
VULNERABLE/LOOKED-AFTER CHILDREN

RESEARCH REVIEW 3

Increasing the number of care leavers in 'settled, safe accommodation'



Centre for Excellence and Outcomes in Children and Young People's Services

The Centre for Excellence and Outcomes in Children and Young People's Services (C4EO) identifies and coordinates local, regional and national evidence of 'what works' to create a single and comprehensive picture of effective practice in delivering children's services. Using this information, C4EO offers support to local authorities and their Children's Trust partners, working with them to improve outcomes for children, young people and their families.

It is focusing its work on eight themes:

- Early Years
- Disability
- Vulnerable/Looked-After Children
- Child Poverty
- Safeguarding
- Schools and Communities
- Youth
- Families, Parents and Carers.

C4EO works with a consortium of leading national organisations: National Children's Bureau, National Foundation for Educational Research, Research in Practice and the Social Care Institute for Excellence.

The Centre is also supported by a number of strategic partners, including the Improvement and Development Agency, the Family and Parenting Institute, the National Youth Agency and the Institute of Education.

There is close and ongoing cooperation with the Association of Directors of Children's Services, the Local Government Association, the NHS Confederation, the Children's Services Network, the Society of Local Authority Chief Executives, Ofsted and the regional Government Offices.

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Mike Stein (Social Policy Research Unit, University of York)

Data annexe by Marian Morris (National Foundation for Educational Research)

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Summary

This review tells us what works in increasing the number of care leavers in 'settled, safe accommodation', on the basis of a systematic review of the research literature and analysis of key data. It aims to provide evidence that will help service providers to improve services and, ultimately, outcomes for children, young people and their families.

The review was carried out by the Social Policy Research Unit at the University of York on behalf of the Centre for Excellence and Outcomes in Children and Young People's Services (C4EO). The data analysis was conducted by the National Foundation for Educational Research (NFER).

For young people, being in 'settled, safe accommodation' is a top priority on leaving care and is about where they live, rent that is affordable, and being helped in budgeting and in managing their accommodation.

What is 'settled, safe accommodation'?

- 'Settled, safe accommodation' is suitable for a young person in the light of their needs.
- The provider or landlord of the accommodation is approved by the responsible authority.
- It takes into account the young person's wishes, feelings and educational, training or employment needs.

Key messages

- Being in safe, settled accommodation is associated with increased wellbeing and engagement in education, employment or training.
- Young people leave care at an earlier age, on average, than other young people leave home. Those who leave care at a later age are more likely to have a successful transition to adulthood, including being in 'settled, safe accommodation'.
- Young people are likely to be in safe, settled accommodation after leaving care when they (i) have good-quality care that provides them with stability and pays attention to their education and wellbeing and (ii) are supported to leave care gradually, at an older age.
- Care leavers want and benefit from support services matched to their needs, including leaving care services, out-of-hours support, mentoring and positive family and kinship contact. Care leavers also need practical support with moving and setting-up in accommodation.
- Young people leaving kinship care – including extended family and friends placements – see it as very positive, though there is limited evidence on this.
- Leaving care services work well in assisting most young people in accessing accommodation and supporting them in managing their accommodation.
- Services for disabled care leavers are not always coordinated and planned with mainstream leaving care services.

- More attention should be given to the accommodation and support needs of young parents, the community and family links of black and minority ethnic young people when they leave care, asylum-seeking young people, and vulnerable young people returning from 'out of authority' placements.
- Effective service provision requires good communication between leaving care services, accommodation providers and carers, and should include the young person in decisions.
- It is important to identify groups who are at particular risk of poor housing outcomes early on: young people with social, emotional and behavioural problems; offenders, including those with a history of violence; those who run away from care; young disabled people who do not meet the threshold for adult services; and young asylum seekers with mental health problems.
- Housing and children's services need to identify problems with accommodation early on, have clear contingency arrangements – including sufficient emergency accommodation to prevent homelessness – and specialist accommodation for young people with higher support needs.
- The role, training and support needs of former foster parents and residential carers in providing ongoing personal and practical support to care leavers needs to be reviewed further and formalised.

Who are the key people with important knowledge and views working to improve services?

- care leavers
- carers (foster parents, care-home staff)
- leaving care workers and social workers
- managers working at a strategic level delivering services that include housing and children's services
- birth family.

For **care leavers** being in 'settled, safe accommodation' is the outcome of a process involving a number of different stages: choosing when to leave care; being well prepared; having a choice of accommodation; being safe; being supported by leaving care services, family, friends and mentors; having an income or receiving financial assistance; and being involved in all these different stages. Leaving care to live in settled, safe accommodation is connected with continuing in education or employment, wellbeing and achieving the *Every Child Matters* outcomes.

Carers are responsible for young looked-after people until they leave care. These may be foster parents, residential carers or kinship carers, including extended family members and friends. The evidence suggests that young people who develop a good relationship with their carer are more likely to be in stable and better housing after leaving care. Carers need to be well supported and their role formalised in providing this support to young people after they have left their care.

Leaving care workers and social workers are responsible for assisting young people in moving on from care to their own accommodation. This will involve them in assessing the needs of the young person and agreeing a pathway plan with them. In carrying out these responsibilities they should pay particular attention to the different stages of 'being in settled, safe accommodation' identified above – problems arising in any of these stages may alert them to difficulties young people have in accessing and managing their accommodation. Strong commitment and positive relationships with young people are associated with good outcomes for care leavers.

Managers working at a strategic level deliver services that include: leaving care services, access to supported accommodation and independent accommodation, homeless strategies, bridging the gap between children's and adult services. **Local authorities**, acting as 'corporate parents', have a strategic role to play in managing care leavers access to 'settled, safe accommodation'. This will require a framework of services and funding streams, underpinned by formal relationships between children's services, housing agencies and other services to ensure high-level commitment, effective communication, partnership working and joint planning across the local authority. This should include joint protocols and agreements, and detailed specifications for service commissioning.

An integrated approach with **children's services, housing services and adult services** is essential in preparing young people for adulthood – not just at the time of leaving care: this should be the main purpose of multi-agency working. The success of leaving care is strongly associated with good relationships between the leaving care team and the young person and also with good communication between the leaving care team and housing providers. The variability of the range and quality of services needs to be addressed.

Birth family contact is sometimes re-established by the young person when they leave care. This can be a positive source of both practical and emotional support for the young person. But for some young people, past difficulties can mean that re-establishing contact makes it harder for them to settle down and some young people may regress educationally or suffer harm as a result.

Is there specific data available to inform the way forward?

DCSF data is available on the accommodation types of young care leavers who had been looked-after continuously for at least 12 months and who were still in care aged 16 in April of their final year of compulsory education. The most recent dataset, however, does not distinguish between accommodation deemed suitable and that deemed unsuitable.

The evidence base

The review draws on 98 studies. There are some limitations to the evidence base, mainly due to the lack of controlled studies. In particular, there is a need for:

- more information on young people's views of the accessibility and acceptability of the services and interventions offered
- information on services for young people who have left care and subsequently experience housing difficulties

- a review of the skills and behaviours of foster parents, residential workers, other carers and birth family members that best help young people find and sustain a home
- research that makes the link between housing and social care and the agencies that must work together to help a young person find safe, settled accommodation.

Review methods

Research literature was identified through systematic searches of relevant databases and websites, recommendations from our Theme Advisory Group (a group of experts in the policy, research and practice field of vulnerable/looked-after children), and reference harvesting. The review team used a 'best evidence' approach to systematically select literature of the greatest relevance and quality to include in the review. This approach attempts to eliminate bias in the selection of literature in order to ensure that the research findings are objective. Research on looked-after children or care leavers, aged 13 to 25, published since 2000 and relating to studies in the UK, Ireland, USA, Canada, Australia or New Zealand was included.

Next steps

An updated version of this review is due to be published in Autumn 2010. This will include good practice examples and views from children, young people, parents, carers and service providers.

