas across Wales, were seen by young people as benefiting families and children and thereby reducing the numbers of children entering the care system. The young people also recognised preventative provisions aimed at communities, rather than individual LACYP, as an effective use of resources.

- 4.87 The young people really disliked the names of some of the interventions (McLaughlin 2009) for example ‘Multi-dimensional Treatment Foster Care’ (MTFC), which they felt labelled them as needing treatment, and made them feel as if they were ‘*suffering a disability*’. Some also disliked the behaviourist aspects of the programme, which they felt sounded ‘*like training a dog*’, although one of the young people could see the benefits of a reward system for

good behaviour. Generally schemes that are medicalised and highlighted difference and deficits were not seen as helpful by the young people. Participants did not like services which singled them out as different, for example, the 'Kids in Transition to School' programme, and worried that specifically targeting four year olds placed labels on them and expectations of difficult behaviour from the very beginning, which could be self-fulfilling.

*Being together with others the same*

- 4.88 The young people very much valued interventions that offered them the opportunity to spend time with other young people in care. They felt that this would help them to feel more 'normal' and provide support to each other:

*"Knowing that everyone there has been through the same as you have ....and knowing that we can make a difference for each other"* (Female participant, 16+ group)

- 4.89 Most young people in care have few opportunities for meeting with others who are looked after and saw this as an opportunity to share with others who are in similar positions and develop mutually supportive relationships:

*"Knowing that everyone there has only been through the same as you have been through, and they're facing the same difficulties as you're facing now, and then knowing that we can make a difference to each other, and knowing that we can support each other. We give each other advice when things get hard. We can't really get there anywhere else".* (Female participant, 16+ group)

*“I’d say it’s more the idea that you get to see other people in the same position. Because that’s what’s valuable, this is the reason why I came here because I thought you know it would be nice to see other people that are in the same position”.* (Male participant, 16+ group)

- 4.90 Young people said that more opportunities for this to happen would be very helpful, bolstering self-esteem and reducing their sense of isolation. What was notable was how much the young people felt that they wanted to support others in the same situation as themselves, drawing on their own strengths and resilience (Gilligan 2010). This form of provision was modelled by the work of The Fostering Network (TFN) who arranged the activity days for primary and secondary school age LACYP in this study; and by the work of Voices from Care Cymru.

*Strengths based and aspirations modelling and mentors*

- 4.91 The young people liked schemes which allowed them to consider their future life and helped to increase their aspirations and this was noted in the Fostering Healthy Futures model:

*“It gives them hope I think. It gives them hope for a better future you know because they can see that just because they’re care kids doesn’t mean they can’t like, she shadows someone who she wants to be you know so that’s always positive. Because in a way you’re telling them yeah you can do it, when you set up, in a way you’re telling her you can do things rather than telling them no”.* (Female participant, 16+ group)

- 4.92 The young people also liked schemes which involved mentors:

*“But yeah like through seeing these mentors they can show them correctly how to behave and you know how to be and stuff you know. Because the kids practice what, the kids learn from their adults and if like, say their friend was really upset and they saw their mentor calm them down and stuff they could like, they could take a lot from that you know so”.* (Female participant, 16+ group)

- 4.93 These points resonate with the Phase 1 literature review that suggested that LACYF’s educational achievement can be influenced by exposure to successful and inspirational individuals (Berridge 2012). However, moving beyond the findings of previous studies, in particular, the focus group participants emphasised that they would like care experienced people to be able to become mentors for those currently in the system.

*Food, education and health*

- 4.94 Many of the young people saw the value and importance of eating together as a site for communication with others and for learning social skills, as included in the Fostering Healthy Futures project:

*“You know like a, it creates bonds like you would be surprised how not many people sit down and have a meal you know?”*  
(Female participant, 16+ group)

- 4.95 One young person noted how he rarely had this opportunity during his experience in care:

*‘I didn’t do that when I was in a children’s home, we never ate together’.* (Male participant, 16+ group)

- 4.96 The young people felt that education can often be effectively delivered in more informal settings. Additionally, young people recognised the importance of education about food and health for people on a restricted income:

*“I think the classes, it’s important to have the classes to teach how to cook healthy foods but also that the healthy foods aren’t expensive”.* (Male participant, 16+ group)

- 4.97 Other young people noted the link between nutrition and academic ability:

*“Also there’s a strong link with eating properly and the effect that that can have on a child’s development and their ability to learn things”.* (Female participant, 16+ group)

- 4.98 Thus the young people were considering education and the factors that contribute to success and well-being more broadly. Including the need to educate parents and the young people about good nutrition in order to give them a better start in life. Young people were positive about community based provision and opportunities for engagement in cookery classes, which were free to attend for everyone, not necessarily aimed at LACYP. These forms of provision had been seen by young people living in Communities First areas and seen by them as a good use of public funds.

### *Endings*

- 4.99 Endings were noted as potentially painful and problematic in some of the interventions, particularly in the Fostering Healthy Futures model:



*“Nine months is a long time for a child to have someone in their life and spending that much amount hours with them. And then just suddenly be like right that’s it now good bye. It’s going to be really for a child to accept after everything they’ve been through obviously. So it’s going to be really hard that is”.* (Female participant, 16+ group)

- 4.100 In all of the interventions the planning for the ending was highlighted as being important, so that LACYP are not left experiencing another loss.

### **Findings Summary**

- 4.101 The multiple and multi-modal forms of inquiry adopted in this study have elicited a wide base of evidence for consideration in relation to LACYPs aspirations, educational experiences and the development of effective interventions. In the following chapter, ‘Conclusions’ the main interconnected and discrete themes threading throughout the findings from each phase, presented in this section, are collated in clear and concise overviews to highlight the key overall findings of the study.

## **5. Conclusions**

- 5.1 This concluding chapter draws out the main findings from the study in relation to the project objectives and research questions.

### **Phase 1: Summary**

- 5.2 The desk based research conducted in Phase 1 included collating descriptive statistics, a focused literature review and a full systematic review and was guided by three central research questions.

- RQ1. What data are available on the educational attainment of looked after children, how does this differ by local authority, over time and in comparison to other UK nations?
- RQ2. What do we know from existing research about the experiences and aspirations of looked after children in relation to education?
- RQ3. What is the existing evidence on successful educational interventions for looked after children?

*RQ1: Looked after children and educational attainment*

- 5.3 The analysis of the available descriptive statistics from England and Wales relating to the educational attainment of LACYP illustrated a pervasive gap between the educational attainment of LACYP and non LACYP at all Key Stages. Temporal trends demonstrate that although overall results have improved at all Key Stages for LACYP, results have also improved for non-LACYP, meaning that the attainment gap has not closed and at some Key Stages it has actually widened.
- 5.4 The attainment gap between LACYP and non-LACYP widens across students' educational trajectories; and almost a third of young people leaving care had no qualifications. In Wales, the proportion of care leavers not in employment, education or training (NEET) has fallen but was still almost four times higher than the proportion of non LACYP. Notably, this rate is higher than that in both England and Northern Ireland. The rates of care leavers that go on to forms of higher education in Wales are also extremely low.
- 5.5 The statistics on educational attainment of LACYP are linked to a number of contributory factors. Placement stability is highly significant with a negative relationship between a greater number of placements and GCSE achievement at grades A\*-C. Figures on the length of placement also demonstrated that shorter placements impacted negatively on LACYP's educational attainment. This is problematic as short term placements continue to dominate the trajectories of many

LACYP. The review of the empirical literature confirmed this pattern illustrating that placement instability is a significant factor relating to the 'unsuccessful' educational achievement of LACYP. This was linked to timings of school changes, differences in the curriculum between schools and a lack of communication between social services and education departments about LACYP in their care.

- 5.6 The educational attainment of LACYP is further influenced by the quality of the educational institutions they attend. Statistics demonstrate that LACYP are more likely to be in lower performing schools, which can have a negative impact on their educational attainment. Rates of educational attainment also need to be considered in relation to special educational needs (SEN). The figures for LACYP identified as having SEN are disproportionate (compared with non-LACYP) and increasing. Furthermore, outcomes for LACYP with statements of SEN are worse than for non LACYP with statements of SEN. The review of the empirical literature suggested that statements of SEN for LACYP are often misunderstood and that many cases LACYP are not receiving the support they need in school.
- 5.7 Welsh Government policies have contributed to some improvements in outcomes. However, these policies have often lacked clearly defined outcomes and delivery of support is sometimes inconsistent because of a lack of shared delivery plans between the Welsh Government and LAs. The introduction of initiatives in Wales has been inconsistent and impacted by, often, short term project funding. However, the Pupil Deprivation Grant could work to address the current disparities in attainment and the evaluation of this funding programme will offer new insights for policy and practice.

*RQ2: Looked after children, aspiration and educational experience*

- 5.8 The literature review of material exclusively from England and Wales suggested that overall LACYP have similar aspirations to their non-looked-after peers. However, some studies reported that many

LACYP did not express confidence in achieving their aspirations and that their career choices were less likely to be located in professional roles than their non LACYP peers. This could be linked to academic findings that suggest that social workers have been ambivalent about the educational aspirations of LACYP and care leavers; and that career advice has been either absent or pitched at a very low level for LACYP. The review also suggested that the level of support from carers and the home learning environment impacts on LACYP's aspirations and attainment. Overall, the literature reviewed suggests that significant adults have a role to play in raising aspirations but that negative expectations from social workers, carers, schools and the career service act to limit LACYP's aspirations and future progression.

5.9 The review of the literature also suggested that the educational experiences of LACYP can be detrimental to their attainment and achievement in a number of key areas;

- Placement and school instability
- Too much time out of school
- A lack of sufficient help with education
- Carers who are not equipped or expected to support with learning and development
- Lack of help with emotional, mental or physical health and wellbeing
- A pessimistic view of the education potential of the young people held by key professionals
- Lack of communication between social services and education providers

*RQ3: Successful educational interventions for looked after children*

5.10 A systematic review was conducted reporting on randomised controlled trials and quasi-experimental evaluations of educational

interventions for LACYP or those with experience of care. The search of electronic bibliographic databases retrieved 2,514 studies and consultation with experts identified a further sixteen studies. From this sample only fourteen studies, reporting eleven educational interventions met the criteria to be included in the review (see Annex P). The full systematic review undertaken in this study is the most comprehensive review to date in this area of inquiry.

- 5.11 Across the studies educational outcomes mapped onto the following key areas: academic skills; academic achievement and grade completion; homework completion; school attendance, suspension and drop-out; number of school placements; school relationships; school behaviours (see Annex P). However, despite interventions reporting some effects, these results must be treated with caution due to a high risk of bias across most studies, combined with an insufficient sample size. We conclude that the existing evidence-base for educational interventions is generally weak, and more scientifically robust evaluations need to be undertaken before recommendations about implementing interventions for policy and practice can be provided.
- 5.12 Two randomised controlled trials are currently being undertaken, which may strengthen the evidence-base when they are reported on. The programmes are Fostering Healthy Futures and the Letterbox Club. Interventions included in the review were translated into vignettes and discussed in the Phase 2 focus groups to elicit the views of LACYP on the interventions. The aim of this discussion was to inform the direction of potentially acceptable interventions that may be developed and evaluated within a Welsh context. The studies reviewed were also written up as vignettes (see Annex E) and discussed in the Phase 2 focus groups to elicit the views of LACYP on the interventions.

## Phase 2: Summary

- 5.13 The qualitative data production in Phase 2 including interviews, focus groups and creative activities with LACYF was guided by the eight central research questions set out below.

- RQ4. How do children in KS2, KS3 and KS4 experience school and college life?
- RQ5. What enables them to take part in education and what are the barriers?
- RQ6. Looking back, what have been the factors that have enabled them to make the progress that they have, or what has prevented them achieving in education?
- RQ7 What are looked after children's and young people's expectations and aspirations for the future in terms of education and employment?
- RQ8 What will they need to help them succeed in achieving their goals?
- RQ9 What are children and young people's views on what schools, LACE teams, carers, social care services and Welsh Government should do to help raise the educational achievements of looked after children?
- RQ10 How transferrable do they think successful interventions from within and outside Wales may be implemented across Wales?
- RQ11 What are their views on how findings from this research may be used to impact on policy and practice?

### *Looked after children's and young people's expectations and aspirations for the future*

- 5.14 In relation to RQ7 the majority of LACYF we consulted with were aspirational and had lots of ideas about careers and employment. Many displayed optimism and enthusiasm for the future and were responsive to those who were interested in their progress, who encouraged them to strive for success and who believed in their

potential. However, for some participants, the development and realisation of ambitions was at risk because of unresolved emotional problems, limited opportunities and resources, and unstable or unsupportive relationships with carers, teachers and social workers. In this way, the findings from this qualitative study confirmed the findings of the literature reviewed in Phase 1. The findings suggest that LACYP are aspirational but the processes and experiences of being in care often act to limit their expectations and aspirations for the future.

