

Young People Transitioning from Out-of-home Care and Access to Higher Education: A Critical Review of the Literature

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Young people transitioning from out-of-home care are known to have poor educational outcomes compared to their non-care peers. Yet little is known about the experiences or needs of the small numbers of Australian care leavers who enter higher education. This article critically examines existing Australian and international research on the access of care leavers to higher education. A group of pre-care, in-care, transition from care and post-care factors are identified as either hindering or assisting care leavers to maximise their educational opportunities. Some specific policy and practice reforms are recommended to enhance opportunities for Australian care leavers to participate in and complete higher education.

■ **Keywords:** care leavers, higher education, disadvantage, policy and practice reform

Introduction

There are currently over 40,000 children and young people living in out-of-home care in Australia, which principally includes home-based care and residential care. It has been estimated that 3161 young people aged 15–17 years were discharged from out-of-home care in 2012–13 (Australian Institute of Health and Welfare, 2014).

Young people transitioning from out-of-home care are arguably one of the most vulnerable and disadvantaged groups in society. Compared to most young people, they face particular difficulties in accessing educational, employment, housing and other developmental opportunities. The social and economic costs associated with the current failure to provide leaving care support and post-care support to care leavers are significant, both for the individuals involved and the broader community (Mendes, Johnson, & Moslehuddin, 2011; Mendes, Pinkerton, & Munro, 2014).

Leaving care is formally defined as the cessation of legal responsibility by the state for young people living in out-of-home care (Cashmore & Mendes, 2008). In practice, however, leaving care is a major life event, and a process that involves transitioning from dependence on state accommodation and supports to self-sufficiency. Care leavers are not a homogeneous group, and have varied backgrounds and experiences in terms of the type and extent of abuse or neglect they have experienced, the age they entered care, their

cultural and ethnic backgrounds, their in-care experiences, their developmental stage and needs when exiting care, and the quantity and quality of supports available to them.

Too many care leavers, however, experience multiple disadvantages. First, many have experienced, and are still recovering from, considerable maltreatment and traumatic experiences (abuse and/or neglect of various forms) prior to entering care. Second, many young people have experienced inadequacies in state care, including poor quality caregivers, further abuse and neglect, and constant changes of placement, carers, schools and workers. Third, many care leavers can call on little, if any, direct family support or other community networks to ease their transition into independent living.

In addition to these major disadvantages, many young people currently experience an abrupt end, at 16–18 years of age, to the formal support networks of state care. That is, the state as corporate parent fails to provide the ongoing financial, social and emotional support and nurturing typically offered by families. This accelerated transition to independence of care leavers contrasts with the experience of most

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contemporary young people, who still live at home until at least their early 20s, and continue to receive social, practical, emotional and financial support into early adulthood (Vassallo, Smart, & Price-Robertson, 2009). Such an abrupt end to formal support and the lack of informal support have obvious ramifications for the ability of care leavers to continue with education and enhance their future prospects.

Within this paper we critically examine current research on the access of care leavers to participate in and complete higher education, and highlight the significant gap in knowledge about Australian care leavers. Our review targeted key local and international literature on care leavers' access to higher education, and was informed by the lead author's participation in the Transitions to Adulthood for Young People Leaving Public Care International Research Group (INTRAC), and the involvement of all three authors in a recent Australian Research Council grant application on the same topic. We begin with a review of the literature, which has established that poor educational outcomes are common for care leavers in Australia and internationally, and then proceed to outline those known factors that help and hinder educational success for this demographic. A review of international research about the participation of care leavers in higher education then follows, along with an overview of programmes designed to improve access. The limited Australian research in this area is noted, as is the need for further research. We conclude with an outline for a possible future research agenda.

Poor Educational Outcomes

Education, and particularly involvement in further and higher education, plays an important role in facilitating young people's wellbeing. The idea of wellbeing is a broad one and includes career prospects and earnings, physical and mental health, access to and participation in broader social and community relationships, self-esteem, and generally positive life outcomes. Those young people who do participate in tertiary education are therefore far less likely to experience manifestations of social exclusion, such as unemployment, poor self-esteem, ill-health, homelessness and imprisonment (Cashmore & Paxman, 2007; Creed, Tilbury, Buys, & Crawford, 2011; Day, Dworsky, Fogarty, & Damashek, 2011; Day, Riebschleger, Dworsky, Damashek, & Fogarty, 2012; Jackson & Cameron, 2012; Jurczynszyn, 2014; Jurczynszyn & Tilbury, 2012; Townsend, 2011).