C4EO reviews on improving the educational outcomes of looked-after children and improving the emotional and behavioural health of looked-after children are also available on the C4EO website. Local decision-makers and commissioners working in local authorities and Children's Trusts may also find it helpful to read the Vulnerable Children directors' summary, which presents the key messages from all three reviews. This is available at www.c4eo.org.uk/themes/vulnerablechildren.

C4EO is using the main messages from the three Vulnerable/Looked-after Children reviews to underpin its knowledge sharing and capacity building work with Children's Trusts, and through them the full range of professions and agencies working with LACYP.

1 Introduction

This review aims to draw out the key 'what works?' messages on increasing the number of care leavers in 'settled, safe accommodation'. It addresses four questions, which were set by the C4EO Theme Advisory Group (TAG), a group of experts in leaving care policy, research and practice. These questions are:

- What do we know about the accessibility, acceptability and effectiveness of policies, services and interventions initiated by central, regional and local government and independent sector, including housing services and housing support services, for looked-after children and young people (LACYP)?
- What are LACYP's views on what constitutes safe and settled accommodation and how do they compare to those of policy-makers, housing and children's services personnel and independent sector providers?
- What do we know about the contribution made to being in safe, settled accommodation of LACYP by the attitudes, skills and abilities of foster, residential, kinship carers, supported housing staff and birth families, and interventions to support this contribution?
- What do we know about the 12.6 per cent of young people not in suitable accommodation at age 19 (as defined by national indicator 147)?

The review is based on:

- the best research evidence from the UK – and where relevant from abroad – on what works in improving services and outcomes for children and young people
- the best quantitative data with which to establish baselines and assess progress in improving outcomes.

C4EO will use this review to underpin the support it provides to Children's Trusts to help them improve service delivery and, ultimately, outcomes for children and young people. It will be followed by a knowledge review that will update the research evidence and also incorporate:

- the best validated local experience and practice on the strategies and interventions that have already proved to be the most powerful in helping services improve outcomes, and why this is so
- stakeholder and client views on 'what works?' in improving services.

Definitions of key terms

The following definitions were agreed by the TAG.

Settled, safe accommodation

The definition of '**settled, safe accommodation**' is drawn from both legislation and young people's views. According to the regulations and guidance to the *Children (Leaving Care) Act 2000* (GB. Statutes 2000) the 'suitable accommodation' required by the Act includes the following elements:

- accommodation which, so far as is reasonably practicable, is suitable in the light of a child's needs, including their health needs
- accommodation in respect of which the responsible authority has satisfied itself as to the character and suitability of the landlord or other provider
- accommodation in respect of which the responsible authority has, so far as is reasonably practicable, taken into account the child's:
 - wishes and feelings
 - educational, training or employment needs.

Certain accommodation is not deemed suitable for 16- and 17-year-olds, including 'unsupported accommodation' and 'bed and breakfast', although it is acknowledged that the latter may be 'very occasionally' used in an emergency. The regulations also identify the importance of 'contingency planning' (DH 2001). The regulations and guidance, including what constitutes 'suitable accommodation', is currently under review by the Department for Children Schools and Families. The *Homelessness Act 2002* placed a duty on local authorities to make available suitable accommodation, including for a person who is in priority need and the *Homelessness (Priority Need for Accommodation) (England) Order 2002* extends 'priority need' to care leavers aged 18 to 20 years old (NCAS 2009).

Definitions used by the Public Service Agreement on socially excluded adults (PSA 16) and national indicators that contribute to this (NI 147) include an understanding that accommodation also needs to be affordable: 'accommodation is to be regarded as suitable if it provides safe, secure and *affordable* provision for young people' (for more information, visit http://www.cabinetoffice.gov.uk/social_exclusion_task_force/psa.aspx).

To young people who have been in care 'getting your own place to live' is top of the list of 'best things about leaving care' (Morgan and Lindsey 2006 p 6). They want 'a place of safety, security and somewhere that was their own' (Centrepont 2006 p 7). They also want a say about where they live, rent that is affordable, help in budgeting and in managing their accommodation, including when they get into financial difficulties (A National Voice 2005; Harris and Broad 2005). The following **groups of young people** have been included in this review:

- thirteen to 25-year-olds who are or have been in medium- or long-term care (more than six months) – wherever they are placed (for example, in residential care, foster care, a young offenders institution) – and their families
- thirteen to 25-year-olds who are or have been looked-after for several short-term (up to six months) periods in local authority care (either under a care order, or on a voluntary basis)
- thirteen to 25-year-olds who have left or are preparing to leave medium-term or long-term local authority care.

The focus on young people aged 13 to 25 years old reflects the journey from early pathway planning to adulthood.

The accessibility, acceptability and effectiveness of interventions

The '**accessibility of interventions**' refers to how easily people can access services or interventions. The '**acceptability of interventions**' refers to how acceptable interventions are to people and carers who use services, and to other people (staff, for example) involved in delivering them. Accessibility and acceptability of some interventions may be affected by practicalities, such as lack of transport in rural areas, but also by cultural and attitudinal issues such as language barriers, stigma and other barriers or facilitators to participation.

The '**effectiveness of interventions**' refers to how effective interventions are (in a practice setting), usually assessed by measuring outcomes in various dimensions. Only those studies that report some type of evaluation (as opposed to descriptions) of interventions can tell us something about 'effectiveness of interventions'. Studies that involve a comparison or control group, or that measure characteristics before and after an intervention are more persuasive.

The study considered items from England, Scotland, Wales, Northern Ireland, Ireland, USA, Canada, Australia and New Zealand. Publication dates were from 2000. The type of literature considered includes published research studies only.

Methods

The research included in this review was either identified in the scoping study (Bostock *et al* 2009) or was cited within the research items identified. The research team ruled out irrelevant research studies by screening study titles. Remaining research studies were then coded on the basis of their abstracts. Coding took account of each study's features – including research design, relevance to the scoping review questions and country of origin – to identify the key items to be included in this main review. The review team has appraised these key items to ensure that the evidence presented is the most robust available. The data annexe included within this review is based on scoping and analysis of publicly available data, which took place as part of the scoping study on which this review builds (Bostock *et al* 2009).

Strengths and limitations of the review

Strengths of the review include:

- identifying the best available evidence from research and national datasets to inform specific questions
- comprehensive and documented searching for relevant information
- an analysis of the quality and strength of evidence
- guidance from an advisory group on the issues of greatest importance in leaving care policy, research and practice.

Limitations of the review include:

- the very tight deadlines which the review had to meet, which limited the ability of the review team to extend and develop the evidence base through reference harvesting and hand searching

- the fact that the review was limited to English-speaking countries only.

2 Context

For most young people today, being 'in settled, safe accommodation' of their choice, represents an important landmark on their journey to adulthood. However, for young people leaving care achieving this goal may be more difficult than for other young people. They may feel they have been forced to leave care before they are ready, often at just 16 to 17 years of age, where as most young people leave their family home in their mid-twenties. Some young care leavers are also likely to be living in unsuitable accommodation, move frequently and become homeless (A National Voice 2007; DCSF 2007).

Being in 'settled, safe accommodation' also has to be considered in the context of connected and reinforcing pathways to adulthood: entering further and higher education or training, finding satisfying employment, and achieving good health and a positive sense of wellbeing – all pathways where there is evidence of care leavers being disadvantaged in comparison to other young people (Stein 2004).

Specific provisions in response to the accommodation needs of care leavers – as detailed below – as well as more general provisions in recognition of their wider and connected range of needs are reflected in the current legal and policy framework. Local authorities acting as 'corporate parents' and the Every Child Matters universal outcomes are central to this framework: What if this was my young person, would it be good enough for them?

The Children (Leaving Care) Act 2000 (GB. Statutes 2000) was introduced in England and Wales in October 2001 against a background of wide variations between local authorities in the range and quality of services for care leavers. The Act's main aims are to:

- delay young people's transitions from care until they are prepared and ready to leave
- strengthen the assessment, preparation and planning for leaving care
- provide better personal support for young people after care
- improve the financial arrangements for care leavers.

The key responsibilities are:

- a duty to assist young people until they are 21, or up to and beyond 24 if they are in approved programmes of education or training
- a duty to assess and meet the needs of young people in and leaving care
- pathway planning
- financial support
- maintenance in suitable accommodation
- a duty to keep in touch by the 'responsible authority'.