*Experiences, enablers and barriers*

- 5.15 There are many barriers that LACYP face in ensuring they have a positive experience of learning, active participation in school life, and are encouraged to take every opportunity to reach their potential and to achieve their aspirations. The analysis of the qualitative data in Phase 2 explored these experiences, enablers and barriers in relation to RQ4, 5, 6 and 8.
- 5.16 LACYP discussed their experiences of placement moves and school moves, which have disrupted their routines, and engendered inconsistent relationships with family, carers, professionals involved in their lives and their peers, along with uncertain futures as they reach the age of leaving care. As reported in the collation of descriptive statistics in Phase 1, placement stability is significant with a negative relationship with a higher numbers of placement moves. Young people themselves understand placement instability as a key barrier to them enjoying positive educational experiences.
- 5.17 LACYP also discussed the disruptions to their day in the form of visits to the school from social workers and other professionals and meetings that were scheduled in school hours and on school premises. Also, even where LACYP had been able to move placements and stay in the same school, the travel distance often limited their access to after school clubs, events and social activities

with their peers. A lack of resources and access to funding for educational equipment, particularly ICT was recognised as a key barrier. Overall, between themselves, and in comparison to other children in society, LACYP feel that they are discriminated against– in the allocation of resources, in access to education, and access to opportunities for social and cultural development.

5.18 Stable care and school placements and consistent relationships and routine featured as key aspects in enabling LACYP to fully participate in learning and school and college life. Similarly, parity and equity of support and access to resources and opportunities were also key. The LACYP we engaged with valued those people who demanded they get to school, encouraged them to learn, achieve and do better, helped them with homework, drove them to after-school clubs, and who ensured they had the opportunity to meet with friends, and had access to pens, books, computers and were able to attend school trips and activities. They spoke too readily of being lucky to receive the sorts of attention and care that might be taken for granted by many other children and families in society.

5.19 LACYP displayed an awareness of the stigmas that come with their status as 'looked after'. This status was understood increasingly as they grew in age, to be seen by others (peers and adults alike) as a problem, troubled, different, and unlikely to achieve much. However, whilst the majority of the participants wanted to be treated like children who are not in the care system, they also acknowledged that for them to participate fully in learning and school life, they may require extra provision to mitigate disadvantage.

*Action, interventions, policy and practice*

5.20 In relation to RQ9, 10 and 11, focus group participants offered an evaluation of the interventions through activities with the vignettes and offered a range of suggestions for improvements in policy and practice. In these discussions young people stressed that they should



be seen as individuals with different needs rather than a one-size-fits-all approach. There was also a tension between requiring extra support and resources and being singled out as 'looked after'. Consequently wider, universal provisions for all children, young people and families were often seen as the preferred option for support services and initiatives.

- 5.21 Despite the instability of moving placement and moving school, some young people thought that a change of school was more appropriate than commuting considerable distances to remain in the same school. These young people felt that becoming part of a new community and building new friendship networks might give their new placement a better chance of success, and that pressure should be placed on education providers to accept them into new schools. This point reflects the need for an individualised approach that takes in to consideration the views of LACYP rather than a blanket policy, which positions continuity of schooling as a central aim.
- 5.22 Young people in focus groups discussed the educational qualifications of foster carers, and felt that they should have a set of basic skills to enable them to support LACYP's education. Some young people detailed a lack of support from foster carers and cases where they were placed in a position of helping foster carers with literacy. Focus group participants suggested that it would be good to raise the required educational qualifications of foster carers, but also recognised, given the current scarcity of foster carers, that this might be an unrealistic proposal. However, free training for foster carers was suggested as an alternative.
- 5.23 The concept of an Education Liaison Officer (ELO) was well received and focus group participants viewed this key role as an opportunity for LACYP to get additional support and advocacy. It was suggested that the ELO should be part of an independent body, rather than linked to the LA, so they might be better at making schools more accountable. There was a sense from the focus groups that strategies should be

put in place to ensure LACYP's access to books, literature and ICT resources as part of their everyday terms of reference.

- 5.24 The interventions discussed through the vignettes received differential responses from focus group participants. Young people found the title, Multi-dimensional Treatment Foster Care (MTFC), inappropriate for an intervention as they felt it labelled LACYP as needing treatment. The behaviourist aspects of the MTFC were rejected by some young people who regarded them as the tools that you would use to train an animal, whilst other thought that reward charts and other incentives could prove useful. The Fostering Healthy Futures project was positively evaluated by some young people because of the links with healthy eating, cooking skills and bringing the family together to eat.
- 5.25 The Letterbox Club scheme and the Teach Your Child Well initiatives were valued as they were seen by young people as engendering collaboration and helping carers to support children and young people in the home environment. The Letterbox Club scheme was also viewed as a positive way of delivering additional resources to help LACYP with their education. Programmes that offered mentoring were also discussed as potentially beneficial but some young people suggested that they would be more effective if the mentee had previously been a LACYP; and if mentoring schemes were available to all children who required the service rather than limited to LACYP. There was a preference for universal programmes and the Head Start initiative was given a positive appraisal because it was available to all children in a community, so was non-stigmatising, and provided early support for young children.
- 5.26 Young people in the focus groups generally rejected services that singled them out as different, for example, the Kids in Transition to School programme. However, many young people in the focus groups valued opportunities for meeting with others who are looked after and saw this as empowering. The Fostering Network and Voices from Care Cymru, who were partners in this project and organised the

research days, both offer space for these forms of activity based and informal meetings, which the focus group participants suggested would be an effective support mechanism. In time based interventions, endings were noted as potentially painful and problematic for LACYP and the longevity of services like The Fostering Network and Voices from Care Cymru also have the benefit of an ongoing support system, rather than one that is delivered across a short time span.

### **Concluding Summary**

- 5.27 Overall, the data produced with LACYP in Phase 2 confirmed the collation of descriptive statistics and the focused literature review undertaken in Phase 1. This resonance illustrates the pervasive nature of the educational inequalities faced by LACYP. The full systematic review of educational interventions for looked after children provides a base for future development of programmes to support LACYP in education. The contributions of young people in the focus groups generated further evaluations, ideas and suggestions for policy and practice, which have informed the recommendations presented in the final chapter of the report.

## 6. Recommendations

### Overview

- 6.1 This final chapter reflects on the key findings of the project and offers some recommendations based on the review of the existing literature and the data produced with LACYP.
1. The evidence-base for educational interventions remains limited, and we would recommend that Welsh Government support and invest in randomised controlled trials to generate scientifically robust evaluation. Interventions subjected to evaluation do not necessarily need to be novel and could encompass existing approaches and practices.
  2. Education for LACYP should be prioritised and the arrangements for moving schools should be expedited more quickly.
  3. LACYP should not be exposed to the all too common disputes over finances and responsibility.
  4. Decisions around remaining in the same school and commuting or moving to a new school as a result of placement moves should be discussed with LACYP, their views taken into account, and decisions made on an individual case-by-case basis.
  5. There needs to be more of a focus on the importance of foster carers own experience of education with consideration given to providing opportunities for foster carers to gain additional educational qualifications.
  6. Training for foster carers should include explicit teaching on how to support children with their homework, providing dedicated time to undertake positive educational activities with children, as well as the importance of attending school meetings.
  7. LACYP should have an ambassador for their education, who has the power to hold agencies to account, possibly located outside of the local authority.

8. All meetings for LACYP (for reasons related to their care circumstances) should be held outside of school hours.
9. Efforts to minimise the impact of disruptive home circumstances on LACYP's learning should be focused on providing extra learning provision, one-on-one support and advocates.
10. Projects that work on increasing aspirations and mentoring (possibly by care experienced individuals) should be considered as a form of support for LACYP.
11. Training for educators, careers services and social workers should be considered in relation to countering the propensity for low attainment and career expectations for LACYP.
12. Communication between social services and education providers needs to be timely and comprehensive to avoid delays in providing LACYP with effective support.
13. The individual needs, requirements and opinions of LACYP should be considered when places for them are made available on interventions and programmes.
14. Intervention programmes should have comprehensive plans for negotiating their end point to minimise distress for LACYP.
15. Universal programmes that are open to all children and young people rather than restricted to LACYP should be considered as they may be less stigmatising and more beneficial for a wider demographic.
16. LACYP need opportunities to meet with others who are looked after and these should be regularly held. Provision in this area is currently available from The Fostering Network and Voices from Care Cymru and these should be considered as best practice models to develop further support for LACYP.
17. LACYP should have access to computers and to a wide range of reading materials.

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## **Annex A - Literature Review Inclusion Criteria and Databases searched**

Achievement: Total of 11 sources of relevance

1. [All fields:] looked after AND [subject:] achiev\*in "Social Sciences" found 12830 results (7 useful) ASSIA Applied Social Sciences Index and British Education Index (Ebscohost)
2. [All fields:] looked-after AND [subject:] achiev\*in "Social Sciences" found 2245 results (0 useful duplications)
3. [All fields:] looked-after child\* AND [subject:] achiev\*in "Social Sciences" found 1800 (0 useful duplications)
4. [All fields:] looked-after young people AND [subject:] achiev\*in "Social Sciences" found 1155 results (0 useful duplications)
5. [All fields:] care AND [subject:] achiev\*in "Social Sciences" found 4533410 results (1 useful)
6. [All fields:] foster care AND [subject:] achiev\*in "Social Sciences" found 163888 results (2 useful)
7. [All fields:] residential care AND [subject:] achiev\*in "Social Sciences" found 66651 results (0 useful duplications)
8. [All fields:] kinship care AND [subject:] achiev\*in "Social Sciences" found 11094 results (0 useful duplications)
9. [All fields:] looked-after AND [subject:] school achiev\* in "Social Sciences" found 2224 results (0 useful duplications)

10. All fields:] care leaver AND [subject:] achiev\* in "Social Sciences" found 3799 results (1 useful)

11. [All fields:] adolescen\*AND [subject:] achiev\* in "Social Sciences" found 2544522 results (0 useful duplications)

12. [All fields:] youth AND [subject:] achiev\* in "Social Sciences" found 375816 results (0 useful)

13. [All fields:] looked-after AND [subject:] underachievement in "Social Sciences" found 2223 (o useful duplications)

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Attainment: Total of 11 sources of relevance

1. [All fields:] looked after AND [subject:] attain\*in "Social Sciences" found 12800 results (2 useful) Sociological Abstracts (ProQuest)/ ASSIA Applied Social Sciences Index and Abstracts (ProQuest)

2. [All fields:] looked-after AND [subject:] attain\* in "Social Sciences" found 2223 results (0 useful - 2 duplications)

3. [All fields:] looked-after child\* AND [subject:] attain\* in "Social Sciences" found 1778 results (0 useful - 3 duplications)

4. [All fields:] looked-after young people AND [subject:] attain\* in "Social Sciences" found 1146 results (0 useful)

5. [All fields:] care AND [subject:] attain\* in "Social Sciences" found 4532950 results (1 useful) ASSIA Applied Social Sciences Index and Abstracts (ProQuest)

6. [All fields:] foster care AND [subject:] attain\* in "Social Sciences" found 4035 results (8 useful) British Education Index (Ebscohost)/ PsycINFO (Ovid)/ Sociological Abstracts (ProQuest)/ ASSIA Applied Social Sciences Index and Abstracts (ProQuest)
7. [All fields:] residential care AND [subject:] attain\*in "Social Sciences" found 66632 results (0 useful)
8. [All fields:] kinship care AND [subject:] attain\*in "Social Sciences" found 11088 results (0 useful)
9. All fields:] care leaver AND [subject:] attain\* in "Social Sciences" found 3785 results (0 useful)
10. [All fields:] adolescen\*AND [subject:] attain\* in "Social Sciences" found 2541756 results (0 useful)
11. [All fields:] youth AND [subject:] attain\* in "Social Sciences" found 374260 results (0 useful)

Aspirations: Total of 1 source of relevance

1. [All fields:] looked after AND [subject:] Aspirations in "Social Sciences" found 12798 results (1 useful) ASSIA Applied Social Sciences Index and Abstracts (ProQuest)
2. [All fields:] looked-after AND [subject:] Aspirations in "Social Sciences" found 2221 results (0 useful - 1 duplication)
3. [All fields:] looked-after child\* AND [subject:] Aspirations in "Social Sciences" found 1775 results (0 useful)
4. [All fields:] looked-after young people AND [subject:] Aspirations in "Social Sciences" found 1146 results (0 useful)

5. [All fields:] care AND [subject:] Aspirations in "Social Sciences" found 4534371 results (0 useful)
6. [All fields:] foster care AND [subject:] Aspirations in "Social Sciences" found 163876 results (0 useful)
7. [All fields:] residential care AND [subject:] Aspirations in "Social Sciences" found 66655 results (0 useful)
8. [All fields:] kinship care AND [subject:] Aspirations in "Social Sciences" found 11091 results (0 useful)
9. All fields:] care leaver AND [subject:] Aspirations in "Social Sciences" found 3786 results (0 useful)
10. [All fields:] adolescen\*AND [subject:] Aspirations in "Social Sciences" found 2542140 results (0 useful)
11. [All fields:] youth AND [subject:] Aspirations in "Social Sciences" found 374019 results (0 useful)

-----  
-----

Zetoc Records 1 of 1 for: "looked-after children" AND "aspirations" (Total of 1 source of relevance)

Zetoc Records 1—9 of 9 for: "looked-after children" AND "attainment" (Total of 2 sources of relevance)

Zetoc Records 1—9 of 9 for: "looked-after children" AND "achievement" (0 useful duplications)

Zetoc Records "looked-after young people" AND "care leaver" AND "residential care" AND "kinship care" "achievement" AND "attainment" AND "aspirations" (0 useful duplications)