The United Nations Guidelines for the Alternative Care of Children specifically urges that young people leaving care be provided with after-care support, including 'ongoing education and vocation training opportunities' (General Assembly of the United Nations, 2009, para. 131–136), and an associated document recommends additional financial support, including scholarships or fee elimination, for care leavers (Cantwell, Davidson, Elsley, Milligan, & Quinn, 2012). Yet there is universally a strong correlation between care experiences and poor educational attainment. Care

leavers tend to spend fewer years at school, are less likely to achieve qualifications, and face major barriers to participating in further and higher education (Blome, 1997; Cameron, Jackson, Hauari, & Hollingworth, 2012; Cashmore, Paxman, & Townsend, 2007; Jackson, 2007; Jones, 2010; Jurczynszyn, 2014; Mendis, 2013; Merdinger, Hines, Lemon Osterling, & Wyatt, 2005; Mitchell, 2013; O'Sullivan & Westerman, 2007; Pecora et al., 2006; Rogers, 2014; Stein, 2004).

In Australia, Cashmore and Paxman (2007) undertook a longitudinal study of young people leaving care in New South Wales, which involved four waves of interviews with a cohort of 47 young people discharged from wardship over a 12-month period in the early 1990s. Their study found that after 4–5 years out of care these young people were far less likely than their non-care peers to have completed Year 12 (42% compared to 80%). One in five did not complete Year 10. Three-quarters of them (30/41) had completed some further study after leaving school, but most of these courses were short-term and limited in application. Similarly, McDowall's study (2009) for the Create Foundation (the national office of which is in Sydney) surveyed the State and Territory Government Departments, and a total of 471 young people, consisting of 275 still in care and 196 who had left care. He reported that just over a third (35.3%) of the national survey of 196 care leavers aged over 18 years had finished Year 12, compared to 74 per cent of all 19-year-olds (McDowell, 2009, p. 55).

A study in Victoria by social work researchers and economists (Raman, Inder, & Forbes, 2005) estimated the costs of not supporting young people after they leave care. This study was based on a purposive sample of 60 young people aged 18–25 years: 30 young people in a 'positive outcome' group and 30 young people who were unemployed and disconnected and whose circumstances and outcomes were less positive. The researchers found that nearly half the young people left school before the age of 17 years, and only 13 per cent completed Year 12 (Raman et al., 2005, p. 21).

Studies in the UK show similar findings. For example, Biehal, Clayden, Stein and Wade (1995) reported that 50 per cent of their sample of 183 care leavers left school with no qualifications, and only three students attained three or more General Certificates of Secondary Education at grades A to C (Biehal et al., p. 58). Similarly, Broad (2005) reported that 80 per cent of their sample of 57 care leavers had left school by the age of 16 and most had not completed any examinations. However, there was an improvement in the proportion of care leavers entering further education after age 16 years, from 17.5 per cent in 1998 to 31 per cent in 2003.

Comparable findings have emerged in other jurisdictions too. In Ireland, Northern Ireland, Sweden, Israel, Germany, Russia, South Africa, Ghana and the USA, disparities similar to those in Australia and the UK were found between the educational outcomes of care leavers and those of the general population (Coyle & Pinkerton, 2012; Dickens, van Breda,

& Marx, 2014; Frimpong Manso, 2012; Hook & Courtney, 2011; Kelleher, Kelleher, & Corbett, 2000; Macomber et al., 2008; Refaeli & Strahl, 2014; Stepanova & Hackett, 2014; Tanur, 2012; Vinnerljung, Oman, & Gunnarson, 2005; Zeira, Arzev, Benbenishty, & Portnoy, 2014). For example, the American researchers (Courtney, Lee, & Perez, 2011) are undertaking an evaluation of the Adult Functioning of former foster youth known as the Midwest Study. This is a longitudinal study based on three waves of interviews with foster youth randomly selected from three different states, which include two states that mostly discharge young people on their 18th birthday (Iowa and Wisconsin), and one state that allows young people to remain in care until their 21st birthday (Illinois). It also involves a comparison with another group of young people accessed via the US National Longitudinal Study of Adolescent Health, who are not in out-of-home care. They reported that at the age of 26, 20 per cent of care leavers ($n = 593$) had not completed high school or equivalent education; this was three times the figure seen for the proportion of young adults in the general population (6%, $n = 890$).