The Act's regulations and guidance details what can assist young people in settling in their accommodation and local authority strategies to achieve this (DH 2001).

The *Homelessness Act 2002* (GB. Statutes 2002) places a duty on housing and social services departments to develop joint strategies to prevent homelessness among vulnerable groups, including care leavers. The *Homelessness Code of Guidance for Local Authorities (2006)* identifies both housing and children's services' roles in addressing the high risk of homelessness for care leavers (NCAS 2009). The non-statutory guidance, *Joint working between housing and children's services: preventing homelessness and tackling its effects on children and young people* (CLG and DCSF 2008) provides examples of good practice, information and resources. It proposes that children and housing services should have:

- a formal joint working protocol
- joint working arrangements for promoting and planning care leavers' transition to adulthood
- a joint protocol to ensure a quick safe and supportive response to care leavers at risk of homelessness.

In 2007, evidence of the continued vulnerability of care leavers to homelessness and accommodation difficulties was recognised by the Social Exclusion Taskforce's Public Service Agreement (PSA) on socially excluded adults, specifically national indicator (NI) 147, the number of care leavers in suitable accommodation, and NI 148, the number of care leavers not in education, training or employment. This PSA aims to ensure that care leavers are offered the chance to get back on a more successful path, by increasing the proportion of at-risk individuals in settled accommodation and employment, education or training: http://www.cabinetoffice.gov.uk/social_exclusion_task_force/psa.aspx). Local strategic partnerships are responsible for delivering these national indicators through local area agreements (NCAS 2009).

The Children and Young Persons Act 2008 (GB. Statutes 2008) provisions (due for staged implementation) include a new statutory requirement that 'a local authority cannot move a looked-after child to independent living arrangements without first conducting a statutory review of the care plan and that, where such a move takes place, it does not automatically result in the child leaving care. That is an entirely separate decision that must also be reviewed' (NCAS 2008).

There will be a presumption that young people will continue to be looked-after up to the age of 18. The Act will also extend entitlement to the support of a personal adviser up to the age of 25 for care leavers who start or resume a programme of education or training after the age of 21. In similar vein, the **Care Matters implementation plan** initiatives include enabling local authorities to pilot:

- giving young people the opportunity of 'staying put' with foster carers until age 21
- the involvement of young people in deciding when they move to independence through Right2BeCared4
- social pedagogic approaches in children's homes.

Revisions to the *Children Act 1989* regulations and guidance are also currently being made (GB. Statues 1989; DCSF 2008).

The policy framework also includes Supporting People. Children's services and Supporting People teams can jointly commission services for young people, including care leavers (NCAS 2009). The allocation of social housing through **choice-based lettings** (to be in

place by 2010) recognises those in priority need, including certain care leavers, and there are new government targets for increasing social rented accommodation. Also, the Department of Children, Schools and Families (DCSF) is funding nine projects under the **Housing Capital Fund** to encourage local authorities to develop a range of housing options for care leavers.

Finally, Ofsted have recently inspected *Support for care leavers* (Ofsted 2009) and the DCSF have funded *Journeys to home: care leavers' successful transition to independent accommodation*, a good-practice guide prepared by the National Care Advisory Service aimed at supporting local authorities in ensuring their young people are in safe, secure and affordable housing (NCAS 2009).

Research context

The contribution of different theoretical perspectives to a greater understanding of the main findings from empirical studies of young people leaving care, including those discussed in this review, has received some attention. Set in the context of social exclusion, work on attachment, transitions and resilience builds upon important earlier empirical and theoretical foundations that have particular relevance to this review (see Stein (2006b) for seminal works and references on these perspectives).

Social exclusion has come to mean both material disadvantage and marginalisation. Whereas the former is usually associated with low income and relative poverty, the latter refers to the way groups may be excluded, omitted or stigmatised by the majority, due to personal characteristics or experiences, such as being in care. In this context, international research from the mid-1980s has shown the high risk of social exclusion, on both these dimensions, for young people leaving care, including their high risk of homelessness and poor housing outcomes. This evidence has contributed to a greater awareness of their reduced life chances, their links with other excluded groups of young people and variations in services, as well as providing a focus for interventions.

Attachment theory is relevant to understanding the experiences of young people whose early family relationships have been disrupted, often by their experience of abuse and neglect, and who require compensatory attachments, stability and continuity in their lives. However, studies from the mid-1980s show that some of these young people may go on to experience a lot of further placement disruption while in care. This may contribute to some young people becoming more detached from their carers and other social relationships and institutions, moving a lot after they leave care for negative reasons and being unable to settle in their accommodation.

Research on **transitions** shows that many young people who leave care may have a very short and severe journey to adulthood. They have to cope with major changes in their lives – including leaving care and settling in accommodation, often in a new area, leaving school and finding work, or going to college – far younger, as well as in a far shorter time, than many other young people. These accelerated and compressed transitions may deny care leavers the psychological opportunity of dealing with these major issues over time, which is how most young people are able to cope with their journey into adulthood.

Resilience can be defined as the quality that enables some young people to find fulfilment in their lives despite their disadvantaged backgrounds, the problems or adversity they may have undergone, or the pressures they may experience. Bringing together research on

resilience with studies of care leavers from the mid-1980s shows that the resilience of young people leaving care can be promoted through:

- stable placements
- helping young people develop a sense of identity
- a positive experience of education
- opportunities for participation and problem-solving in their lives, including preparation
- more gradual and supported transitions from care into adulthood.

These are the foundations of young people leaving care achieving the Every Child Matters outcomes.

3 The evidence base

The scoping team identified a total of 83 items as relevant to the review questions. Using the same inclusion criteria for the scope, and by scanning the reference section of these papers and other sources, the review team identified a further 15 papers, including three further empirical studies, one further research review, six related papers, four further policy references, plus the final scoping review.

The majority (60) of items are empirical studies, with just six identified with experimental design. There are 17 literature reviews, including two systematic reviews. Ten have been classified as background critical accounts and four coded as other/adequate information on their design.

The vast majority (51) of studies are interview and focus group based. Ten are based on case studies, which include case studies of individuals and studies based on specific services or local authorities. One study was classified as ethnographic research and one study classed as a controlled trial. A significant number (23) of studies were based on surveys. Secondary analysis of existing datasets, agency data and case files accounted for 14 items. Finally, 18 were classified as not research, other or having adequate information on their main methods. Each study may have used more than one method. The majority (58) of studies are UK-based, with a substantial proportion (31) from the US. The remaining studies were from Canada (4), Ireland (3) and Australia and New Zealand (3).

All studies address care leavers. Where breakdown was given by ethnicity, 27 included black and minority ethnic young people as well as white looked-after children and young people (LACYP). Twelve studies included disabled children and children with long-term health conditions, such as poor mental health. A small number (8) of studies included unaccompanied asylum seekers. Twenty-five covered health, education, social care and housing staff. Foster carers and residential workers are covered in just five studies. Birth family and relatives were included in five studies. Eighteen included control sample populations, such as children and young people who are not looked-after, legal staff such as judges, and teenage mothers. Three studies identified the sexual orientation of the young people.

What do we know about the accessibility, acceptability and effectiveness of policies, services and interventions initiated by central, regional and local government and independent sector, including housing services and housing support services for LACYP?

The largest proportion of items (64) related to this question. The majority (41) of books and papers are based on empirical studies but it is important to note that five experimental studies are relevant to this question, highlighting important additional information about what works. There have been 15 reviews conducted of the literature concerning the effectiveness of policies, services and interventions. The literature covers two main areas of effectiveness: North American-based evaluations of independent living programmes and UK studies primarily focused on the leaving care services introduced following the *Children (Leaving Care) Act 2000*. The papers report on services provided by both the statutory and independent sectors, although papers do not always make this clear. In both bodies of literature, the housing dimension is often submerged in discussions about support services and preparation for leaving care. This includes a strong focus on

education, employment and training. The education of LACYP is the focus of another review within the vulnerable children's theme (Brodie *et al* 2009).