---

-

Proquest; EThOs; Google: “care leaver” AND “residential care” AND “kinship care” AND “looked after child\*” AND (achieve\* OR attainment) AND aspirations (Total of 13 sources of relevance)

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## Annex B: Search Strategy for Systematic Review

Database: Ovid MEDLINE(R) <1946 to November Week 3 2014>

### # Search History

1. substitute care.ti,ab.
2. "local authority care".ti,ab.
3. "out-of-home care".ti,ab.
4. state care.ti,ab.
5. public care.ti,ab.
6. (child\* adj3 state care).ti,ab.
7. ((residential or foster or kinship) adj3 (care or home\*) adj5 (kid\* or child\* or youngster or young person or young people or youth or adolescent\* or teen\* or girl\* or boy\* or juvenile\*)).ti,ab.
8. Children?s home.ti,ab.
9. (in care adj3 (kid\* or child\* or youngster or young person or young people or youth or adolescent\* or teen\* or girl\* or boy\* or juvenile\*)).ti,ab.
10. (custody adj5 (kid\* or child\* or youngster or young person or young people or youth or adolescent\* or teen\* or girl\* or boy\* or juvenile\*)).ti,ab.
11. support\* living.ti,ab.
12. (looked after adj3 (kid\* or child\* or youngster or young person or young people or youth or adolescent\* or teen\* or girl\* or boy\* or juvenile\*)).ti,ab.
13. (orphan\* adj3 (kid\* or child\* or youngster or young person or young people or youth or adolescent\* or teen\* or girl\* or boy\* or juvenile\*)).ti,ab.
14. (institution\* adj3 (kid\* or child\* or youngster or young person or young people or youth or adolescent\* or teen\* or girl\* or boy\* or juvenile\*)).ti,ab.
15. (nonparent adj3 (care or custody)).ti,ab.
16. care order.ti,ab.
17. Foster Home Care/
18. Child, Institutionalized/

19. or/1-18
20. (school or college or education\* or academ\*).ti,ab.
21. (learn\* or attain\* or achiev\* or grad\* or perform\*).ti,ab.
22. attendance.ti,ab.
23. truan\*.ti,ab.
24. (exclus\* or expulsion or expel\* or suspen\*).ti,ab.
25. ((entry or accept\* or attend\*) adj3 (university or high\* education or further education or college)).ti,ab.
26. Educational Measurement/
27. School/
28. Education/
29. or/20-28
30. (randomi?ed controlled trial or controlled clinical trial).pt.
31. (randomi?ed or quasi-experimental or placebo or randomly or trial or groups).ti,ab.
32. or/30-31
33. 19 and 29 and 32
34. exp animals/ not humans.sh.
35. limit 34 to (English language and yr= "1989-Current")

## Annex C: Data Extraction and Critical Appraisal Form

### General Information

|  |  |
|--|--|
| <b>Name of Extractor</b>   |  |
| <b>Publication type</b><br><i>(e.g. journal article, report)</i> |  |
| <b>Author</b>  |  |
| <b>Year</b><br><i>(for study authors)</i>                        |  |
| <b>Country</b><br><i>(region, city)</i>                          |  |

### Eligibility

| Study Characteristics   | Review Inclusion Criteria<br><i>(Insert inclusion criteria for each characteristic as defined in the Protocol)</i> |                          |                          |                          | Location in text<br><i>(pg &amp; ¶/fig/table)</i> |
|---|--|--------------------------|--------------------------|--------------------------|---|
|   |  | Yes                      | No                       | Unclear                  |   |
| <b>Type of study</b>  | Randomised Controlled Trial  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |   |
|   | Controlled Clinical Trial<br><i>(quasi-randomised trial)</i>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |   |
| <b>Participants</b>   | Looked after children and young people   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |   |
| <b>Types of intervention</b>  | Any  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |   |
| <b>Types of outcome measures</b>  | Education  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |   |
| <b>INCLUDE</b> <input type="checkbox"/> <b>EXCLUDE</b> <input type="checkbox"/> |  |                          |                          |                          |   |
| <b>Reason for exclusion</b>   |  |                          |                          |                          |   |
| <b>Notes:</b>   |  |                          |                          |                          |   |

DO NOT PROCEED IF STUDY EXCLUDED FROM REVIEW

## Population and setting

|   | <b>Description</b><br><i>Include comparative information for each group (i.e. intervention and controls) if available</i> | <b>Location in text</b><br><i>(pg &amp; ¶/fig/table)</i> |
|---|---|--|
| <b>Population description</b><br><i>(from which study participants are drawn)</i> |   |  |
| <b>Setting</b><br><i>(including location and social context)</i>                  |   |  |
| <b>Inclusion criteria</b>   |   |  |
| <b>Exclusion criteria</b>   |   |  |
| <b>Method/s of recruitment of participants</b>                                    |   |  |
| <b>Informed consent obtained</b>  | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unclear                                 |  |
| <b>Notes:</b>   |   |  |

## Methods

|   | <b>Descriptions as stated in report/paper</b>   | <b>Location in text</b><br><i>(pg &amp; ¶/fig/table)</i> |
|---|---|--|
| <b>Aim of study</b>   |   |  |
| <b>Design</b> <i>(e.g. parallel, crossover, non-RCT)</i>                            |   |  |
| <b>Unit of allocation</b><br><i>(by individuals, cluster/ groups or body parts)</i> |   |  |
| <b>Start date</b>   |   |  |
| <b>End date</b>   |   |  |
| <b>Duration of participation</b><br><i>(from recruitment to last follow-up)</i>     |   |  |
| <b>Ethical approval needed/ obtained for study</b>                                  | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unclear |  |
| <b>Notes:</b>   |   |  |

## Risk of Bias assessment

See [Chapter 8](#) of the Cochrane Handbook. Additional domains may be required for non-randomised studies.

| Domain   | Risk of bias             |                          |                          | Support for judgement      | Location in text<br>(pg & ¶/fig/table) |
|--|--------------------------|--------------------------|--------------------------|----------------------------|--|
|  | Low risk                 | High risk                | Unclear risk             |                            |  |
| <b>Random sequence generation</b><br><i>(selection bias)</i>               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |                            |  |
| <b>Allocation concealment</b><br><i>(selection bias)</i>                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |                            |  |
| <b>Blinding of participants and personnel</b><br><i>(performance bias)</i> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <b>Outcome group: All/</b> |  |
| <i>(if required)</i>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <b>Outcome group:</b>      |  |
| <b>Blinding of outcome assessment</b><br><i>(detection bias)</i>           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <b>Outcome group: All/</b> |  |
| <i>(if required)</i>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <b>Outcome group:</b>      |  |
| <b>Incomplete outcome data</b><br><i>(attrition bias)</i>                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |                            |  |
| <b>Selective outcome reporting?</b><br><i>(reporting bias)</i>             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |                            |  |
| <b>Other bias</b>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |                            |  |
| <b>Notes:</b>  |                          |                          |                          |                            |  |

## Participants

Provide overall data and, if available, comparative data for each intervention or comparison group.

|   | Description as stated in report/paper | Location in text<br>(pg & ¶/fig/table) |
|---|---------------------------------------|--|
| <b>Total no. randomised</b><br><i>(or total pop. at start of study for NRCTs)</i> |                                       |  |
| <b>Clusters</b><br><i>(if applicable, no., type, no. people per cluster)</i>      |                                       |  |
| <b>Baseline imbalances</b>  |                                       |  |
| <b>Withdrawals and exclusions</b><br><i>(if not provided below by outcome)</i>    |                                       |  |
| <b>Age</b>  |                                       |  |
| <b>Sex</b>  |                                       |  |
| <b>Race/Ethnicity</b>   |                                       |  |
| <b>Severity of illness</b>  |                                       |  |
| <b>Co-morbidities</b>   |                                       |  |
| <b>Other treatment received</b><br><i>(additional to study intervention)</i>      |                                       |  |
| <b>Other relevant sociodemographics</b>   |                                       |  |
| <b>Subgroups measured</b>   |                                       |  |
| <b>Subgroups reported</b>   |                                       |  |
| <b>Notes:</b>   |                                       |  |

## Intervention groups

Copy and paste table for each intervention and comparison group

### Intervention Group

|  | Description as stated in report/paper | Location in text<br>(pg & ¶/fig/table) |
|--|---------------------------------------|--|
| <b>Group name</b>  |                                       |  |
| <b>No. randomised to group</b><br><i>(specify whether no. people or clusters)</i>                              |                                       |  |
| <b>Theoretical basis</b> <i>(include key references)</i>   |                                       |  |
| <b>Description</b> <i>(include sufficient detail for replication, e.g. content, dose, components)</i>          |                                       |  |
| <b>Duration of treatment period</b>  |                                       |  |
| <b>Timing</b> <i>(e.g. frequency, duration of each episode)</i>  |                                       |  |
| <b>Delivery</b> <i>(e.g. mechanism, medium, intensity, fidelity)</i>   |                                       |  |
| <b>Providers</b><br><i>(e.g. no., profession, training, ethnicity etc. if relevant)</i>                        |                                       |  |
| <b>Co-interventions</b>  |                                       |  |
| <b>Economic variables</b><br><i>(i.e. intervention cost, changes in other costs as result of intervention)</i> |                                       |  |
| <b>Resource requirements to replicate intervention</b><br><i>(e.g. staff numbers, cold chain, equipment)</i>   |                                       |  |
| <b>Notes:</b>  |                                       |  |

## Control Group

|  | Description as stated in report/paper | Location in text<br>(pg & ¶/fig/table) |
|--|---------------------------------------|--|
| <b>Group name</b>  |                                       |  |
| <b>No. randomised to group</b><br><i>(specify whether no. people or clusters)</i>                              |                                       |  |
| <b>Theoretical basis</b> <i>(include key references)</i>   |                                       |  |
| <b>Description</b> <i>(include sufficient detail for replication, e.g. content, dose, components)</i>          |                                       |  |
| <b>Duration of treatment period</b>  |                                       |  |
| <b>Timing</b> <i>(e.g. frequency, duration of each episode)</i>  |                                       |  |
| <b>Delivery</b> <i>(e.g. mechanism, medium, intensity, fidelity)</i>   |                                       |  |
| <b>Providers</b><br><i>(e.g. no., profession, training, ethnicity etc. if relevant)</i>                        |                                       |  |
| <b>Co-interventions</b>  |                                       |  |
| <b>Economic variables</b><br><i>(i.e. intervention cost, changes in other costs as result of intervention)</i> |                                       |  |
| <b>Resource requirements to replicate intervention</b><br><i>(e.g. staff numbers, cold chain, equipment)</i>   |                                       |  |
| <b>Notes:</b>  |                                       |  |



## Outcomes

Copy and paste table for each outcome.

### Outcome 1

|   | Description as stated in report/paper   | Location in text<br>(pg & ¶/fig/table) |
|---|---|--|
| <b>Outcome name</b>   |   |  |
| <b>Time points measured</b><br><i>(specify whether from start or end of intervention)</i>     |   |  |
| <b>Time points reported</b>   |   |  |
| <b>Outcome definition</b> <i>(with diagnostic criteria if relevant)</i>                       |   |  |
| <b>Person measuring/ reporting</b>  |   |  |
| <b>Unit of measurement</b><br><i>(if relevant)</i>  |   |  |
| <b>Scales: upper and lower limits</b> <i>(indicate whether high or low score is good)</i>     |   |  |
| <b>Is outcome/tool validated?</b>   | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unclear |  |
| <b>Imputation of missing data</b><br><i>(e.g. assumptions made for ITT analysis)</i>          |   |  |
| <b>Assumed risk estimate</b><br><i>(e.g. baseline or population risk noted in Background)</i> |   |  |
| <b>Power</b>  |   |  |
| <b>Notes:</b>   |   |  |

## Results

Copy and paste the appropriate table for each outcome, including additional tables for each time point and subgroup as required.