In sum, the global care leaver population appears to have distinctly poor educational outcomes when compared to their non-care peers. These common deficits appear to reflect a number of factors, including residual class-based assumptions that children growing up in state care should not be expected to succeed, a lack of political will and financial resources at a time of global economic crisis and government austerity, a minimal understanding of the specific needs of care leavers, given their traumatic childhood experiences, and the limited capacity of the existing care systems to adequately prepare care leavers for living independently at such a young age (Mendes, Pinkerton, & Munro, 2014).

Helping and Hindering Factors

A range of pre-care, in-care, transition from care and post-care factors appear to either hinder or assist care leavers to maximise their educational opportunities.

Pre-care experiences of abuse and neglect may cause long-term trauma that contributes to developmental delays. For example, emotional difficulties stemming from young people struggling to understand the impact of what has happened to them can hinder learning (Day et al., 2011). In addition, many children enter care from highly disadvantaged families, characterised by mental illness and/or substance use, which may adversely affect their educational progress (Jackson & Cameron, 2012). Moreover, a European study of 170 care leavers found that almost all came from low socio-economic class backgrounds and many had parents who relied on income security payments, whereas those parents who had worked mostly held unskilled jobs. Few care leavers seem to have had parents who supported and prioritised their educational participation and development (Cameron, Jackson, Hauari, & Hollingworth, 2012).

In-care factors may also either hinder or enhance educational outcomes. Key factors that hinder educational attainment include instability in placements and schools; low expectations from social workers, teachers and carers; limited assistance with homework; a lack of supportive relationships with caring adults; and inadequate personal and financial support. There is also the lack of collaboration between child protection agencies and education, and attitudinal and social problems at school, including discrimination and bullying from students and teachers, lack of interest in study and general unhappiness. This often leads to truancy, suspension and expulsion, which have also been linked to educational deficits (Biehal et al., 1995; Blome, 1997; Broad, 2005; Cashmore & Paxman, 2007; Crawford & Tilbury, 2007; Jackson & Simon, 2006; Jurczynszyn & Tilbury, 2012; McDowall, 2008, 2009; Tilbury et al., 2009). As might be expected, young people from residential care backgrounds are more likely to have had experiences of school exclusion than those in home-based care arrangements (McDowall, 2013).

In contrast, a number of crucial in-care factors can facilitate educational achievement. These include strong personal motivation and resilience, having a close supportive adult, stability in care and school placements that facilitate continuity in school attendance, satisfactory accommodation and financial help. Children and young people in care also require ongoing emotional support, encouragement and advocacy from carers, teachers, family members and social workers, and integrated child welfare and education case management. The active involvement of children in planning and decision making around education is also vital. Key practical supports may include early intervention to tackle literacy and numeracy deficits, and ongoing specialised coaching and tutoring based on individually tailored learning programmes (Biehal et al., 1995; Cameron et al., 2012; Casey Family Programs, 2009; Cashmore & Paxman, 2007; Crawford & Tilbury, 2007; Jackson & Cameron, 2012; Jurczynszyn & Tilbury, 2012; Merdinger et al., 2005; O'Sullivan & Westerman, 2007; Stein, 2004; Tilbury et al., 2009; Townsend, 2011; Wise, 2012).

The research of Cashmore et al. (2007) and Pecora et al. (2006) suggests that high completion rates for secondary school are possible if care leavers are given consistent support. Specifically, support is needed from significant adults and broader support networks, including the opportunity for young people to participate in a range of extracurricular social, cultural, community and work experience activities. It is also important that partnerships be formed between child welfare and education authorities with a view to minimising rates of expulsions and suspensions within the care population, and ensuring that all care leavers are given the support required to complete Year 12, including, if necessary, the extension of placements beyond the age of 18 years (Day et al., 2012; Jackson & Cameron, 2012).