What are LACYP's views on what constitutes safe and settled accommodation and how do they compare to those of policy-makers, housing and children's services personnel and independent sector providers?

A substantial number (51) of items related to this question. Not surprisingly, the majority of studies (39) are empirical, non-evaluative studies largely based on interviews (36). Twelve included surveys and six were based on secondary analysis of data, such as agency datasets and case files. Eleven were literature reviews that specifically highlighted children's views. The majority of studies (42) are UK-based with 26 covering North America.

This body of material largely involves studies using small samples, interviewing or focus groups and includes follow-up studies. Finding a home is a priority for young people who emphasise choice, affordability and the chance to make a home of their own. Inaccessibility and unacceptability of housing stock is a consistent theme, with safety of the area and security of the housing key issues. The research evidence on LACYP's experiences of extended care placements is very limited. There is also little about what young people value about continued support from foster carers and residential workers, with the majority of studies concentrating on services from leaving care staff, such as personal advisers. The research evidence on LACYP's views of contact with their birth families is equally limited. This is an important gap in the literature because many young people continue to have contact with their birth families, some re-establishing contact particularly with extended kin on leaving care and some returning to live with their birth family.

What do we know about the contribution made to being in safe, settled accommodation of LACYP by the attitudes, skills and abilities of foster, residential, kinship carers, supported housing staff and birth families, and interventions to support this contribution?

The scoping review identified very little published research evidence that relates directly to interventions, training, assessment and support that makes any difference to the skills and behaviours of foster carers or residential workers in helping young people find and sustain a home. Just 14 of the studies were relevant to this question. Ten are empirical studies and one is an experimental study. These are largely (10) interview-based, with five using a survey or case study approach. There are three review articles and three background critical accounts (bearing in mind that a study may use more than one method). The group of studies focusing on this question is surprisingly small. The scoping review identified very little published research evidence that relates directly to interventions, training, assessment and support that make any difference to the skills and behaviours of foster carers, residential workers or kinship carers in helping young people find and sustain a home. The role of birth families is also largely overlooked in the literature. This may reflect practice trends.

What do we know about the 12.6 per cent of young people not in suitable accommodation at age 19 (as defined by national indicator 147)?

A small body (30) of studies related to this question. They are evenly divided between UK (15) and North American studies (15). Unsurprisingly, the majority (17) of books and papers are based on empirical studies but there is one experimental study deemed relevant. The papers were based on reviews (6), background critical accounts (1) or coded as other (1).

The evidence is a mix of descriptive and evaluative studies, with evaluations of services to homeless care leavers largely North American-based. The scoping study identified a small body of work in the area, but clearly the literature concerning homeless young people generally is relevant to supporting homeless ex-LACYP but was excluded for the purpose of the scoping study. Both the UK and North American literature highlight the role of housing, with the US pointing to innovative collaborations between the independent sector, children's welfare services and house builders. Both the UK and US literature emphasise the importance of independent living schemes.

Gaps in the evidence base

- Methodologically, there is a lack of variety in the types of studies available. The majority are descriptive, non-experimental empirical studies using small samples and a qualitative methodology.
- Where effectiveness studies are available, they tend to be North American-based and do not capture young peoples' views on accessibility and acceptability of services and intervention.
- Intervention studies deal primarily with programmes and preventative services delivered prior to leaving care. Services for young people who have left care, who subsequently experience homelessness or housing difficulty are only identified in a small number of studies.
- There is a lack of material to review the interventions, training, assessment and support that makes any difference to the skills and behaviours of foster carers, residential workers or kinship carers in helping young people find and sustain a home – as well as little material on the role of birth families.
- There is some literature on care leavers' experience of homelessness within care leavers' research and some within the literature on youth homelessness (the latter beyond the scope of this review).
- While housing is included in many of the studies, the housing perspective is often less evident. This may be due to disciplinary distinction with studies largely classed as 'social care' rather than 'housing' research. This may contribute to less attention being paid to the impact of structural and inter-agency dynamics on care leavers' ability to find safe, settled accommodation.
- Within the inclusion age range (13 to 25), there is a lack of research evidence of young people's transitions to adulthood (21 to 25), as distinct from at the time of leaving care (16 to 20). This means we know very little about the experiences of young adults in managing their accommodation, including what may contribute to their successes or the difficulties that they may experience.

4 The accessibility, acceptability and effectiveness of policies, services and interventions for looked-after children and young people

This section seeks to identify what we know about the accessibility, acceptability and effectiveness of policies, services and interventions initiated by central, regional and local government and independent sector, including housing services and housing support services, for looked-after children and young people (LACYP).

Key messages

- How young people fare in respect of their housing is in part connected to the quality of care they receive, their transitions from care, the services they receive and the reinforcing and connected pathways to adulthood, including education, employment and wellbeing.
- Leaving care services work well in assisting most young people in accessing housing, in supporting them in managing their accommodation and in helping them when they get into difficulties.
- More attention should be given to the accommodation and support needs of young parents, the community and family links of black and minority ethnic young people when they leave care and the accommodation needs of asylum-seeking young people.
- Services for disabled care leavers should be coordinated and planned better with mainstream leaving care services.

As detailed in Section 3, this section is based on 64 items. This includes, first, UK studies which focus on leaving care services, including the implementation of the *Children (Leaving Care) Act 2000*, and, the outcomes of leaving care services. Second, it includes North American-based evaluations of independent living programmes (ILPs) initiated by state governments. Differences in culture, legal and policy frameworks, services and care contexts between the UK and the US, suggest the need for caution in making comparisons, including the implications for policy and practice.

The development of leaving care services (UK) and independent living programmes (US)

The material included in this sub-section is contextual and mainly descriptive. It is drawn from the references cited in the text.

Leaving care services

In the UK specialist leaving care schemes have been introduced, particularly since the mid-1980s, to respond to the core needs of care leavers for assistance with accommodation, finance, education and careers, life skills, and personal support networks. The early schemes were, in the main, provided by the third sector, had small numbers of staff and access was limited to selected young people leaving children's homes within a local authority. However, the pioneering work of the early individual schemes and projects contributed to the development of authority-wide leaving care provision (Stein 2004).

Organisational models of leaving care services in the UK include:

- a centrally organised specialist service
- a geographically dispersed specialist service
- a non-specialist leaving care service
- a centrally organised integrated service for a range of vulnerable young people including care leavers, homeless young people and young offenders.

(Dixon et al 2004; Dixon and Stein 2005)

Variations of these models include specialist dual-system arrangements, where the young person is assisted by a specialist leaving care team but statutory responsibility is retained by the social worker and looked-after adolescent teams (Vernon 2000).

Research completed since the introduction of the *Children (Leaving Care) Act 2000* in England and Wales, suggests the emergence of a 'corporate parenting case model'. Its main features are twofold: first, case responsibility is held by the designated personal adviser whose responsibilities include needs assessment, pathway planning and the provision of support and advice; second, the increased role played by a range of agencies, representing a shift from more informal inter-agency links to more formal agreements, as specified in the needs assessment and pathway planning requirements of the Act. This has included the setting up of multi-disciplinary teams with housing, employment and health specialists working alongside personal advisers (Dixon *et al* 2004; Hai and Williams 2004; Stein 2004; Broad 2005).

Independent living programmes

In the United States, also from the mid-1980s, Congressional concern about the extent to which young people 'aging out of care' were prepared to manage their lives led to the passage of the *Independent Living Initiative Law* in 1985. This law authorised funds for states to establish and carry out programmes to assist young people aged 16 and older to make the transition to independent living, leading to the development of a national network of independent living programmes (ILPs).

Since then the legal and policy framework has been strengthened, most recently, by the *Fostering Connections to Success and Increasing Adoptions Act 2008* which extended the Chafee Foster Care Independence Program, to include young people who after the age of 16 leave foster care for kinship care, guardianship or adoption. It also introduces a new requirement for a 'personalised transitions plan' (Collins and Clay 2009). The strengthening of the legal framework can be seen in the context of growing evidence of the poor outcomes for care leavers (Courtney *et al* 2001; Courtney and Dworsky 2006; Pecora *et al* 2006). Research evidence from Canada is being used to advocate for similar changes (Tweddle 2007).