### For RCT/CCT

#### Dichotomous outcome

|  |                                       |                          |                          |                  |  |
|--|---------------------------------------|--------------------------|--------------------------|------------------|--|
|  | Description as stated in report/paper |                          |                          |                  | Location in text<br>(pg & ¶/fig/table) |
| Comparison   |                                       |                          |                          |                  |  |
| Outcome  |                                       |                          |                          |                  |  |
| Subgroup   |                                       |                          |                          |                  |  |
| Timepoint<br><i>(specify whether from start or end of intervention)</i>                                |                                       |                          |                          |                  |  |
| Results  | Intervention                          |                          | Comparison               |                  |  |
|  | No. events                            | No events                | No. events               | No. participants |  |
|  |                                       |                          |                          |                  |  |
| No. missing participants and reasons   |                                       |                          |                          |                  |  |
| No. participants moved from other group and reasons  |                                       |                          |                          |                  |  |
| Any other results reported   |                                       |                          |                          |                  |  |
| Unit of analysis <i>(by individuals, cluster/groups or body parts)</i>                                 |                                       |                          |                          |                  |  |
| Statistical methods used and appropriateness of these methods <i>(e.g. adjustment for correlation)</i> |                                       |                          |                          |                  |  |
| Reanalysis required?<br><i>(specify, e.g. correlation adjustment)</i>                                  | <input type="checkbox"/>              | <input type="checkbox"/> | <input type="checkbox"/> |                  |  |
|  | Yes                                   | No                       | Unclear                  |                  |  |
| Reanalysis possible?   | <input type="checkbox"/>              | <input type="checkbox"/> | <input type="checkbox"/> |                  |  |
|  | Yes                                   | No                       | Unclear                  |                  |  |
| Reanalysed results   |                                       |                          |                          |                  |  |
| Notes:   |                                       |                          |                          |                  |  |

**For RCT/CCT**  
**Continuous outcome**

|   |                                       |                          |                          |                   |                        |                  |  |
|---|---------------------------------------|--------------------------|--------------------------|-------------------|------------------------|------------------|--|
|   | Description as stated in report/paper |                          |                          |                   |                        |                  | Location in text<br>(pg & ¶/fig/table) |
| <b>Comparison</b>   |                                       |                          |                          |                   |                        |                  |  |
| <b>Outcome</b>  |                                       |                          |                          |                   |                        |                  |  |
| <b>Subgroup</b>   |                                       |                          |                          |                   |                        |                  |  |
| <b>Timepoint</b><br><i>(specify whether from start or end of intervention)</i>                                |                                       |                          |                          |                   |                        |                  |  |
| <b>Post-intervention or change from baseline?</b>   |                                       |                          |                          |                   |                        |                  |  |
| <b>Results</b>  | <b>Intervention</b>                   |                          |                          | <b>Comparison</b> |                        |                  |  |
|   | Mean                                  | SD (or other variance)   | No. participants         | Mean              | SD (or other variance) | No. participants |  |
|   |                                       |                          |                          |                   |                        |                  |  |
| <b>No. missing participants and reasons</b>   |                                       |                          |                          |                   |                        |                  |  |
| <b>No. participants moved from other group and reasons</b>  |                                       |                          |                          |                   |                        |                  |  |
| <b>Any other results reported</b>   |                                       |                          |                          |                   |                        |                  |  |
| <b>Unit of analysis</b><br><i>(individuals, cluster/groups or body parts)</i>                                 |                                       |                          |                          |                   |                        |                  |  |
| <b>Statistical methods used and appropriateness of these methods</b> <i>(e.g. adjustment for correlation)</i> |                                       |                          |                          |                   |                        |                  |  |
| <b>Reanalysis required?</b> <i>(specify)</i>  | <input type="checkbox"/>              | <input type="checkbox"/> | <input type="checkbox"/> |                   |                        |                  |  |
|   | Yes                                   | No                       | Unclear                  |                   |                        |                  |  |
| <b>Reanalysis possible?</b>   | <input type="checkbox"/>              | <input type="checkbox"/> | <input type="checkbox"/> |                   |                        |                  |  |
|   | Yes                                   | No                       | Unclear                  |                   |                        |                  |  |
| <b>Reanalysed results</b>   |                                       |                          |                          |                   |                        |                  |  |
| <b>Notes:</b>   |                                       |                          |                          |                   |                        |                  |  |

**For RCT/CCT**  
**Other outcome**

|  | Description as stated in report/paper |                          |                          |                        | Location in text<br><i>(pg &amp; ¶/fig/table)</i> |
|--|---------------------------------------|--------------------------|--------------------------|------------------------|---|
| <b>Comparison</b>  |                                       |                          |                          |                        |   |
| <b>Outcome</b>   |                                       |                          |                          |                        |   |
| <b>Subgroup</b>  |                                       |                          |                          |                        |   |
| <b>Timepoint</b><br><i>(specify whether from start or end of intervention)</i> |                                       |                          |                          |                        |   |
| <b>Results</b>   | Intervention result                   | SD (or other variance)   | Control result           | SD (or other variance) |   |
|  |                                       |                          |                          |                        |   |
|  | Overall results                       |                          | SE (or other variance)   |                        |   |
|  |                                       |                          |                          |                        |   |
| <b>No. participant</b>   | Intervention                          |                          | Control                  |                        |   |
|  |                                       |                          |                          |                        |   |
| <b>No. missing participants and reasons</b>                                    |                                       |                          |                          |                        |   |
| <b>No. participants moved from other group and reasons</b>                     |                                       |                          |                          |                        |   |
| <b>Any other results reported</b>  |                                       |                          |                          |                        |   |
| <b>Unit of analysis</b> <i>(by individuals, cluster/groups or body parts)</i>  |                                       |                          |                          |                        |   |
| <b>Statistical methods used and appropriateness of these methods</b>           |                                       |                          |                          |                        |   |
| <b>Reanalysis required?</b><br><i>(specify)</i>                                | <input type="checkbox"/>              | <input type="checkbox"/> | <input type="checkbox"/> |                        |   |
|  | Yes                                   | No                       | Unclear                  |                        |   |
| <b>Reanalysis possible?</b>  | <input type="checkbox"/>              | <input type="checkbox"/> | <input type="checkbox"/> |                        |   |
|  | Yes                                   | No                       | Unclear                  |                        |   |
| <b>Reanalysed results</b>  |                                       |                          |                          |                        |   |
| <b>Notes:</b>  |                                       |                          |                          |                        |   |

### For Cost Benefit Analysis

|  | Description as stated in report/paper |                          |                          |                        | Location in text<br>(pg & ¶/fig/table) |
|--|---------------------------------------|--------------------------|--------------------------|------------------------|--|
| <b>Comparison</b>  |                                       |                          |                          |                        |  |
| <b>Outcome</b>   |                                       |                          |                          |                        |  |
| <b>Subgroup</b>  |                                       |                          |                          |                        |  |
| <b>Timepoint</b><br><i>(specify whether from start or end of intervention)</i> |                                       |                          |                          |                        |  |
| <b>Post-intervention or change from baseline?</b>                              |                                       |                          |                          |                        |  |
| <b>Results</b>   | Intervention result                   | SD (or other variance)   | Control result           | SD (or other variance) |  |
|  |                                       |                          |                          |                        |  |
|  | Overall results                       |                          | SE (or other variance)   |                        |  |
|  |                                       |                          |                          |                        |  |
| <b>No. participants</b>  | Intervention                          |                          | Control                  |                        |  |
| <b>No. missing participants and reasons</b>                                    |                                       |                          |                          |                        |  |
| <b>No. participants moved from other group and reasons</b>                     |                                       |                          |                          |                        |  |
| <b>Any other results reported</b>  |                                       |                          |                          |                        |  |
| <b>Unit of analysis</b><br><i>(individuals, cluster/groups or body parts)</i>  |                                       |                          |                          |                        |  |
| <b>Statistical methods used and appropriateness of these methods</b>           |                                       |                          |                          |                        |  |
| <b>Reanalysis required?</b><br><i>(specify)</i>                                | <input type="checkbox"/>              | <input type="checkbox"/> | <input type="checkbox"/> |                        |  |
|  | Yes                                   | No                       | Unclear                  |                        |  |
| <b>Reanalysis possible?</b>  | <input type="checkbox"/>              | <input type="checkbox"/> | <input type="checkbox"/> |                        |  |
|  | Yes                                   | No                       | Unclear                  |                        |  |
| <b>Reanalysed results</b>  |                                       |                          |                          |                        |  |
| <b>Notes:</b>  |                                       |                          |                          |                        |  |

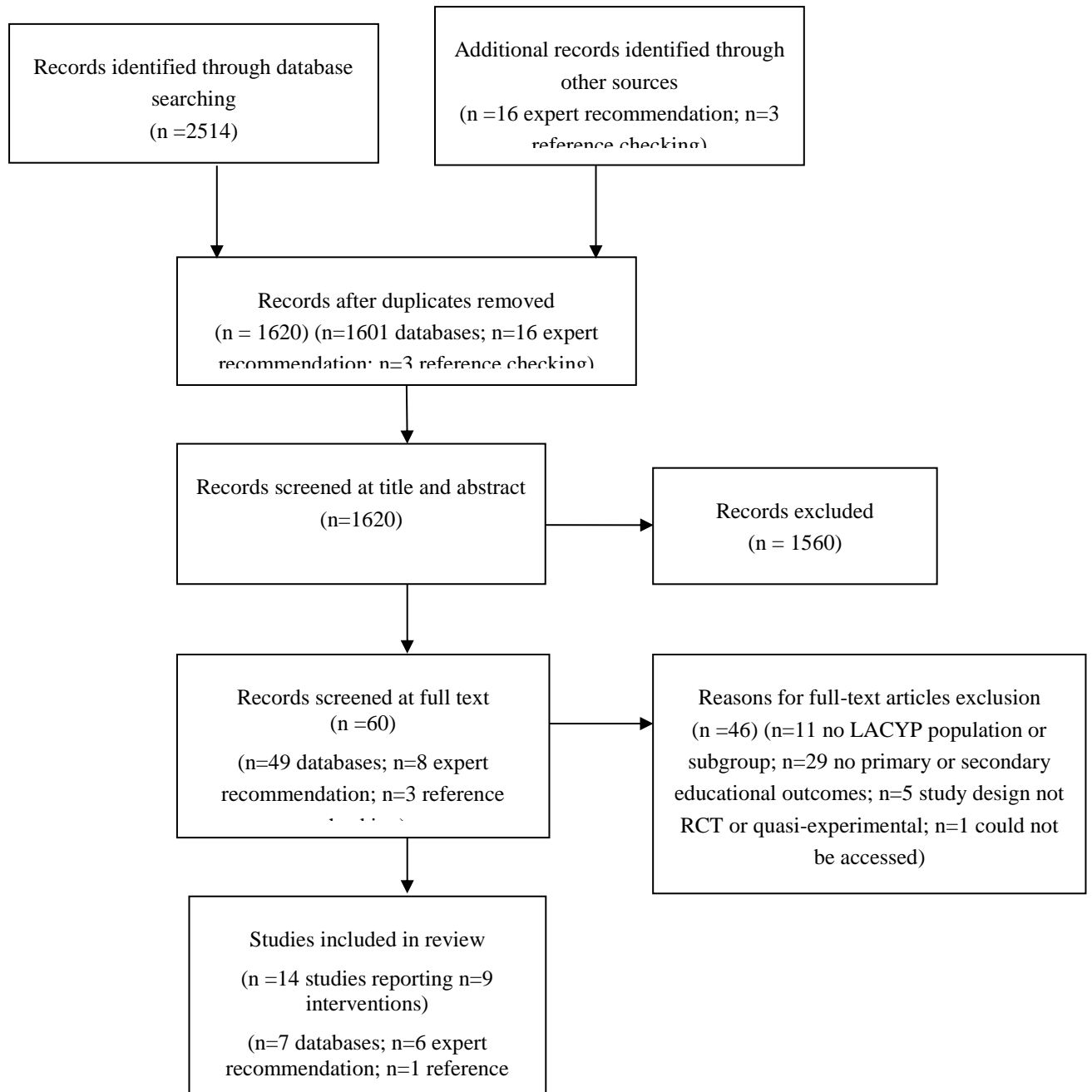
## Applicability

|   |  |  |
|---|--|--|
| <p><b>Have important populations been excluded from the study?</b> <i>(consider disadvantaged populations, and possible differences in the intervention effect)</i></p> | <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unclear</p> |  |
| <p><b>Is the intervention likely to be aimed at disadvantaged groups?</b> <i>(e.g. lower socioeconomic groups)</i></p>  | <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unclear</p> |  |
| <p><b>Does the study directly address the review question?</b> <i>(any issues of partial or indirect applicability)</i></p>   | <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unclear</p> |  |
| <p><b>Notes:</b></p>  |  |  |

## Other information

|   | Description as stated in report/paper | Location in text<br><i>(pg &amp; ¶/fig/table)</i> |
|---|---------------------------------------|---|
| <p><b>Key conclusions of study authors</b></p>  |                                       |   |
| <p><b>References to other relevant studies</b></p>  |                                       |   |
| <p><b>Correspondence required for further study information</b> <i>(from whom, what and when)</i></p> |                                       |   |
| <p><b>Notes:</b></p>  |                                       |   |

## Annex D: PRISMA Diagram of Study Retrieval



## Annex E: Vignettes of Educational Interventions

### **Education Liaison Officer**

Callum is 10. He has been in foster care for 5 years, and has recently moved into a new placement. This move has meant that Callum needs to change schools and go to the local primary school, because his old school is too far away.

The school has refused the request to accept Callum. They say that they are full. The rules state that if a school refuses to take a looked after child, then the local authority can make the school take them, even if the school is full.

Callum's social worker is not sure what to do and decides to make a referral to the Education Liaison Officer.

- The officer works with the social work team. They are trained in how to solve the educational problems faced by looked after children.
- These problems include: failure to provide the child's educational records; denial of special education services; wrongful suspension or expulsion. The officer also has some legal training and access to support from a law firm.
- The Education Liaison Officer that Callum is referred to has dealt with another 160 cases in the past year.
- The Education Liaison Officer and a staff member from the law firm arrange to attend a meeting
- In this meeting they will help the local authority deal with the school's failure to accept Callum into the school.



## **Headstart**

Laura is 5. She has a single mum who gave birth to her when she was 15. Laura now lives with great-grandmother on a permanent basis, because she has given her a lot of support and help. They don't have very much money.

'Headstart' offers support to families like Laura's. Headstart offer support to encourage the educational, social and emotional development of children.

This means that Laura's family have been able to go to things like:

- classes to learn how to cook healthy foods needed for Laura to grow up healthy;
- drop-in play sessions at the local children's centre;
- parenting classes to encourage positive behaviours and relationships.