Additionally, holistic and gradual transitions from care are likely to contribute to educational success. These are transitions based on levels of maturity and skill

development rather than simply age, and include secure housing and financial support, as well as continuity of care, beyond 18 years. Conversely, abrupt transitions that involve withdrawals of government support at a fixed chronological age of 18 years, when young people are finishing or about to finish school, may significantly undermine prospects for participation in further and higher education (Mendes, Snow, & Baidawi, 2013).

Knowledge of a range of factors that promote or constrain educational success for children and young people in out-of-home care appears well established. What is less well known, particularly in Australia (as we discuss below), is how many care leavers here proceed on to higher education.

Limited Access to Higher Education

It is perhaps not surprising, given the systemic barriers identified above, that only a small minority of care leavers seem to access higher education. Indeed, commentators variously use terms and phrases such as ‘a tremendous achievement’ (Ajayi & Quigley, 2003, p. 9), ‘against the odds’ (Ajayi & Quigley, 2006, p. 63) or ‘overcoming their early disadvantage’ (Hyde-Dryden, 2012, p. 2) to describe the success of this small cohort in overcoming such enormous barriers. Conversely, Jackson and Ajayi (2007) suggest that, for most care leavers, attending university ‘remains a remote dream’ (p. 71).

In England, it was estimated in 2003 that less than 1 per cent of care leavers entered higher education (Social Exclusion Unit, 2003). However, by 2009, this figure had increased significantly to 7 per cent of all 19-year-old care leavers known to local authorities. In some local authorities, particularly those caring for large numbers of young asylum seekers, the figure was 9 per cent or even higher (Cameron et al., 2012; Jackson, 2011; Jackson & Cameron, 2009). However, the most recent Department for Education figures suggest a slight decline from 430 young people in higher education in 2012 to 400 in 2013, or 6 per cent of all former care leavers aged 19 years (Department for Education, 2013). This figure does not include those care leavers who may have undertaken higher education after 19 years of age, or those not known to their local authorities (Hyde-Dryden, 2012).

In other countries, too, it seems that few care leavers participate in higher education. It is estimated that only 6 per cent of all care leavers in Sweden, Spain and Hungary have entered higher education, while in Denmark the figures are much lower at age 20, although 7 per cent have completed higher education by the age of 30 (Cameron et al., 2012). US research also suggests that a much lower number of care leavers – estimated at about 10 per cent (National Foster Care Coalition, 2007) – enter and complete higher education compared to their peers in the general population (Hernandez & Naccarato, 2010; Jones, 2010; Michell, 2012). However, one study of 96 care leavers from the state

of Massachusetts found more positively that 41 of the young people – 43 per cent of the sample – had at least enrolled in college (Collins & Ward, 2011). At present, the largest percentage of care leavers transitioning to higher education appears to occur in Israel, where the majority live in a form of residential care called ‘youth villages’. A recent study of care leavers who grew up in youth villages away from their birth families, but as voluntary arrangements not connected to maltreatment risks, found that 23.5 per cent of youth village alumni entered higher education, compared to 43.2 per cent in the general population (Zeira et al., 2014). However, according to Zeira et al. (2014), earlier studies which examined alumni from welfare placements, i.e. young people living in residential placements because they had been removed from their parents due to abuse or neglect, revealed less positive educational outcomes more in line with the international literature cited above.

No precise figures are available for Australia. But it can be assumed – using the earlier British figures prior to the introduction of major support measures in the past decade – that at most about 1 per cent of care leavers enter university compared to the 26 per cent of all young people in Australia currently studying in higher education (Australian Bureau of Statistics, 2013).

For example, only three of the 41 young people involved in the New South Wales longitudinal study were involved in higher education 4–5 years after leaving care (Cashmore et al., 2007). However, 22 per cent of the 164 young people surveyed nationally by Create were enrolled in university studies, although only one person had completed tertiary studies (McDowall, 2008).

On a more positive note, there is evidence that a higher number of care leavers may undertake higher education in later years. For example, five of 40 Australian care leavers aged from their forties to seventies, who were interviewed for a study of people who had lived in orphanages and group homes in Victoria between 1945 and 1983, had completed undergraduate university degrees (Murray, Murphy, Branigan, & Malone, 2009). Similarly, a survey of English care leavers aged 17–78 years found that 87 out of 257 had acquired a university degree, including 21 with post-graduate qualifications. Many of these care leavers seem to have completed their degrees later in life, with a much larger percentage over 40 years of age (22.7%) having a qualification, compared to only 6.4 per cent of participants aged 40 years or under (Duncalf, 2010). And in the USA, college completion rates for care leavers aged 25 years and older were three times greater (at 10.8%) than for younger care leavers (Pecora, 2012).