ILPs may include life-training skills, mentoring programmes, transitional housing, health and behavioural health services, educational services and employment services. They generally employ social skills techniques such as instruction, modelling, role play and feedback: approaches that have been shown to improve skills for young people in clinical and non-clinical settings (Montgomery *et al* 2006). It has been suggested by Courtney and Terao (2002) that focusing on the range of services may detract from common programme elements including: case management and their underlying philosophy – many adopt a

youth development philosophy which emphasises opportunities for young people to contribute to their community, increase their personal confidence, and provide guidance to other young people. They also suggest that ILPs may be provided as one part of a wider range of services and there is evidence of variation in local state policies – for example, in allowing young people to remain in care longer or providing financial support for college education (Courtney and Terao 2002).

The implementation of the Children (Leaving Care) Act 2000

There have been a small number of research studies and surveys evaluating the work of leaving care services in England and Wales since the introduction of the *Children (Leaving Care) Act 2000* (Vernon 2000; Broad 2003; Dixon *et al* 2004; Hai and Williams 2004; Barn *et al* 2005; Broad 2005; Harris and Broad 2005; Wheal and Matthews 2007; Simon 2008). These studies suggest the legislation is contributing to a number of positive changes:

- the increases in the percentages of young people living in supported accommodation and shared or transitional support accommodation
- the increased take-up of further education and reductions in those not in education, employment and training, directly linked to improvements in financial support for young people provided by local authorities
- a strengthening of leaving care responsibilities, especially through the introduction of needs assessment and pathway planning
- more formalised inter-agency work and multi-agency teams
- increased funding for leaving care teams.

However, there is also evidence that:

- young people continue to leave care at a younger age than other young people leave the family home
- divisions between better and poorer funded leaving care services before and after the Act are likely to remain
- young people's healthcare remains a low priority within leaving care teams
- services for young parents, young accompanied asylum and refugee seekers, and young people remanded to accommodation, were predominantly reported as 'remaining the same' since the introduction of the Act.

Research on the experiences of specific groups of young people since the introduction of the *Children (Leaving Care) Act* shows:

- Black and minority ethnic young people, including those of mixed heritage, face similar challenges to other young people leaving care. However, they may also experience identity problems derived from a lack of knowledge of their background, or contact with family and community, as well as the impact of racism and discrimination (Barn *et al* 2005).
- Unaccompanied refugee and asylum-seeking young people, particularly those aged 15 years or older, have high levels of unmet mental health needs and their transitions may be affected by their asylum claims (Chase *et al* 2008). There is also evidence that this group of young people may be excluded from services under the *Children (Leaving*

Care) Act 2000 where local authorities decided not to 'look after' them but support them under Section 17 of the *Children Act 1989* (Wade *et al* 2005). They were also likely to receive poorer housing, including bed and breakfast accommodation, and other services than looked-after young people, especially in respect of support from leaving care teams (Stanley 2001; Hai and Williams 2004).

- Young disabled people may experience inadequate planning and poor consultation, and their transitions from care may be abrupt or delayed by restricted housing and employment options and poor support aftercare (Priestley *et al* 2003).
- Although the numbers are small, young women who have been in care are more likely to become teenage parents than other young people and many have short-term difficulties in finding suitable accommodation, as well as accessing additional personal and financial support. Where leaving care services are involved they tend to offer a wide range of support and young parents appreciate this. For some young people parenthood is a very positive experience and it can also contribute to an improvement in family relationships (Barn *et al* 2005; Chase and Knight 2006; Lewis 2006; Wade 2008).

This picture has been added to by a recent Ofsted survey (2009) based on visits to six local authorities, four secure provisions, and the views of 103 care leavers. This suggests improvements have been made in:

- transitional planning for care leavers with disabilities
- building links between ethnic minority care leavers and their local community groups, assisted by interpreters, the training of carers and workforce recruitment
- meeting the needs of unaccompanied asylum-seeking young people by additional specialist training, targeted support and interventions to meet their additional needs
- providing access to additional personal and financial support for young parents.

(Ofsted 2009).

There is also evidence in the survey of improvements in access to health services by the greater flexibility and informal approaches adopted by looked-after children's nurses. This includes nurses being based part-time in leaving care teams, visiting young people in their homes, offering advice to personal advisers and developing access to other services, including substance abuse, drug and alcohol, sexual health and child and adolescent mental health services. In respect of the four secure establishments, the survey revealed an absence of pathway plans from young people's home-area local authority, although, by contrast, there was evidence of good support to young people while in secure accommodation from the local authorities, integrated working with youth offending teams, and clear exit strategies for young people on release (Ofsted 2009).

The outcomes of independent living programmes (US) and leaving care services (UK)

The outcomes of independent living programmes

Concerns about the lack of evidence of the effectiveness of independent living programmes (ILPs), despite their widespread use in the United States, led to the first

systematic review with rigorous inclusion criteria. This found no randomised or quasi-randomised controlled studies worldwide evaluating the effectiveness of ILPs (Donkoh *et al* 2006; Montgomery *et al* 2006). However, as Montgomery *et al* suggest 'despite a lack of randomisation, the available research evidence may still provide informative data to researchers and practitioners,' (Montgomery *et al* 2006 p 1437). Eight papers were identified from the systematic review that met all the inclusion criteria apart from random assignment. These assessed the effectiveness of ILPs by comparing them to usual care, no intervention or another intervention.

This review shows that in almost every study, ILP participants did better than non-participants for housing, educational attainment, employment, health and life skills outcomes. In the areas of housing and educational attainment, the findings were statistically significant in some of the studies. All eight studies examining housing report more favourable outcomes for ILP participants. This included:

- a significantly higher proportion of young people living independently at follow-up
- young people moving significantly fewer times and experiencing less homelessness.

However, although ILP participants did better than the population of care leavers, they were still poorer than the general population of young people. The review evidence did not allow reviewers to identify which elements of ILPs are most effective, which young people may benefit most from ILPs, or the mechanisms by which ILPs may influence outcomes (Montgomery *et al* 2006).

Naccarato and DeLorenzo (2008) reviewed 19 studies on independent living in order to identify their practice implications. The main implications for ILPs in relation to housing include:

- encouraging young people to maintain long-term relationships with foster parents and other supportive adults so they have a place to live during difficult times
- building links with the range of housing providers
- the development and funding of transitional living programmes, including ongoing support counselling and assistance.

Several non-randomised studies have evaluated individual ILPs using, in the main, interviews with staff and young people and different outcome measures (Reilly 2003; Rashid 2004; Geordiades 2005a, 2005b; Freundlich and Avery 2006; Freundlich *et al* 2007; Geenen *et al* 2007; Giffords *et al* 2007; Goyette 2007; Naccarato and DeLorenzo 2008). The main focus of these studies has been to identify the key messages for service providers, and given the methodological restraints they should be viewed as providing pointers. These include:

- the importance of early preparation and consistent attendance at ILPs and preparation being geared to the real challenges young people face
- involving young people and different agencies more in transitional planning
- personalising planning arrangements to meet the individual needs of young people
- encouraging social experimentation to allow young people to put into practice the skills they have gained.

- providing supported transitional living programmes for homeless care leavers, as a route into stable accommodation
- paying more attention to parenting skills, sexual behaviour and risks, and substance abuse
- being in employment before leaving care and providing ongoing support in the community
- developing more specialised responses to the needs of young people with disabilities and mental health problems
- providing interdisciplinary case management services: counselling; adult and peer mentors; employment advice
- outcome-assessment tools to enable staff to constantly assess and re-evaluate programme goals and services.

There is some evidence that many young people learn their independent living skills from their foster or residential carers, before joining an ILP, and some of these young people maintain contact with their past caseworkers. The same study emphasises the importance of collaboration between ILPs and foster, residential and family carers (Lemon *et al* 2005). There is also limited evidence that the positive outcomes of extended aftercare services for young people represents a cost saving, when taking into account the costs associated with dropping out of school, becoming a drug user or criminal (Kerman *et al* 2004).