A member of the local Family and Community Partnership has also met with Laura's great-grandmother to help her feel confident in asking for the community services the families need.

## **Fostering Healthy Futures**

Sophie is 10 and is in foster care.

Sophie now goes to a group once a week for 1 hour, along with 7 other children who are also in foster care (age 9-11).

- Two trained workers lead the group.
- There are lots of activities and games that aim to help young people to understand their emotions, solve problems, manage anger, and form healthy relationships.
- The group have dinner together after each session.
- The group is a 30 minute drive from Sophie's foster care placement.

Sophie also has an individual mentor. She meets with her mentor for 2 to 4 hours per week.

- The mentor can be a social work student.
- Sophie's mentor drives her to and from the group, and they also join the group for dinner at the end.
- During her mentoring sessions Sophie talks with her mentor about how to build healthy relationships with other young people and adults. They also complete a range of activities from the skills group.
- Sometimes they go out and do activities, like cycling, going to the library, museum or park.
- Sophie can choose an area that she might like to work in and is given the opportunity to shadow someone who works in this field.

The group and the mentoring lasts for 9 months and at the end she graduates at a leaving ceremony.

### **Letterbox Club**

Emily is 8 and is back in foster care. She has gone back into foster care after living with her family for a little while. Her 10 year old sister is in the same foster placement.

Since being back in foster care, Emily has been part of the “Letterbox Club”. This means that every month, for 6 months, Emily gets a parcel, just for her, which is posted to her foster home.

- The parcel contains lots of books, such as *Where’s Wally*, *Horrid Henry*, and the *Sticker Atlas of Britain and Northern Ireland*. There are also story CDs, a CD player, and pens and paper. Parcels contain activities and materials to help Emily to learn maths, and so far she has received a calculator, plastic coins, dice and puzzle sheets.
- Emily’s foster carer opens the parcels with her when they arrive. Sometimes they look through the books with Emily. Sometimes Emily goes and does the activities and games on her own, or with her sister.

## **Fostering Individualized Assistance Program**

David is 15. He has been in his current foster placement for 7 months. He has moved foster care placements a lot in the past few years. He has struggled with a number of behavioural problems in the past.

David likes his foster placement at the moment. He is offered the Fostering Individualized Assistance Programme to try to help him stay there. The programme will also aim to help with David's behavioural and emotional problems.

- The programme is delivered by a trained family specialist who has lots of experience working with people like David.
- Each specialist works with up to 12 young people, and is able to work with another 10 young people who have completed the programme and might need help again.

When David meets the 'family specialist'

- They assess his mental needs. They also assess the mental needs of David's birth and foster family. Problems and good things that have happened are explored. Current problems and good things are also talked about.

Following the meeting, a 'Fostering Individualized Assistance' Program team is set up.

- They meet monthly to form a 'life domain plan' for David.
- This plan says what David's important needs are. It also says what can be done to try to help David stay where he is in his foster placement.

The family specialist then works with David, his birth and foster family, and other professionals, to set them up with services and support that would help him. This includes access to mental health services, a volunteer mentoring programme, and an advocacy service that could help David in accessing additional educational support in school.

### **Teach Your Children Well**

Jack is 7. He has been in foster care for 10 months. His sister is there too. Both of them go to the local primary school. Jack's foster carer Angela has attended a 6 hour training course so that she can help Jack with his reading and maths.

- Each week, for a whole school year, Angela tutors Jack to improve his reading and maths skills.
- Jack is encouraged to read stories aloud to Angela, and they work together to solve maths problems with the use of a computer programme.
  
- Angela didn't have a computer before the training, so had to buy one before Jack could complete the activities.
- Sometimes Angela struggles to help Jack. For example, there are certain words that Jack finds hard to read out loud.
- At the training course Angela was provided with the phone number for a free of charge helpline.
- From time to time she calls the helpline for extra support and advice.

### **Kids in Transition to School**

Clare is 4 and is in foster care. She is going to the local infant school for the first time in September.

To help Clare get ready to begin school, she is going to be part of the Kids in Transition to School Programme. So before she starts school in September, over the summer, for 2 months, Clare goes with her foster carers to a group with other foster families. Once school has started, whilst she is settling into school, Clare and her foster carers will go along to the group for another two weeks.

Clare and her foster family attend the group for 2 hours, 2 times a week. They meet in a local community centre.

- A teacher and two teaching assistants lead the group.
- Clare takes part in activities that help to improve her reading and writing, help her with good behaviour, and help her to make friends with other children.
- For example, at each session the children learn to sound a new letter and take part in role-playing and learning how to share with others.
- Clare is provided with additional activities and learning materials to take home. She has a weekly homework task to complete.
- Clare's foster carers take part in an adult group led by a facilitator assistant.
- They learn about how to help their foster children learn to read and write, prepare for starting school, and how to manage their behaviour.

## **Multidimensional Treatment Foster Care**

Sarah is 16. She has a history of offending and until recently has been staying in a secure children's home. Sarah has now been placed in foster care.

Her foster carers have been trained in a programme called "Multidimensional Treatment Foster Care". This means that for Sarah:

The foster carers...

- Have been chosen because they have fostered other young people similar to Sarah, so they understand her complex needs.
- They talk about negative behaviours and positive ways of doing things differently
- They keep a point system of Sarah's behaviour, taking away points for bad behaviours and adding points for good behaviours.

A family therapist...

- Meets with Sarah each week to help with problems at school, with her parents and with her foster care placement.
- The family therapist also works with the family to ensure it is a good environment for Sarah

A 'skills trainer'...

- Helps Sarah to go to activities she likes. For example, Sarah enjoys street dancing, and her trainer has helped her to find a weekly class to attend near her home.
- During their time together, the skills trainer tries to support Sarah in behaving in a positive way and to form positive relationships with others.
- They role-play how Sarah might behave in different situations, with the trainer teaching her the most positive set of behaviours.

## Annex F: Participant Information

### 5-11 year olds - Demographics

| Name <sup>7</sup> | Gender | Age | Ethnicity     | First Language | Placement types | No. placements | Education type    |
|-------------------|--------|-----|---------------|----------------|-----------------|----------------|-------------------|
| Rapunzel          | F      | 8   | White         | English        | Foster care     | 2              | Mainstream school |
| Ruby Sparkles     | F      | 8   | White         | English        | Foster care     | 2              | Mainstream school |
| Darcy             | F      | 11  | White         | English        | Foster care     | 1              | Mainstream school |
| Batman 1          | M      | 6   | White         | English        | Foster care     | 1              | Mainstream school |
| Batman 2          | M      | 7   | White         | English        | Foster care     | 1              | Mainstream school |
| Cole              | M      | 9   | White         | English        | Foster care     | 1              | Mainstream school |
| Subway Surfer     | M      | 7   | White         | English        | Foster care     | 2              | Mainstream school |
| Evan              | M      | 10  | White         | English        | Foster care     | 1              | Mainstream school |
| Elsa S            | F      | 7   | White         | English        | Foster care     | 3              | Mainstream school |
| Elsa W            | F      | 7   | White         | English        | Foster care     | 3              | Mainstream school |
| Kai               | M      | 8   | White         | English        | Foster care     | 2              | Mainstream school |
| Katelyn           | F      |     | White         | English        | Foster care     | data missing   | Mainstream school |
| Jessica           | F      | 9   | Arab          | English        | Foster care     | 1              | Mainstream school |
| Musa              | M      | 8   | British Asian | English        | Foster care     | 5              | Mainstream school |
| Spiderman         | M      | 8   | White         | English        | Foster care     | 2              | Mainstream school |
| Caitlyn           | F      | 11  | White         | English        | Foster care     | 2              | Mainstream school |
| Harry Cain        | M      | 8   | White         | English        | Foster care     | 2              | Mainstream school |
| De Gea            | M      | 6   | White         | English        | Foster care     | 2              | Mainstream school |
| Lloyd             | M      | 7   | White         | English        | Foster care     | 1              | Mainstream school |
| Dafydd            | M      | 10  | White         | English        | Foster care     | 2              | Mainstream school |
| Neymar            | M      | 9   | White         | English        | Foster care     | 2              | Mainstream school |
| Jack              | M      | 9   | White         | English        | Foster care     | 3              | Mainstream school |

<sup>7</sup> All the LACYP's names in this report are fictitious. Pseudonyms were selected by the participants to maintain their anonymity.



### 5-11 year olds – Research Activities and Aspirations

| Name <sup>8</sup> | Interview type   | Interview length | Aspiration                           |
|-------------------|------------------|------------------|--------------------------------------|
| Rapunzel          | Emotion stickers | 14.36            | Teacher                              |
| Ruby Sparkles     | Emotion stickers | 21.26            | Beautician                           |
| Darcy             | Talk             | 6.24             | Footballer or firefighter            |
| Batman 1          | Emotion stickers | 9.04             | Footballer                           |
| Batman 2          | Emotion stickers | 9.04             | Superhero or a job making things     |
| Cole              | Talk             | 9.08             | Scientist                            |
| Subway Surfer     | Emotion stickers | 9.10             | Superhero                            |
| Evan              | Talk             | 9.43             | Vet                                  |
| Elsa S            | Talk             | 10.58            | Princess Elsa or shopkeeper          |
| Elsa W            | Emotion sticker  | 2.34             | Princess or ballerina                |
| Kai               | Talk             | 10.01            | Teacher                              |
| Katelyn           | Emotion stickers | 2.34             | Princess                             |
| Jessica           | Sandbox          | 19.02            | Doctor                               |
| Musa              | Sandbox          | 14.14            | Dolphin trainer or DJ                |
| Spiderman         | Sandbox          | 12.13            | Actor or farmer                      |
| Caitlyn           | Talk             | 12.02            | Vet or doctor                        |
| Harry Cain        | Sandbox          | 9.24             | RSPCA worker                         |
| De Gea            | Sandbox          | 6.38             | Football player                      |
| Lloyd             | Sandbox          | 4.57             | Not sure                             |
| Dafydd            | Talk             | 10.07            | Football, rugby or basketball player |
| Neymar            | Sandbox          | 10.33            | Builder or carpenter                 |
| Jack              | Talk             | 5.15             | Not sure                             |

<sup>8</sup> All the LACYP's names in this report are fictitious. Pseudonyms were selected by the participants to maintain their anonymity.

## 11-16 year olds – Demographics

| Name <sup>9</sup> | Gender | Age | Ethnicity | First Language | Placement types           | No. of placements | Educational experience                 |
|-------------------|--------|-----|-----------|----------------|---------------------------|-------------------|--|
| Alesha            | F      | 16  | White     | English        | Foster Care               | Data missing      | Mainstream school; Special school; PRU |
| Jazz              | F      | 11  | White     | English        | Foster Care               | Data missing      | Mainstream school                      |
| Bishop            | M      | 11  | White     | English        | Foster Care               | 9                 | Mainstream school                      |
| Conner            | M      | 13  | White     | English        | Foster Care               | 3                 | Mainstream school                      |
| Hulk              | M      | 11  | White     | English        | Foster Care               | 2                 | Mainstream school                      |
| Roxy              | F      | 12  | White     | English        | Foster Care               | 1                 | Mainstream school                      |
| Thor              | M      | 14  | White     | English        | Foster Care               | lots              | Mainstream School                      |
| Bob               | M      | 15  | White     | English        | Foster Care               | 3                 | Mainstream school                      |
| Jeff              | M      | 16  | White     | English        | Foster Care               | 1                 | Mainstream school                      |
| Imogen            | F      | 11  | White     | English        | Foster Care               | 3                 | Mainstream school                      |
| Isabelle          | F      | 11  | White     | English        | Foster Care               | 5                 | Mainstream school                      |
| Messi             | M      | 11  | White     | English        | Foster Care; Kinship Care | 1                 | Mainstream school                      |
| Bob               | F      | 12  | White     | Welsh          | Foster Care               | 2                 | Mainstream school                      |
| Ryan              | M      | 14  | White     | Welsh          | Foster Care               | 2                 | Mainstream school                      |
| Suarez            | M      | 15  | White     | English        | Foster Care               | 6                 | Mainstream school                      |
| Gareth            | M      | 13  | White     | Welsh          | Foster Care               | 1                 | Mainstream school                      |
| Jeffrey           | M      | 12  | White     | English        | Foster Care               | 2                 | Mainstream school                      |

<sup>9</sup> All the LACYP's names in this report are fictitious. Pseudonyms were selected for the participants to maintain their anonymity.

*11-16 year olds – Research Activities and Aspirations*

| <b>Name<sup>10</sup></b> | <b>Interview type</b> | <b>Interview length</b> | <b>Aspiration</b>             |
|--------------------------|-----------------------|-------------------------|-------------------------------|
| Alesha                   | Sandbox               | 28.34                   | Childcare or vet's assistant  |
| Jazz                     | Sandbox               | 21.15                   | Policewoman                   |
| Bishop                   | Sandbox               | 34.15                   | Army                          |
| Conner                   | Sandbox               | 24.59                   | Army                          |
| Hulk                     | Talk                  | 14.42                   | Superhero or architect        |
| Roxy                     | Sandbox               | 30.23                   | Police officer                |
| Thor                     | Sandbox               | 14.30                   | Superhero or policeman        |
| Bob                      | Talk                  | 32.48                   | Mechanic or work with animals |
| Jeff                     | Sandbox               | 18.35                   | Chef or army                  |
| Imogen                   | Sandbox               | 20.30                   | Teacher or horse rider        |
| Isabelle                 | Sandbox               | 20.30                   | Hairdresser                   |
| Messi                    | Sandbox               | 12.45                   | PE teacher                    |
| Bob                      | Talk                  | 13.27                   | Work in a cafe                |
| Ryan                     | Talk                  | 19.37                   | Hotel owner or chef           |
| Suarez                   | Talk                  | 15.26                   | Chef or army                  |
| Gareth                   | Sandbox               | 12.13                   | Policeman                     |
| Jeffrey                  | Talk                  | 19.25                   | Army or work with animals     |

<sup>10</sup> All the LACYP's names in this report are fictitious. Pseudonyms were selected by the participants to maintain their anonymity.