Limited Knowledge of Australian Care Leavers who Enter Higher Education

In recent years Australian policy makers have devoted significant resources to researching and addressing the underrepresentation of students from low socio-economic status

(SES) backgrounds in higher education (Australian Government, 2009; Kenway & Hickey-Moody, 2011). Care leavers form an obvious subset of the three demographics noted by the Bradley Review (Bradley, 2008) as under-represented in higher education, i.e., students from low SES, rural and Indigenous backgrounds. They would also seem to be an obvious target for equity measures such as the Higher Education Participation and Partnerships Programme designed to improve access to higher education for students from disadvantaged backgrounds. Yet, surprisingly little is known about the experiences of care leavers in higher education, including how many have completed degrees or are currently enrolled in higher education, whether most enter university later in life, what courses they target, how their achievements compare to their low SES peers, and how many progress into academic jobs (Michell, 2012). Strangely, there has been virtually no interest in this area by government policy makers despite significant advocacy by service providers and academics (for example, Mendes et al., 2011).

To be sure, the Commonwealth Government introduced national out-of-home care standards in December 2010, which require the development of a detailed support plan covering key areas such as housing, health and financial security for all young people transitioning from out-of-home care. The standards specifically refer to the need to provide additional support to care leavers to overcome barriers to undertaking further education and training (Department of Families, Housing, Community Services and Indigenous Affairs (FaHCSIA), 2012). However, these educational supports are only prescribed up to 18 years of age (FaHCSIA, 2011), and no Commonwealth, State or Territory documents propose any specific targets for the entry of care leavers into higher education.

To date, only two small Australian studies have examined the extraordinary achievements of those care leavers who enter and/or complete higher education. The first study by Mendis interviewed 18 Australian women with care backgrounds, aged from their mid-20s to mid-60s from five states, about their successful completion of university degrees (Mendis, 2012). A second study by Jurczynszyn interviewed 13 young Queensland women, five of whom, aged 28–47 years, had completed higher or further education; four of whom, aged 20–23 years, were currently studying at university; and four of whom, aged 13–15 years, were still in out-of-home care and aspiring to attend university (Jurczynszyn, 2014; Jurczynszyn & Tilbury, 2012).

Both studies have limitations in that they used small samples of young people in, or who have left, out-of-home care, and some older care leavers. They did not consult with other stakeholders, such as foster carers, residential carers, social/welfare workers or teachers, and did not interview any male care leavers. Further, Jurczynszyn's sample was limited to Queensland. Nevertheless, they still provide some important insights into the factors that hinder or help care leavers to enter higher education, factors we will now explore in further detail below.

International Evidence

In contrast to Australia, substantial research and associated policy initiatives to facilitate greater entry by care leavers into higher education have been undertaken in the England, parts of Europe and the USA.

Research on education for UK children in out-of-home care was commenced in 1987 by academic Sonia Jackson. Jackson later headed a seminal 5-year study known as the *By Degrees Project*, commissioned by the Frank Buttle Trust (now Buttle UK, which supports children and young people in need) and funded by a consortium of charities and the Department for Education and Skills. This longitudinal study, which commenced in 2001, aimed to increase the number of care leavers both attending university and successfully completing courses, and more generally raise awareness among universities of their particular needs (Jackson, Ajayi, & Quigley, 2011; Jackson, 2007).

The study examined the experiences of three successive cohorts of care leavers (totalling 129) at university over a 5-year period. They also surveyed all English universities to determine whether they identified care leavers as a specific group requiring additional support and, if so, what specific initiatives were available to assist them. Included in the sample was a much higher group of women than men, and a disproportionate number of young people from minority ethnic and asylum-seeker backgrounds. Findings highlighted the factors supporting care leavers continuing on to higher education (e.g., educationally supportive foster care placements), as well as the difficulties many faced, including financial stress, a lack of emotional and social support, and a variable level of support from universities (Ajayi & Quigley, 2006; Jackson, Ajayi, & Quigley, 2011).