The literature on ILPs, discussed in the wider context of research evidence of normative youth transitions in the United States shows: first, how parental support (emotional and financial) continues well into adulthood; second, the large percentages of young people who return to their family home at some time after they leave; and third, the contribution of social policy in supporting or inhibiting successful youth transitions (Collins 2001). It is suggested that services for young people leaving care should be more integrated with the child welfare system, and youth policy more generally (Collins 2004).

The outcomes of leaving care services

In the UK, since 1995, there have been a small number of studies evaluating the outcomes of leaving care services. This includes follow-up studies adopting outcome measures, policy surveys and studies of young people's views and experiences. The studies drawn on are cited within the text and include material related to accommodation, education, employment and training, and 'doing well'. Outcome evidence from an Ofsted inspection is also used. However, there are no randomised or quasi-randomised controlled studies.

Accommodation

The studies adopting outcome measures show that leaving care services can make a positive contribution to specific outcomes for care leavers. In relation to accommodation these studies show:

First, leaving care services are effective in assisting most young people leaving care in accessing housing. This includes:

- Setting up a young person's accommodation on leaving care and liaising with housing providers (housing officers and departments, housing associations and voluntary sector housing projects) as advocates for care leavers.
- The success of this process is underpinned by good relationships between the care leaver and the leaving care team and good communication between leaving care teams and housing providers.
- It is also assisted by corporate housing strategies, formal arrangements and agreed protocols between leaving care services and housing providers.

(Dixon and Stein 2005; Wade and Dixon 2006; Simon 2008; Ofsted 2009)

Implicit in this process is the approval of the 'suitability of the provider' by the 'responsible authority' (as detailed in the regulations and guidance to the *Children (Leaving Care) Act 2000*, see Introduction) although there is little specific reference to this in the research literature.

Second, studies of initial access to housing and follow-up studies, show that most young people receive the accommodation they want on leaving care and have good outcomes after leaving care (Dixon and Stein 2005; Wade and Dixon 2006; Cameron *et al* 2007; Simon 2008). In these studies positive outcomes were associated with:

- having access to 'good' housing on leaving care: those who failed to secure good housing arrangements early on tended to fair worse over the follow-up period
- having good-quality support in accommodation after leaving care
- receiving adequate planning and preparation prior to leaving care, so they had developed strong life and social skills
- being engaged in education, employment or training
- having a positive sense of their own wellbeing
- having a network of informal support, including family and friends.

Third, there is evidence that being settled and happy in accommodation after leaving care is associated with an enhanced sense of wellbeing, which is to some extent, independent of young people's past care experiences, or being unsettled at the point of leaving care (Wade and Dixon 2006). This suggests that housing has a very important and positive mediating role for young people leaving care.

Fourth, there is evidence, particularly in rural areas of a shortage of housing and increased dependency on the private sector for provision (Ofsted 2009). Bed and breakfast accommodation is being used as a short-term measure to accommodate asylum-seeking young people and those whose behaviour is described as 'chaotic' (Ofsted 2009).

Fifth, and discussed in more detail below, many young people with emotional and behavioural difficulties, mental health problems, persistent offending or substance-misuse problems and young disabled people, are likely to have the poorest housing outcomes.

As well as accommodation, there is evidence that leaving care services can also assist young people with the connected and often reinforcing pathways to adulthood, including having the life skills to manage in their accommodation (discussed below) and being in education, employment or training.

Education, employment and careers

Studies have also consistently shown poor educational and employment outcomes for young people leaving care (Dixon and Stein 2005; Barn *et al* 2005; Mallon 2005; Stein 2005b; Wade and Dixon 2006; Cameron *et al* 2007; Cashmore *et al* 2007; Stein and Munro 2008). These studies suggest that successful educational outcomes are more closely associated with:

- placement quality – feeling loved and part of the family
- stability and continuity
- being looked-after longer, more often although not exclusively achieved in foster care placements
- being female
- high carer expectations and a supportive and encouraging environment for study.

Without these foundations post-16 employment, education and training outcomes are also likely to be very poor.

Personal and professional support is important to young people in developing and pursuing their career options. The Ofsted survey provides examples of local authorities using their strategic position as an employer to help young people into work within the council and with independent employers and the contribution of specialist employment workers based in leaving care teams (Ofsted 2009). Encouragement from family members could also help young people stay engaged with education, employment and training. Generally, these studies found that young people, who left care earlier – at 16 or 17 years old – had more unsettled carer careers and challenging behaviours. They were also more likely to be unemployed and have very poor outcomes. Young people with mental health or emotional or behavioural difficulties were particularly vulnerable to poor outcomes (Wade and Dixon 2006).

Research has shown that young people who go on to higher education are more likely to have had stable care experiences, a positive experience of school, continuity in their schooling which may compensate for placement movement, been encouraged by their birth parents, even though they were unable to care for them, and have been greatly assisted by their foster carers in their schooling (Allen 2003; Jackson *et al* 2003, 2005; Merdinger and Hines 2005).

The experience of higher education can also assist young people in being in 'settled, safe accommodation'. It can provide them with the opportunity of moving into, and then, on from, more sheltered accommodation (such as a hall of residence) in their first year, to flat sharing in their second and third years. In this way, they will gain experience of looking after themselves, budgeting and negotiating with landlords, before moving to their own accommodation.

'Doing well'

Research into the outcomes for young people leaving foster care has identified key variables that distinguished those 'doing well' after leaving care, including being settled in their accommodation, from those who were less successful (Sinclair *et al* 2005): a strong attachment with a family member, partner or partner's family or foster carer was

associated with a good outcome. Conversely, those young people who were assessed as 'disturbed' at first contact – and this correlated with other key variables including performance at school, placement disruption and attachment disorder – had poorer outcomes. Another variable, involvement in work, although identified by foster carers as an indication of success, was seen by young people as problematic, especially low-paid, unfulfilling work. Young people being seen as ready and willing to leave care was also associated with the 'doing well' outcome measure.

Outcome evidence from Ofsted's inspection

Ofsted's inspection survey provides a different type of evidence from the research studies. They identified the features that were associated with good outcomes for care leavers in the six authorities and services they visited. This included:

- high aspirations for care leavers, supported by corporate parenting strategies, coordinated partnerships and the delivery of effective coordinated services
- a recognition of 'leaving care' as a process of transition; and a commitment to support young people into adulthood through positive experiences, planning, preparation and needs-led packages of support
- leaving care workers having a strong commitment and positive, robust relationships with care leavers
- young people being involved in planning, development, commissioning recruitment and training processes in order to bring about improvements in the quality of leaving care services.

(Ofsted 2009 p 6)

Resilience and outcome groups

The studies drawn on in this section of the review suggest that how young people fare in respect of their housing is in part connected to their lives in care, their transitions from care and the services they receive after care.

A synthesis of outcome studies identified within the text (Jackson *et al* 2003, 2005; Dixon *et al* 2004; Dixon and Stein 2005; Sinclair *et al* 2005; Wade and Dixon 2006; Cameron *et al* 2007; Simon 2008; as well as earlier studies reviewed in Stein 2004), linking them with research on resilience, suggests that young people may broadly fall into one of three outcome groups: those successfully 'moving on' from care, those 'surviving' and those who are 'strugglers' (Stein 2005a, 2006a; Stein and Munro 2008). However, it is recognised that this material could be synthesised differently using other outcome frameworks.

Moving on

Young people who successfully 'move on' from care are likely to have:

- had stability and continuity in their lives, including: a secure attachment relationship
- made sense of their family relationships so they could psychologically move on from them
- have achieved some educational success before leaving care.

Their preparation had been gradual, they had left care later and their moving on was likely to have been planned. Participating in further or higher education, having a job they liked or being a parent themselves played a significant part in 'feeling normal'. They welcomed the challenge of moving on, living in their own accommodation and gaining more control over their lives. They saw this as improving their confidence and self-esteem. In general, their resilience had been enhanced by their experiences both in and after care. They had been able to make good use of the help they had been offered, often maintaining contact and support from former carers. They were, in the main, living in 'settled, safe accommodation'.