16+ focus groups

| Gender | Age | Ethnicity                        | First Language | Placement types                                   | No. of placements | Education type  |
|--------|-----|----------------------------------|----------------|---|-------------------|---|
| M      | 25  | White                            | English        | Foster Care;<br>Residential Care                  | 6                 | Special School;<br>College  |
| M      | 18  | White                            | English        | Foster Care                                       | 2                 | Mainstream school,<br>PRU; College  |
| F      | 21  | White                            | English        | Foster Care;<br>Residential Care;<br>Kinship Care | 12                | Mainstream school,<br>PRU; College; YOI;<br>Home                            |
| F      | 17  | White                            | English        | Foster Care                                       | 20                | Mainstream school,<br>PRU; College;<br>Special School; Home                 |
| M      | 23  | White                            | English        | Foster Care                                       | 6+                | Mainstream School   |
| F      | 17  | White                            | English        | Foster Care                                       | data missing      | Mainstream school,<br>PRU; College; YOI;<br>Special School; Home            |
| F      | 17  | White                            | English        | Foster Care                                       | 24                | Mainstream school,<br>Residential Children's<br>home; PRU; College;<br>Home |
| M      | 17  | White                            | English        | Foster Care                                       | 6                 | Mainstream School;<br>College   |
| M      | 16  | Mixed White &<br>Black Caribbean | English        | Foster Care                                       | 10                | Mainstream School;<br>Home; College   |
| M      | 27  | White                            | English        | Foster Care                                       | 4                 | Mainstream School;<br>College   |
| M      | 20  | White                            | English        | Foster Care;<br>Residential Care                  | 5                 | Mainstream school;<br>College   |
| F      | 21  | White                            | English        | Foster Care;<br>Residential Care                  | unsure            | Mainstream school;<br>College; University                                   |
| F      | 21  | White                            | English        | Foster Care;<br>Residential Care                  | 7                 | Mainstream school;<br>College   |
| M      | 21  | White                            | English        | Foster Care;<br>Residential Care;<br>Kinship Care | 20                | Mainstream school;<br>College   |
| M      | 16  | White                            | English        | Foster  | 11                | Mainstream school;  |

|   |    |       |                 |  |              |  |
|---|----|-------|-----------------|--|--------------|--|
|   |    |       |                 | Care;<br>Residential<br>Care                               |              | College  |
| M | 23 | White | English         | Foster<br>Care   | unsure       | Mainstream school  |
| F | 25 | White | English         | Foster<br>Care;<br>Residential<br>Care                     | unsure       | Mainstream school;<br>Special School;<br>Residential Children's<br>home; College |
| F | 16 | White | English         | Foster<br>Care;<br>Residential<br>Care;<br>Kinship<br>Care | 11           | Mainstream School  |
| F | 20 | White | English         | Foster<br>Care   | 20+          | Mainstream school  |
| M | 20 | White | English         | Foster<br>Care;<br>residential<br>care;<br>kinship<br>care | 20           | Mainstream school;<br>college  |
| M | 27 | White | Data<br>missing | Data<br>missing  | Data missing | Data missing   |
| F | 20 | White | English         | Foster<br>Care   | 2            | Mainstream school;<br>home schooled  |
| F | 18 | White | English         | Residential<br>Care  | Data missing | Mainstream school;<br>PRU; Residential<br>children's home; YOI,<br>college       |
| M | 18 | White | English         | Foster<br>Care   | 1            | Mainstream school;<br>college  |
| M | 18 | White | English         | Foster<br>Care;<br>Residential<br>Care                     | unsure       | Mainstream school;<br>college  |
| M | 16 | White | English         | Foster<br>Care   | Data missing | Special School   |

*Higher Education students*

| Gender | Age | Ethnicity | First Language | Placement types                      | No. placements | Education Type                               |
|--------|-----|-----------|----------------|--------------------------------------|----------------|--|
| F      | 21  | White     | English        | Foster Care;<br>Semi-<br>independent | 5              | Mainstream school; college; University       |
| F      | 21  | White     | English        | Foster Care                          | 2              | Mainstream school and sixth form; University |

## Annex G: Consent form (foster carers)

I understand that ..... will be participating in a study about looked after children's experiences of education. The research team will audio-record what my child says during an interview or activity (the researchers will ask if this ok before recording anything).

I understand that my child's participation in this study is entirely voluntary and that they can withdraw at any time without giving reasons. On the day, the researchers will seek verbal consent from my child to take part in the research.

I understand that me and my child are free to ask any questions at any time. If for any reason they experience discomfort during participation, they are free to withdraw. You and your child can discuss any concerns with Cardiff University researchers, Fostering Network staff, or both.

I understand that the information provided by my child will be held anonymously and used solely for the purposes of research. However, if my child discloses information regarding harm to themselves or others, the research team will have to report this to the relevant authority.

[insert for 11-16 year old events] I understand that there will be filming on the day, but my child does not have to take part in this. Children and young people who are filmed will not be identifiable in the final film.

I understand that in accordance with the Data Protection Act, information collected as part of the research will be retained for a minimum of five years following the completion the research. No names, addresses or other identifying features will be stored. Information from the interviews may be used in a report for Welsh Government, and in academic journals or presentations, but this information will remain anonymous.

I, \_\_\_\_\_ (Please PRINT name)

give my consent and permission for

\_\_\_\_\_ (Print name of child)

to participate in a study conducted by CASCADE (Cardiff University)

Signed:

Date:

## **Annex H: Consent form (children)**

### ***Children's consent form: Looked after children and education research***

**I am a researcher from Cardiff University and I am trying to understand children's views about education. So I would like to ask you some questions about school and about what you would like to be or do when you're older. I would like to record our conversation using this recorder. Do you have any questions?**

**This form gives you the chance to say you agree to take part, you can read it on your own or I can read it with you.**

I understand that I am taking part in some research and I have been given a chance to ask questions about it.

I understand that I do not have to talk to the researchers and can go to a different activity at any time without giving a reason.

I understand that I can take part in some activities but not others if I don't want to.

I understand that I don't need to answer all the researcher's question.

I understand that what I talk about will be recorded and some of what I say might be used in a report, but my real name will not be used so nobody reading it will know who I am.

I understand that what I say will stay private unless I talk about something that makes the researcher think I am in danger, or another child is in danger. If this happens then I understand the researcher will have to tell other adults about it.

Signed

Date

## **Annex I: Interview schedule (children)**

### Experience:

- Tell /show/draw me a time when you had a good day at school  
What happened? Who was there? What adults were there? What did they do? What did your friends do? What were you doing in class?
- Also ask about a bad day, and if they don't have any good days to recall you can ask them about the bad day but then ask them to imagine and tell/show/draw what a good day at school would be like
- Or more straightforward and broad –can you show/tell/draw me what school is like?

### Exploring more specific things:

- What's homework like? Who helps you? Where do you do it?
- Is there someone at school that helps you? A teacher or other adult?  
How do your friends help you or do you help them?
- Have you moved schools? What happened?
- What's your best subject? What do you like about it? What's your worst subject? What holds you back?
- What has made you feel proud at school?

### Aspiration:

#### Questions like:

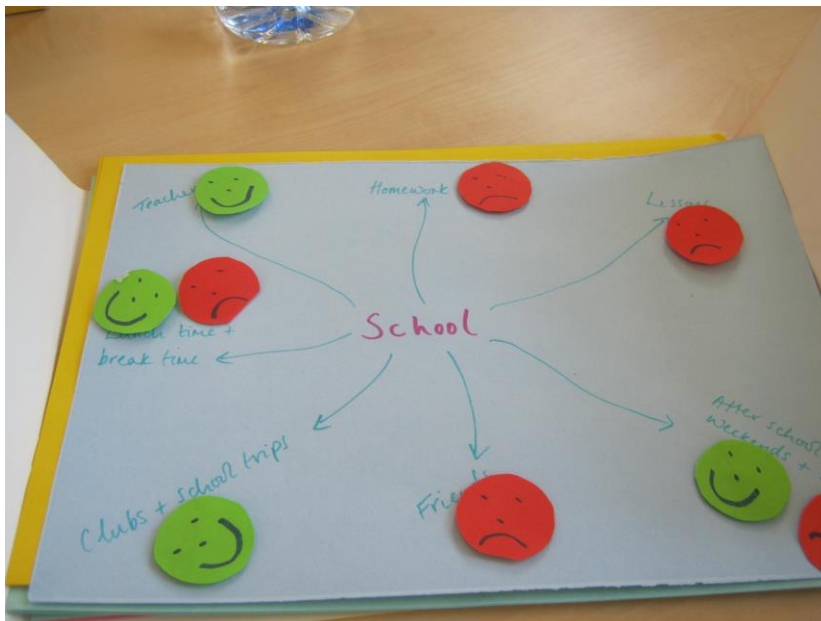
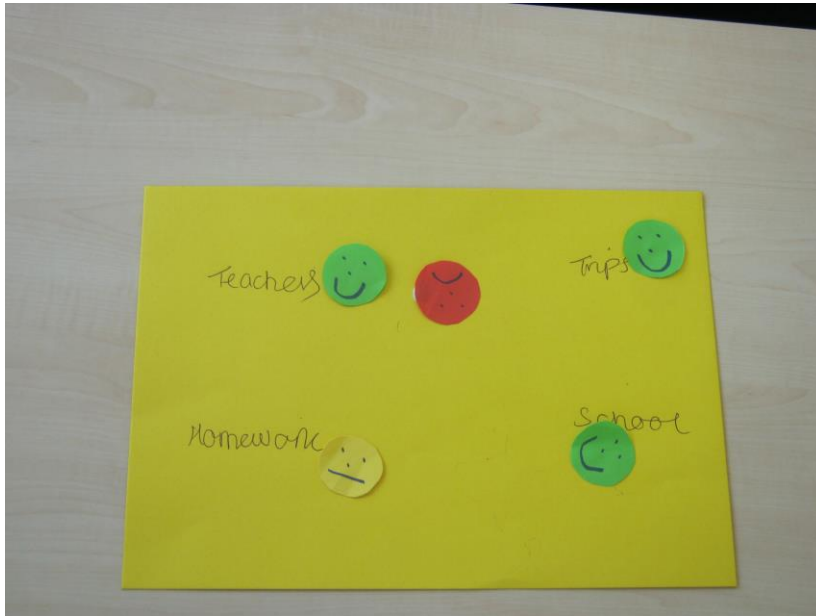
- What would you like to be/do when you're older?
- What would a bright future look like or be like?
- If you woke up tomorrow and could be anything or do anything, what would it be? What would it look like?

#### To explore further you could ask things like:

- Where will you live? What would you like about living there? Who will your friends be? Who will you live with? What would you do on the weekends? What hobbies would you have?
- What would you like about being a... (footballer, ballerina, cleaner, mum, archaeologist)? Why do you want to do that/be that?
- Is there anything else you might like to do?
- How will you get there/achieve this? What would help you become a ....?
- What don't you want to do/where don't you want to live when you are older?



## Annex J: Emotion sticker images





## **Annex L: Consent form (16+)**

### **Looked after children and young people and education research: consent form**

I consent to take part in a focus group about my opinions and experiences of education. The purpose of the group discussion has been explained to me and I have had the opportunity to ask questions.

I agree for this discussion to be audio-recorded.

I understand that my participation is voluntary and I may leave at any time. I also understand that if I decide later that I do not want what I have said being used in the research I can withdraw it (up until the research report is handed over to the Welsh Government at the end of July 2015).

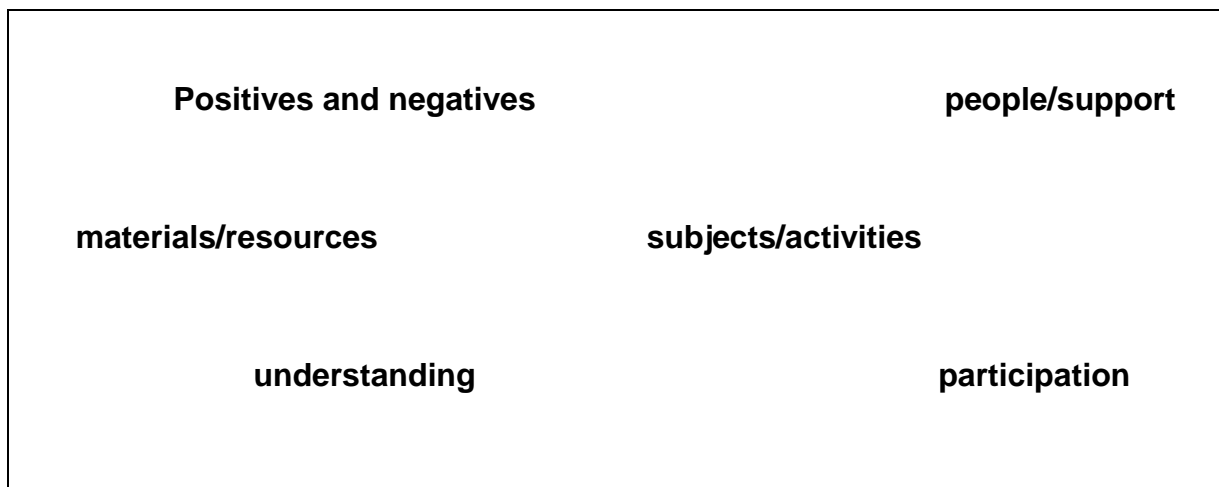
I understand that the information that I provide during the focus group may be used in a report for Welsh Government and in research articles but it will be made anonymous so that I cannot be identified. I understand that in accordance with the Data Protection Act, this information will be kept for a minimum of five years following the completion of the research project.