This ground-breaking research by Jackson and her team has had ongoing effects on English policy, and a range of initiatives are now in place to increase access by care leavers to higher education. These initiatives include the 'first class education' strategy established by the *Care Matters: Time for Change* White Paper, which involves a number of measures such as the introduction of 'Virtual School Heads' to improve educational attainment for children living in and leaving out-of-home care. Additionally, the government has introduced a national bursary scheme requiring all local authorities to give care leavers attending university a minimum of £2000, and to assist them in acquiring suitable accommodation and accessing required stationery and equipment. As well, care leavers aged up to 25 years undertaking full-time education are entitled to ongoing support from a Personal Adviser, and the University and College Admissions Service introduced a tick box on applications to identify care leavers and provide them with additional support and advice while enrolled (Centre for Social Justice, 2014; Department for Education and Skills, 2007; Department for Education, 2014).

A related significant initiative has been the introduction of the Staying Put programme. This programme enables

young people to remain in foster care beyond 18, a core rationale for which was acknowledgement of the importance of providing the stability and support necessary for young people to achieve in education, training and employment. A 3-year evaluation of Staying Put found that the young people involved were more than twice as likely to be in full-time education at 19 years of age (Munro et al., 2012).

The Frank Buttle Trust also established a scheme (the FBT Quality Mark) which recognises universities that display a strong commitment to supporting the education of care leavers. Support from universities may involve them taking the following actions: outreach and pre-entry guidance, including the development of links with local authorities to increase awareness of higher education; introducing appropriate and user-friendly admissions procedures; providing entry and ongoing support, including help with accommodation, bursaries and a nominated member of staff as a regular contact; and monitoring and evaluating the actual implementation of this commitment by the education provider. To date, over 80 universities have been awarded the Quality Mark for care leavers (Jackson et al., 2011; Stein, 2012).

Additionally, a longitudinal study, *Young people in public care: pathways to education in Europe*, was funded by the European Commission from 2008–10, and included Denmark, Sweden, Spain and Hungary, as well as the England. This study, also headed by Sonia Jackson, aimed to examine access to higher education by care leavers, and utilise the research findings to identify strategies by which more care leavers could be encouraged to stay in school longer and access further and higher education. Research included interviews with out-of-home care managers, young people and their nominated adult supports. Findings show that children and young people in out-of-home care in these European countries are likewise well behind their age peers when it comes to education, and they too are under-represented in higher education. Other than in England there was little specific support available to assist care leavers undertaking higher education (Cameron et al., 2012; Jackson & Cameron, 2009, 2012). It is to be hoped that these findings will lead to more supportive European policies for care leavers.

In the USA, as in England, there have been similar attempts to improve the representation of care leavers in higher education. A number of college awareness and preparation programmes have been established, which target low-income students including care leavers (Hernandez, 2012). The Chafee Education and Training Voucher (ETV) programme, introduced in 2001, provides care leavers with financial assistance of up to US\$5000 until the age of 21 years, for both college and training programmes. The Fostering Connections to Success and Increasing Adoptions Act of 2008 extended eligibility for the ETV to young people who enter kinship care or adoption after 16 years. The ETV programme has facilitated collaboration between child welfare agencies, service providers and higher education representatives to establish mentoring services, tutoring, internships,

housing, health and employment assistance, monitoring of student progress, forms of financial aid such as scholarships and tuition waiver schemes, and other forms of targeted college support programmes for care leavers (Hernandez, 2012; Hernandez & Naccarato, 2010; National Foster Care Coalition, 2007).

More recently, the College Cost Reduction Act of 2009 provides care leavers with increased opportunity to apply for financial aid (Day et al., 2011). Individual states have also taken action, with several extending the age of leaving care beyond 18, in recognition that, with a lack of blue collar jobs, higher education has become an imperative for young people who have been in foster care Courtney et al. (2011).

The above review of jurisdictions with similar political and societal contexts to Australia outlines a number of strategies to improve access to and through higher education, and highlights the lack of attention in Australia to policy making in this area. Such research as has already been underway here, in combination with the more extensive effort overseas, does point to a number of factors that may help or hinder care leavers who attempt higher education, as we show in the following section.

Helping and Hindering Factors for Those who Access Higher Education

The Australian study by Jurczynszyn (2014) identified a range of macro-, meso- and micro-level factors that enhance participation in higher education by care leavers. These include effective cooperation between the care and education systems beyond 18 years; a common approach of educational optimism held by teachers, carers, welfare workers and the young people; and the capacity of the individual young person to endure and overcome many hardships along the way.