Survivors

The second group, the 'survivors', had experienced more instability, movement and disruption while living in care than the 'moving on' group. They were also likely to leave care younger, with few or no qualifications, and often following a breakdown in foster care or a sudden exit from their children's home. They were likely to experience further movement and problems after leaving care, including periods of homelessness, low-paid casual or short-term, unfulfilling work and unemployment. Many in this group saw themselves as 'more tough', as having done things 'off my own back' and as 'survivors' since leaving care. They believed that the many problems they had faced, and often were still coping with, had made them more grown-up and self-reliant – although their view of themselves as independent was often contradicted by the reality of high degrees of agency dependency for assistance with accommodation, money and personal problems.

The research evidence suggests that what made the difference to 'survivors' lives, including their housing outcomes, is the professional and personal support they receive. Specialist leaving care workers and key workers could assist these young people. Also, mentoring, including mentoring by ex-care young people (or peer mentoring) may assist them during their journey to adulthood, and offer them a different type of relationship from professional support or troubled family relationships. Helping these young people in finding and maintaining their accommodation can be critical to their mental health and wellbeing. Families may also help, but returning to them may prove very problematic. Overall, some combination of personal and professional support networks could help them overcome their very poor starting points and help them sustain 'settled, safe accommodation'.

Strugglers

The third group of care leavers was the most disadvantaged in comparison to the two other groups. They had the most damaging pre-care family experiences and, in the main, care was unable to compensate them, or to help them overcome their past difficulties. Their lives in care were likely to include many further placement moves, the largest number of moves of the three groups identified in the different research studies cited above, and the associated disruption to their lives, especially in relation to their personal relationships and education.

They were also likely to have a cluster of difficulties while in care that often began earlier, including emotional and behavioural difficulties, problems at school and getting into trouble. They were the least likely of the groups to have a redeeming relationship with a family member or carer, and were likely to leave care younger, following a placement breakdown. After leaving care they were likely to be unemployed, become homeless and

have great difficulties in maintaining their accommodation. They were also highly likely to be lonely, isolated and have mental health problems, often being defined by projects as young people with very complex needs. Aftercare support was very important to them.

5 Views on what constitutes 'settled, safe accommodation'

This section sets out looked-after children and young people's (LACYP's) views on what constitutes safe and settled accommodation and looks at how these views compare to those of policy-makers, housing and children's services personnel and independent sector providers.

Key messages

- Being in 'settled, safe accommodation' is the outcome of a process for young people:
 - choosing when to leave care
 - being well prepared
 - having a choice of accommodation
 - being safe
 - being supported by leaving care services, family, friends and mentors
 - having an income or receiving financial assistance
 - being involved.
- Policy-makers and key staff from different agencies should pay attention to the different stages of this process in needs assessment and pathway planning.
- Recognition of these different stages may also alert staff to potential difficulties for young people in accessing and managing their accommodation.
- For many young people the level of leaving care grants does not cover the costs attached to moving and setting-up in accommodation.

In answering the review question the evidence is drawn, in the main, from empirical, non-evaluative studies, using small samples. As detailed in Section 3, the studies are largely based on questionnaires, interviews and focus groups with young people, carers and leaving care workers, and carried out in the UK. The studies drawn on are all identified in the body of the text.

Most young people look forward to moving on from their families to living in their own accommodation. They may have doubts and uncertainties about whether they will cope but these will be secondary to their desire to take this big step on the road to adulthood. Today, young people are likely to move into their own accommodation in their early to mid-twenties (typically when they are 24 years old) either from their family home or having had the opportunity to live away from home whilst being in higher education. They may also return home at times of difficulty. Young people moving on from children's homes and foster care also welcome being 'free' and not being 'constantly watched' (Simon 2008 p 96). But a quarter of young people leave at just 16 years of age and nearly all by the time

they are 18 years old (DfES 2006). Their journey to adulthood is shorter, more severe and often more hazardous than for most young people.

What constitutes 'settled, safe accommodation'?

Being in 'settled, safe accommodation' is part of a process, involving a number of different stages:

- choosing when to leave care
- being prepared
- having a choice of accommodation
- being safe
- being supported by workers, family, friends and mentors
- receiving financial assistance
- being involved in shaping services.

Having a choice when to leave care

To young people, 'settled, safe accommodation' means having a choice of when they leave care and move on – not just when they become 16, 17 or 18 years old (Morgan and Lindsay 2006). Consistent advice from Scottish young people who had left care to those leaving care in the future was 'don't leave care too soon ... don't believe it's as easy as people tell you, just be mature about it ... don't run before you can walk ... it's not as easy as you think' (Dixon and Stein 2005 p 159). These views are also echoed by leaving care workers and personal advisers. In a survey of their views just over three-quarters thought that young people were leaving care at too young an age (A National Voice 2005). There is also evidence that foster carers are concerned that young people leave their care before they are ready (Sinclair *et al* 2005). And the only survey of housing workers views found that 80 per cent thought that young people left care too young (A National Voice 2005).

Being prepared for leaving care

Safe and settled accommodation means being well prepared for leaving care. Young people want assistance with:

- practical skills, including budgeting, shopping, cooking and cleaning
- self-care skills, including personal hygiene, diet and health, sexual health, drugs and alcohol advice
- emotional and interpersonal skills, including personal wellbeing, negotiating skills, such as managing encounters with officials, landlords and employers.

(A National Voice 2005; Dixon and Stein 2005; Morgan and Lindsay 2006)

There is evidence that preparation in these three main areas is significantly associated with how well young people cope after leaving care, practical skills and self-care skills having the most measurable effect. Young people who left care later and young women generally did better, the latter suggesting that more attention should be paid to the

preparation skills of young men (Dixon and Stein 2005). Evaluations of good practice in regard to preparation point to the importance of:

- assessment, to identify young people's needs and how they will be met – this is an important part of the needs assessment and pathway planning process under the *Children (Leaving Care) Act 2000*
- involving young people fully in the planning process – although not all young people feel that they are being involved enough in this critical process and plans are not always up-dated
- providing ongoing support and opportunities for participation, involving discussion, negotiation and risk-taking
- the gradual learning of skills, in the context of a stable placement
- providing continuity of staff during care and at the time of leaving care
- carers being trained to assist care leavers.

(Stein 2004; Ofsted 2009)

Also, preparation should be responsive to ethnic diversity and any disability the young person may have (Priestley *et al* 2003; Barn *et al* 2005). Specialist leaving care schemes and programmes can assist carers with the development of skills training programmes, and by offering intensive compensatory help at the aftercare stage (York Consulting 2007).

Choice of accommodation

Young people want a choice of accommodation matched to their needs, although over half of young people felt 'they had no real choice', and a third that it failed 'to meet their needs' (A National Voice 2005). The range of first accommodation identified in studies of care leavers' studies includes (Wade and Dixon 2006; Simon 2008):

- young people returning to their birth families
- young people staying on in foster care after they legally leave care which may become 'supported lodgings'
- supported accommodation (supported lodgings, hostels, foyers (providing supported hostel accommodation), independent housing with floating support and trainer flats)
- independent housing (council and private tenancies)
- other settings (bed and breakfast accommodation, friends, custody).

A range of options is important in providing choice and this is likely to be influenced by local housing markets, as well as the contribution of the local authority acting as 'corporate parents' in securing access and supply for young people leaving care (Rainer 2007; NCAS 2009). However, the type of accommodation by itself tells us very little. What is equally relevant is whether young people like where they are living, whether they and their workers think that it meets their personal needs and whether the young person has the skills to cope and manage their accommodation (Wade and Dixon 2006).

Being safe

- Being 'safe' is a priority for young people (A National Voice 2005; Morgan and Lindsay 2006). For young people this means:
- a 'good location' where neighbours make an 'effort to be friendly' and living in a 'relatively crime-free area' (A National Voice 2005 p 8–9)
- not being housed in 'rough areas' where there is often drug dealing, prostitution, and where they could be the victims of break-ins.
- not living in isolated areas – far away from friends, shops and services – especially where there are poor and costly transport links.