I agree to keep the information discussed by the group confidential. I understand that the researchers will also keep the group discussion confidential but if I disclose any information that suggests myself or another child or young person might be at risk, the researchers will have to inform the relevant authorities.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

## Annex M: Focus group questions designed with peer researchers



1. “First we’d like to hear generally about what education was like for you, including the **positives and negatives**. So would anyone like to talk a bit about what was education like? Or if you’re still in education, what it’s like now?”

[if quiet and nobody talking, peer researchers try introducing a bit about your experience]

[if you get lots of negatives, prompts like:

“Does anyone have any positive experiences of education?”

“Can you remember a good day at school? What happened?”

“What would have made education more positive for you?”

“What would have helped you?”

“If you’re still in education – how is it?” “What is good, and bad?”

2. “Ok let’s talk about specific **people and support** now...who impacted your education (good and bad)?”

[Prompts]

“Were there any teachers that really helped you?”

“Did your foster carers/residential home staff/support worker help you or encourage you?”

“Were you supported with homework or to choose options or aim for certain grades?”

“What about your social worker/s?”

“What about friends or other children that were in your school – what role did they play?”

“If you’re still in education, who supports you now?”

“How did these people help (or hold you back)” “what could they have done differently?”

“If you’re still in education. Who supports you now?” “Did you get support to stay in education beyond school?”

3. “What about **materials and resources** – did you have the right things to succeed like.....books, a computer, calculators, revision guides etc.?”

[Prompts]

“What kinds of resources would be important to children in care, to help them in education?”

“Looking back, what materials would have helped you?”

4. “Were people throughout your education **understanding** about your situation?”

[Prompts]

“How did teachers and other school staff handle you being in care?”

“Does anyone have any positive examples of how school staff were understanding? Or negative ones?”

“What about other children?”

“Were your social worker/s understanding about what school was like?”

“Did anyone understand about moving placements, or moving schools?” “if not, what did they do or say?” “If they were understanding, what did they do or say?”

“If you’re still in education, how do college or University staff understand what it is like for you to have been in care?” “What about other students?”

5. “What about things like **subjects** and **extra-curricular activities**?”

[Prompts]

“What were your favourite and worst **subjects**? What was so good or bad about them?”

“What about **extra activities**, trips or teams? Was anyone part of these sort of things?” “Why? Why not?”

“Were you supported or encouraged to be part of teams or join in other activities?”

“If you’re still in education, do you do any extra-curricular activities, like volunteering or being part of groups at college or Uni?”

6. “What were the things that helped you to **participate** in education – or what were the things that stopped you participating?”

[Prompts]

“Did you get encouragement and support from your carers to participate in school?”

“Were the school flexible? Were carers and social workers flexible?”

“Did teachers, carers and workers have high expectations of you? Or low ones?” “Did this make a difference to how you were in class? Or how much work you did?”

“If you’re still in education, what encourages you to stay there and continue to participate in education?”

## **Annex N: Activities used in 16+ focus groups**

### Bombs and Shields

- There are pieces of paper cut out in the shape of bombs and shields. Each young person has a few of each to hold and talk or write on.
- Bombs – was there anything you experienced during your education that made you cross or angry or about to explode?
- Shields – who or what did you have to protect you or help you avoid your bombs? If you can't think of anything, what could have helped?
- Bombs can also be used to represent barriers and shields to represent things that helped in school and learning/education.

### Balloon Exercise – 'the perfect education'

Take the flip chart with the drawings on it. In this order, beginning with...

The balloon: on the balloon write down all the things participants say about what the perfect education would look like and feel like for each of them. The schools? The learning? What subjects? Where? How big are the classrooms? What's the school or place layout and what does it feel like? Who are the students? Other questions like these.

The Basket: on the basket write down what participants say about who needs to be involved or feature in this perfect education. Can be anyone. Why?

The poles and pegs: over the poles write down all the things that can get in the way of the perfect education. What might hold you back?

The clouds: looking ahead, what things or people could blow the perfect education off course, where might it go a bit wrong?

The sun: what things would really make it fly? What could make it even better?

If you have time:

...invite people to think about how this was different to their own experiences and why...

Is there a job you would like to do?

What stuff do you like doing for fun?

In your dreams... what would you like to be?

Use the picture sheets as a prop for thinking about each one of the above in turn. Try to generate discussion. Ask them why they chose those jobs or dreams? What do they like about them? When they were little, what job did they want to do, or what dream did they have, if anything?

Steps to Success

(...after what job and what do you want to be activity)

Have a piece of flip chart paper (or two joined together to make it bigger). Draw steps on it and stick the trophy image on the top step.

Invite the young people to think about what things would help them to get to the job they want or the person they want to be. With each suggestion or at the end, ask them who they think should or could help them move up the steps?



## Who should do what...

In a big group...

5 sheets or flip chart – one each for Schools; LACE teams; Carers; Social Care teams; Welsh Government.

You need pens and post-it notes.

Ask them the most important things that need to happen or change or continue, to help raise educational attainment (use different phrasing if possible!) for children and young people who are looked after.

Write it down, or they write it down. With each point, ask them who needs to do it, and stick it on the most relevant flip chart sheet (as above).

If a sheet has nothing on it, ask them what that organisation should be doing.

## FINAL THING:

Ask them what they think should be done with the findings – how should it change practice or policy?

## Vignette questions

On the coloured post-its or card, invite people to write down themselves, or tell you and you write down, in response to questions like...

(On green): what's good about this? Why might it work well? What do you like about it? Would you have liked this?

(On red): what's bad about this? What don't you like? Why might it not work? Why wouldn't you have liked this?

(On yellow): what things might need to be taken into account to make it work?  
what are the things that could trip it up if they aren't part of it?

(On blue): how could this be better? What or who could make it better?

\* ask them to think of their own experiences in their answers – have they been involved in anything like this?

\*Remember – there may be nothing good, and nothing bad... there has to be something about each one though!

## **Annex O: Interview schedule (Higher Education students)**

### Looking back

- What was school like?
- What were the positives and negatives?
- Who supported you/didn't support you? Teachers? Social workers and others? Friends? Carers?
- What were your favourite and least favourite subjects?
- Did you have ambitions to continue with education post-16?
- When did you start thinking about University? Were you encouraged or supported? By carers? Social workers? Teachers? College staff?
- How did you get to University? What steps did you take to get there?
- What was applying to University like? How did you choose where to go? Were you clear about financial support?

### Currently

- What is University like? What do you enjoy about it/what is hard?
- What are you studying? Where do you live?
- What is it like being a care leaver in Higher Education? Are you in touch with your social worker? What are University support and academic staff like?

### The future

- What's next? What are your plans after you graduate?
- Where do you want to live? What do you want to do? What support do you need to realise your ambitions post-University?

## Opinions

- What the barriers are for young people in care attending higher education? What could make more young people in care consider University and what could be done to help them get to University?
- What role should carers play? And teachers? And Government?

## Annex P: Summary of Intervention Setting, Delivery Agent, Timing and Duration

| Study  | Country                           | Intervention   | Population  | Delivery Agent                       | Duration                               | Timing  | Outcomes  |
|--|-----------------------------------|--|---|--------------------------------------|--|---|---|
| <b>Clark et al. (1998)</b>   | Texas, USA;                       | <b>Fostering Individualized Assistance Program (FIAP)</b><br><br>Non-standardized, wraparound services coordinated by family specialist. | <i>Care Placement:</i> Foster care;<br><br><i>Age:</i> 7-15 yrs;  | Family specialist;                   | Intervention phased in over 15 months; | Non-standardised  | Permanency and placement changes;<br><br>Runaway;<br><br>incarceration;<br><br>School absences;<br><br>Dropouts;<br><br>Suspensions;<br><br>School-to school movement;<br><br>Emotional adjustment;<br><br>Behavioural adjustment |
| <b>Courtney et al. (2008);<br/><br/>Zinn &amp; Courtney (2014)</b>                 | California, USA;<br><br>2003-2006 | <b>Early Start to Emancipation Preparation (ESTEP)</b><br><br>One-to one tutored curriculum.   | <i>Care Placement:</i> Foster care; Kinship care; Group Home; Other residential care;<br><br><i>Age:</i> 14-15 yrs; | Undergraduate and graduate students; | Not reported;                          | Twice weekly;<br><br>≤50 hours tutoring;<br>Average receipt of 18h of math tutoring and 17 hours of reading tutoring;                             | Reading and maths skills;<br><br>Access to other educational services and resources;  |
| <b>Flynn et al. (2011) ;<br/><br/>Flynn et al. (2012);<br/><br/>Marquis (2013)</b> | Ontario, Canada;<br><br>2008-2009 | <b>Teach Your Children Well (TYCW)</b><br><br>One-to-one tutored curriculum.   | <i>Care Placement:</i> Foster care;<br><br><i>Age:</i> 6-13 yrs;  | Foster carers;                       | 30 weeks;                              | 3 hours per week<br><br>(2 hours one-to-one direct instruction; 30mins reading aloud by foster child; 30 minutes self-paced instruction in maths) | Reading and maths skills;   |

|                                      |                               |   |  |   |             |  |   |
|--------------------------------------|-------------------------------|---|--|---|-------------|--|---|
| <b>Green et al. (2014)</b>           | England;<br>2005-2008         | <b>Multidimensional Treatment Foster Care (MTFC-A)</b><br><br>Intensive social learning delivered by specialist foster parents. | <i>Care Placement:</i><br>Foster care;<br>Residential care; Secure unit;<br><br><i>Age:</i> 10-17 yrs; | Foster carers;  | 9 months;   | Non-standardised   | Mental health, social and physical functioning;<br><br>Scholastic/language skills;<br><br>Education attendance;<br><br>Incidences of offending;                                 |
| <b>Harper (2012)</b>                 | Ontario, Canada;<br>2011-2012 | <b>Teach Your Children Well (TYCW) (30 weeks)</b><br><br>Small group tutored curriculum.  | <i>Care Placement:</i><br>Foster care;<br>Kinship care;<br><br><i>Age:</i> 6-13;                       | University student volunteers;  | 30 weeks;   | 2 hours per week;  | Reading and maths skills;<br><br>Social and emotional competencies.<br><br>Attention deficit hyperactivity disorder;<br><br>Self-perception;<br><br>Academic competency skills; |
| <b>Harper &amp; Schmidt (2012)</b>   | Ontario, Canada;<br>2010-2011 | <b>Teach Your Children Well (TYCW) (25 weeks)</b><br><br>Small group tutored curriculum.  | <i>Care Placement:</i><br>Foster care;<br>Kinship care;<br><br><i>Age:</i> 6-13 yrs;                   | University student volunteers;  | 25 weeks;   | 2 hours per week;  | Reading and maths skills;   |
| <b>Leve &amp; Chamberlain (2007)</b> | Oregon, USA;<br>1997-2003     | <b>Multidimensional Treatment Foster Care (MTFC)</b><br><br>Intensive social learning delivered by specialist foster parents.   | <i>Care Placement:</i><br><br>Girls within the juvenile justice system;<br><br><i>Age:</i> 13-17 yrs;  | Foster carers;<br>Individual therapist;<br><br>Skills trainer;<br>Family therapist; | ≤ 5 months; | Non-standardised but does include weekly meeting with therapist; | Number of days in locked settings;<br><br>Homework completion;<br><br>School attendance;  |
| <b>Lipscombe et al. (2013)</b>       | USA;<br>2002-2004             | <b>Head Start</b><br><br>Non-standardized, wraparound   | <i>Care Placement:</i><br><br>General population of disadvantaged                                      | Non-standardised;   | 12 months;  | Non-standardised;  | Pre-academic skills;<br><br>Teacher-child relationship;   |

|   |                                    |   |   |  |                   |  |   |
|---|------------------------------------|---|---|--|-------------------|--|---|
|   |                                    | services.   | ed children.<br>Non-parental care a subgroup of larger study sample;<br><br><i>Age: 3-4 yrs;</i>                            |  |                   |  | Externalizing behaviour problems;   |
| <b>Pears et al. (2013)</b>                | Pacific Northwest, USA;            | <b>Kids in Transition to School (KITS)</b><br><br>Classroom-based school readiness groups for children;<br>Caregiver group for foster carers; | <i>Care Placement:</i> Foster care;<br><br><i>Age:</i> ≤6 yrs;  | <i>School readiness group:</i> Teachers;<br><br><i>Caregiver group:</i> Trained facilitators;  | 4 months;         | <i>School readiness group:</i> 2 hours, twice weekly in school readiness phase, 2 hours weekly in transition phase;<br><br><i>Caregiver group:</i> 2 hours every two week; | Early literacy;<br><br>Prosocial skills;<br><br>Self-regulatory skills  |
| <b>Trout et al. (2013)</b>                | Midwest; USA;<br><br>2009-2012;    | <b>On the Way Home (OTWH)</b><br>Youth and family transition support coordinated by family consultant;  | <i>Care Placement:</i> Young people with or at risk of disabilities leaving residential care.<br><br><i>Age:</i> 13-18 yrs; | <i>Check &amp; Connect:</i> Family consultant;<br>School mentor;<br><br><i>Common Sense Parenting:</i> Family consultant;<br><br><i>Homework Support:</i> Parents; | 12 months;        | Approx. 138 hours;   | Care placement stability;<br><br>Educational placement stability;   |
| <b>Zetlin, Weinberg &amp; Kimm (2004)</b> | California, USA;<br><br>1997-1999; | <b>Education Specialist</b><br><br>Non-standardized, wraparound services coordinated by educational specialist                                | <i>Care Placement:</i> Foster care;<br><br><i>Age:</i> 5-17 yrs;  | Education specialist;  | Non-standardised; | Non-standardised;  | Reading and maths skills;<br><br>GPA;<br><br>School attendance;<br><br>Number of schools attended;<br><br>Special education status; |