Similarly, Mendis (2012) documented a range of positive factors that promote access. These include practical and financial assistance with accommodation and the costs of study, such as computers and books; psychological and emotional support from a caring adult or mentor; and the personal strengths and resilience of care leavers who maintained a hopeful approach to education that enabled them to overcome many systemic difficulties.

The UK and US literature also summarise key facilitating factors. These include remaining in foster care placements beyond 18 years, established protocols with higher education institutions, availability of financial and practical assistance, high levels of personal resilience and motivation, and ongoing support from family, friends, foster carers and professionals (Ajayi & Quigley, 2006; Hass, Allen, & Amoah, 2014; Jackson & Ajayi, 2007; Stein, 2012).

Access to higher education is one thing, but a number of other challenges remain for those care leavers who do make it to higher education. These include ongoing financial stress concerning food and other bills; an associated need to engage in substantial part-time employment,

which may adversely affect their academic commitment and outcomes; difficulty in securing access to satisfactory year-round housing that incorporates university vacations; problems in attaining adequate health care, particularly in the USA; the limited availability of child care for those who are parents; often poor conditions for study; lack of academic preparation and ongoing information and guidance; not knowing anybody with higher education experience; general social isolation; lack of a support network of caring adults to deal with the psychological impact of past abuse and neglect; and negative care experiences and ongoing conflict with birth families (Ajayi & Quigley, 2003, 2006; Day et al., 2011, 2012; Hernandez, 2012; Hernandez & Naccarato, 2010; Hyde-Dryden, 2012; Jackson et al., 2011; Merdinger et al., 2005; Stein, 2012).

This review of the literature suggests that a range of targeted personal and structural supports are needed to improve the participation of Australian care leavers in higher education (Jackson & Cameron, 2012), and we propose a number of these in the following section.

Implications for Policy and Practice Reform in Australia

One important step to improve access to higher education for care leavers would be to extend state care obligations beyond 18 years. It would also be useful to ensure that every care leaver had a post-18 educational support plan, based on a partnership between child protection and education (McDowall, 2009).

Another important step would be to establish a post-18 national database similar to that maintained by the English Department of Education and recently extended until 21 years of age. Such a database would allow us to monitor the progress of care leavers in a range of areas, and specifically identify how many had entered and/or completed higher education.

Other necessary reforms pertain to the role of universities. All universities should have a formal policy for enrolling and supporting students from an out-of-home care background, including a specific student services officer who has specialist knowledge of the impact of state care experience.

In addition, generous and reliable financial support is required to assist care leavers entering higher education. Possible measures include the removal or reduction of fees and/or deferral of Higher Education Contribution Scheme (HECS) repayments, the provision of a small number of quarantined places for care leavers, and the availability of scholarships to meet educational and living costs. At the very least, Australia should follow the lead of the UK government in offering a major bursary for each care leaver undertaking higher education, and associated support including a living and maintenance allowance for term time and vacations, an accommodation grant and assistance with the cost of stationery, books and a computer (Department for Education, 2014; National Care Advisory Service, 2012).

This assistance should not be limited only to care leavers aged up to 25 years, but should also be available for those older care leavers who elect to return to education later in life.

Further Research

To date, we know strikingly little about the experiences of care leavers who enter higher education in Australia. Further research, similar to that undertaken by Sonia Jackson and her colleagues in England and Europe, is badly needed to identify the local pre-care, in-care, transition from care and post-care factors that either assist or hinder entry into higher education. Ideally, this would involve a longitudinal project that tracked a cohort of care leavers through their higher education journey.

This proposed research would go beyond the two modest studies cited earlier. For example, consultations with a wider range of stakeholders, such as foster, kinship and residential carers, social welfare workers, teachers, university academics and family members, as well as the young people themselves, would yield a more comprehensive and nuanced set of data. Further research should also target a diverse range of care leavers in terms of geography and gender, and identify whether those undertaking higher education include young people from Indigenous or asylum-seeker backgrounds. Optimally, an additional research agenda item would be the development of a best practice model of supports and the tailoring of specific services aimed at raising care leaver participation in higher education.

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