## Annex Q: Risk of Bias Assessment

| Study  | Random Sequence Generation | Allocation Concealment | Blinding of Participants or Personnel | Blinding of Outcome Assessment | Incomplete Outcome Data | Selective Outcome Reporting |
|--|----------------------------|------------------------|---------------------------------------|--------------------------------|-------------------------|-----------------------------|
| Clark et al. (1998)  | Low                        | Unclear                | High                                  | Unclear                        | Unclear                 | Unclear                     |
| Courtney et al. (2008);<br>Zinn & Courtney (2014)              | Unclear                    | Unclear                | High                                  | Unclear                        | High                    | Unclear                     |
| Flynn et al. (2011);<br>Flynn et al. (2012);<br>Marquis (2013) | Low                        | Unclear                | High                                  | Unclear                        | High                    | Unclear                     |
| Green et al. (2014)  | Low                        | Low                    | High                                  | Low                            | High                    | Unclear                     |
| Harper (2012)  | Low                        | Unclear                | High                                  | Unclear                        | Low                     | Unclear                     |
| Harper & Schmidt (2012)  | Low                        | Unclear                | High                                  | Unclear                        | Low                     | Unclear                     |
| Lipscombe et al. (2013)  | Unclear                    | Unclear                | High                                  | Unclear                        | Unclear                 | Unclear                     |
| Trout et al. (2013)  | Unclear                    | Unclear                | High                                  | Unclear                        | Low                     | Unclear                     |
| Leve & Chamberlain (2007)                                      | Unclear                    | Unclear                | High                                  | Unclear                        | Low                     | Unclear                     |
| Pears et al. (2013)  | Unclear                    | Unclear                | High                                  | Low                            | Low                     | Unclear                     |
| Zetlin, Weinberg & Kimm (2004)                                 | Unclear                    | Unclear                | High                                  | Unclear                        | High                    | Unclear                     |



## Annex R: Outcomes of Intervention Evaluation

| Intervention   | Intervention Group  | Comparator Group  | Process Evaluation                                     | Post-baseline Outcome Reporting | Educational Outcome Measures   | Educational Outcomes   | Covariates    |
|--|---|---|--|---------------------------------|--|--|---------------|
| <b>Fostering Individualized Assistance Program (FIAP)</b><br><br>Non-standardized, wraparound services coordinated by family specialist. | <i>Care Placement:</i><br>Foster care;<br><br><i>Age:</i> 7-15 yrs;<br><br>n=54   | <i>Care Placement:</i><br>Foster group home;<br>Emergency shelter group home;<br>Detention or private child-care facility;<br><br><i>Age:</i> 7-15 yrs;<br><br>n=77 | Not reported;  | 42 months;                      | Extreme school absences (>40 per cent of school days missed);<br><br>School drop-out;<br><br>Days on suspension (>1 per cent of school days);<br><br>Extreme number of school-to-school movements (>3/year);   | Extreme school absences: ns;<br><br>School dropout: ns;<br><br>Days on suspension:<br>OR=2.5, p<0.05;<br><br>Extreme number of school-to-school movements: ns;   | Not reported; |
| <b>Early Start to Emancipation Preparation (ESTEP)</b><br><br>One-to one tutored curriculum.   | <i>Care Placement:</i><br>Foster care;<br>Kinship care; Group Home;<br>Other residential care;<br><br><i>Age:</i> 14-15 yrs;<br><br>n=277 | <i>Care Placement:</i><br>Foster care;<br>Kinship care; Group Home;<br>Other residential care;<br><br><i>Age:</i> 14-15 yrs;<br><br>n=252                           | Reach and receipt;<br><br>Adherence;<br>Contamination; | Avg. 26.8 months;               | Woodcock Johnson Tests of Achievement III items (Letter word identification; Calculation; Passage comprehension);<br><br>Grade level completed; GPA;<br><br>High school diploma or GED;<br><br>School behaviours (Getting along with teachers; paying attention in school; getting your homework done; Getting along with other students; arriving on time for class); | Letter word identification:<br>E.S.=0.10;<br><br>Calculation:<br>E.S.=0.01;<br><br>Passage comprehension:<br>E.S.=0.01;<br><br>Grade level completed:<br>E.S.=0.03;<br><br>GPA: E.S.=0.03;<br><br>High school diploma or GED:<br>E.S.=0.01;<br><br>School behaviour:<br>E.S.=0.05; | Not reported; |

|  |  |  |   |           |   |  |                  |
|--|--|--|---|-----------|---|--|------------------|
| <b>Teach Your Children Well (TYCW)</b><br><br>One-to-one tutored curriculum.   | <i>Care Placement:</i><br>Foster care;<br><br>Age: 6-13 yrs;<br><br>n=42                                 | <i>Care Placement:</i><br>Foster care;<br><br>Age: 6-13 yrs;<br><br>n=35                                 | Reach and receipt;<br><br>Adherence ;<br>Acceptability; | 30 weeks; | Wide Range Achievement Test (WRAT-4) (Word reading; Sentence comprehension; Reading composite; Spelling; Math computation);       | Word reading: E.S.=0.19;<br><br>Sentence comprehension: E.S.=0.38;<br><br>Reading composite: E.S.=0.29;<br><br>Spelling: E.S.=0.08; Math Computation: E.S.=0.46. | Baseline scores; |
| <b>Multi-dimensional Treatment Foster Care (MTFC-A)</b><br><br>Intensive social learning delivered by specialist foster parents. | <i>Care Placement:</i><br>Foster care; Residential care; Secure unit;<br><br>Age: 10-17 yrs;<br><br>n=20 | <i>Care Placement:</i><br>Foster care; Residential care; Secure unit;<br><br>Age: 10-17 yrs;<br><br>n=14 | Adherence ;   | 12 months | Health of the Nation Outcome Scales for Children and Adolescents (HoNOSCA) (Scholastic/language skills);<br><br>School attendance | Scholastic/language skills:<br><br>OR=0.6(95 per centCI=0.15-2.4)<br><br>School attendance: OR=2.5(95 per centCI=0.48-13.1)                                      | Baseline scores; |
| <b>Teach Your Children Well (TYCW) (30 weeks)</b><br><br>Small group tutored curriculum.   | <i>Care Placement:</i><br>Foster care; Kinship care;<br><br>Age:6-13;<br><br>n=51                        | <i>Care Placement:</i><br>Not reported;<br><br>Age:6-13;<br><br>n=50                                     | Adherence ;   | 30 weeks  | Wide Range Achievement Test (WRAT-4) (Word reading; Sentence comprehension; Spelling; Math computation);                          | Word reading: E.S.=0.40;<br><br>Sentence comprehension: E.S.=0.15, p=ns;<br><br>Spelling: E.S.=0.25 p=0.02;<br><br>Math computation E.S.=0.34, p=0.04;           | Baseline scores; |
| <b>Teach Your Children Well (TYCW) (25 weeks)</b><br><br>Small group tutored curriculum.   | <i>Care Placement:</i><br>Foster care; Kinship care;<br><br>Age:6-13 yrs;<br><br>n=35                    | <i>Care Placement:</i><br>Not reported;<br><br>Age:6-13 yrs;<br><br>n=35                                 | Adherence ;   | 25 weeks  | Wide Range Achievement Test (WRAT-4) (Word reading; Sentence comprehension; Spelling; Math computation);                          | Word reading: E.S.=0.42, p=0.002;<br><br>Sentence comprehension: E.S.=0.095, p=ns;<br><br>Spelling: E.S.=0.38,   | Baseline scores; |

|  |   |  |               |                              |  |  |  |
|--|---|--|---------------|------------------------------|--|--|--|
|  |   |  |               |                              |  | p=0.004;<br>Math computation<br>E.S.=0.26, p=ns;   |  |
| <b>Multi-dimensional Treatment Foster Care (MTFC)</b><br><br>Intensive social learning delivered by specialist foster parents. | <i>Care Placement:</i><br><br>Girls within the juvenile justice system;<br><br><i>Age:</i> 13-17 yrs;<br><br>n=37 | <i>Care Placement:</i><br><br>Group care;<br><br><i>Age:</i> 13-17 yrs;<br><br>n=44  | Not reported; | 3-6 months<br><br>12 months; | Homework completion (homework on 3 days in one week period);<br><br>School attendance (Frequency of attending school);                                       | Homework completion 3-6 months: p<0.05;<br><br>Homework completion 12 month: p<0.01;<br><br>School attendance: p<0.01;   | Baseline scores;   |
| <b>Head Start</b><br><br>Non-standardized , wraparound services.   | <i>Care Placement:</i><br><br>Non-parental care;<br><br><i>Age:</i> 3-4 yrs;<br><br>n=154                         | <i>Care Placement;</i><br><br>Non-parental care;<br><br><i>Age:</i> 3-4;<br><br>n=99 | Not reported; | 6 months;<br><br>18 months;  | Woodcock Johnson Tests of Achievement III items (Letter word identification; Calculation; Passage comprehension);<br><br>Student Teacher Relationship Scale; | 6 months:<br><br>Pre-academic skills: S.E.=0.16, p=0.02; Student-teacher relationship: E.S.=0.30, p<.01);<br><br>18 months indirect effects:<br><br>Pre-academic skills: S.E.=0.12, p=0.05; Student-teacher relationship: E.S.=0.17, p=0.02; | Sex; Age; Special needs; Child book reading; Household income; Parenting/<br><br>caregiver style; change in child's caregiver; |

|   |  |  |                                       |   |   |  |   |
|---|--|--|---------------------------------------|---|---|--|---|
| <p><b>Kids in Transition to School (KITS)</b></p> <p>Classroom-based school readiness groups for children; Caregiver group for foster carers.</p> | <p><i>Care Placement:</i> Foster care; <i>Age:</i> ≤6 yrs; n=102</p>   | <p><i>Care Placement:</i> Foster care; <i>Age:</i> ≤6 yrs; n=90</p>  | <p>Reach and receipt; Adherence ;</p> | <p>2 months;</p>                                | <p>Dynamic Indicators of Basic Early Literacy Skills (DINELS) (Letter naming fluency; Initial sound fluency); Concepts about print; Caregiver rating of pre-reading skills;</p> | <p>Early literacy skills: E.S.=0.26;</p>   | <p>Gender; IQ or general cognitive ability; Type of foster care; Ethnicity; prior early childhood education experience;</p> |
| <p><b>On the Way Home (OTWH)</b></p> <p>Youth and family transition support coordinated by family consultant.</p>                                 | <p><i>Care Placement:</i> Young people with or at risk of disabilities leaving residential care. <i>Age:</i> 13-18 yrs; n=47</p> | <p><i>Care Placement:</i> Young people with or at risk of disabilities leaving residential care. <i>Age:</i> 13-18 yrs; n=41</p> | <p>Not reported;</p>                  | <p>3 months; 6 months; 9 months; 12 months;</p> | <p>Maintaining enrolment in school setting;</p>   | <p>Maintaining enrolment in school setting: OR=0.30, 95 per cent CI=0.12-0.75.</p>   | <p>Not reported;</p>  |
| <p><b>Education Specialist</b></p> <p>Non-standardized , wraparound services coordinated by educational specialist</p>                            | <p><i>Care Placement:</i> Foster care; <i>Age:</i> 5-17 yrs; n=60</p>  | <p><i>Care Placement:</i> Foster care; <i>Age:</i> 5-17 yrs; n=60</p>  | <p>Not reported;</p>                  | <p>24 months;</p>                               | <p>Maths test achievement scores; Reading test achievement scores; GPA; Daily attendance; Special education status; Number of schools attended during two year period;</p>      | <p>Maths test achievement scores: p=0.082; Reading test achievement scores: p=0.448; GPA: p=ns; Daily attendance: p&lt;0.03; Special education status: p&lt;0.02; Number of schools attended: p&lt;0.05;</p> | <p>Not reported;</p>  |