There was also evidence of young people from black and minority ethnic groups being frightened of going out at nights in predominantly 'rough' white areas (A National Voice 2005). Also important to young people in feeling safe was:

- the condition of the physical environment in which they were living: some young people had concerns about the physical state of the property they lived in, including cold and dampness, crumbling walls and infestations
- feeling secure – young people had experience of poor security, faulty electrics and dangerous stairs
- having safe play areas -young parents had been placed in accommodation without adequate play spaces and a lack of safety fencing.

Young people returning from 'out of authority placements', who are recognised as a highly vulnerable group, may have particular difficulties in accessing social or council accommodation, unless formal arrangements are in place (Vernon 2000). Young disabled people may also miss out on access to mainstream housing as a result of inadequate planning between disability teams and leaving care services and, as a consequence, find that they are restricted to specialist disabled schemes (Morris 2002).

Practical and personal support

Young people want both practical and personal support at the time of moving on from care and when they have moved into their accommodation, including when they get into difficulties. In setting up home they would like assistance with transport for moving and their first big shop – and assistance with decorating and making their accommodation homely. Also, in the early days, young people welcome support with budgeting and help with benefits.

Young people are aware of the importance of personal support, recognising that they have both social and emotional needs, including being 'lonely and feeling depressed'. They want workers who they get on with and trust, do what they say they are going to do, and who treat them with respect (Ofsted 2009). Generally, they would like support to be more accessible and available (A National Voice 2005; Morgan and Lindsay 2006). Disabled young people would welcome more support in accessing social networks (National Foster Care Association 2000; Priestley *et al* 2003).

Research studies show that children and young people who become looked-after are subject to many of the risk factors associated with the development of mental health

problems (Koprowska and Stein 2000). The Office for National Statistics (ONS) surveys for the mental health of young people aged from 5 to 17 years old living in private households and being looked-after in England, showed that looked-after young people, aged 11 to 15, were four to five times more likely to have a mental disorder than those living in private households: 49 per cent compared with 11 per cent, conduct disorder being the most prevalent (Meltzer *et al* 2003; Fish *et al* 2009).

Research has also shown that transitions from care can combine with earlier pre-care and in-care difficulties in affecting the overall health and wellbeing of care leavers (Cameron *et al* 2007; Dixon 2008). These studies show the links between mental health and general wellbeing, as well as other dimensions of young people's lives such as risk behaviour, progress in finding a home and embarking on a career – highlighting the inter-connectedness of young people's lives (Dixon 2008). Young asylum seekers who are learning English may also have additional needs for personal support, especially in building social networks (Chase *et al* 2008).

How are leaving care services responding to these support needs? About two-thirds of young people surveyed by A National Voice were 'happy' or 'very happy' with the aftercare support they received and a similar proportion felt that when a problem arose help from leaving care services was useful (A National Voice 2005).

Two studies carried out following the introduction of the *Children (Leaving Care) Act 2000* echo these positive findings (Wade and Dixon 2006; Simon 2008). The first follow-up study found that nearly all the young people (93 per cent) had received support in achieving 'good' or 'fair' housing outcomes. At follow-up (12 to 15 months after leaving care) three-quarters were living in suitable accommodation and two-thirds of young people reported that they had been helped to look after their homes more effectively, and more than four in five young people reported that they had received help with finding somewhere to live (Wade and Dixon 2006).

The second study highlighted 'how young people's transitions were smoothed by both practical and emotional support' (Simon 2008, p 98). Ofsted's survey provides practice examples of the high levels of support being offered by leaving care teams, including out-of-hours support, a high-commitment 'can do' problem-solving approach, and assisting access to social and leisure facilities (Ofsted 2009). However, there is also evidence that mental health services are not responding to the high levels of need experienced by care leavers (McAuley 2005; Cameron *et al* 2007).

Support from families, friends and former carers

Young people can also benefit from informal support from families, former carers and friends. Having a 'sense of family' is symbolically important to care leavers, as it is to other young people – even though they recognise that it was often their families who failed them, and that poor family relationships ruled out a return home (Sinclair *et al* 2005). The limited available research evidence on this topic shows that:

- for some young people, over time, there can be increased contact and reconciliation between young people and their parents (Wade 2008)
- parents and friends can offer help when young people get into difficulties with their accommodation as well as practical help, including help with money, and company, especially where young people settled in the same neighbourhood (Simon 2008)

- young people most often cited 'mothers' as the person they would turn to if in need of help – brothers and sisters, aunts, nieces and nephews, and grandparents were also identified (Dixon and Stein 2005; Wade 2008)
- some young people were able to sustain a relationship with their foster family, or have good relationships their partner's family (Sinclair *et al* 2005)
- there are examples of formalising attachments with foster carers – foster carers being paid a retainer while a young person was at university and then full-board when they returned (Sinclair *et al* 2005).

Care may also inhibit or prevent young people's friendship networks. Feeling different by being in care and frequent change of placements could result in transitory or very weak friendships, especially at school or in the local neighbourhood, contributing to a lack of social support at the time of leaving care. Their vulnerability at this time may also be increased by the low self-esteem and lack of autonomy (Ridge and Millar 2000). However the renewal of family relationships could be a mixed blessing – sometimes helpful, other times disappointing as past difficulties resurfaced. Some young people leaving foster care are unable to psychologically distance themselves from the traumas they have suffered at the hands of their birth families – they are psychologically held back from being able to move on from care and find satisfaction with their lives after care (McAuley 2005; Sinclair *et al* 2005).

Mentoring schemes

Mentoring schemes may also offer support to young people leaving care (McBriar *et al* 2001; Clayden and Stein 2005; Ahrens *et al* 2007, 2008). They can be seen as occupying a space between formal or professional support and the informal support by families or friends, in assisting care leavers during their journey to adulthood. Research on resilience has given support to mentoring by highlighting the importance of a caring and consistent adult in the lives of vulnerable young people to help them overcome a range of problems (Stein 2005). Young people valued the advice they received from mentors during their transition to independence. They thought that mentoring had helped them with:

- important practical advice, particularly in relation to maintaining their accommodation
- assisting them in education and finding work
- relationship problems, building their confidence and improving their emotional wellbeing.

The mentor's views on the impact of mentoring generally reflected the young people's views (Clayden and Stein 2005).

Financial support

Young people are acutely aware of the importance of financial support – including being in education, employment and training – in sustaining their accommodation (Morgan and Lindsay 2006). The contribution of leaving care service to improving education and career outcomes is discussed above (Question 1). There is evidence that disadvantaged young people, including those leaving care, recognise that they are held back by a lack of qualifications (Calder and Cope 2003). Some young people also regard official educational

targets as too low (Jackson and Sachdev 2001). Follow-up research carried out since the introduction of the *Children (Leaving Care) Act 2000* shows:

- young people not completing further education courses, some 12 to 15 months after leaving care
- the 'mediating contribution' of 'good' housing outcomes to 'good' career outcomes and mental wellbeing
- the importance of specific careers advice
- the contribution of leaving care later (age 18 or over) to positive career outcomes
- young people who leave care younger and those who have mental health, emotional or behavioural difficulties are more than twice as likely to have poor carer outcomes.

(Wade and Dixon 2006)

As regards financial support received under the *Children (Leaving Care) Act*, there is evidence of considerable variation in the amounts of leaving care grants received by young people, from nothing to £2,000 or more (A National Voice 2005; Care Leavers' Foundation 2009). Most young people, personal advisers and housing workers thought that leaving care grants were insufficient in meeting the costs for moving into accommodation, setting up and maintaining a home (A National Voice 2005). The Care Leaver's Foundation research calculated that young people needed £2,500 for the most basic furnishings and essentials to enable them to live independently – but only one out of 150 local authorities surveyed provided this sum (Care Leavers Foundation 2009).

Being involved

Young people want to be involved in decisions both about their individual care, including their accommodation needs, and the services that they receive. As regards the former, the evidence presented above suggests that there is variation in practice at different stages of the process. Although many young people feel involved, not all think that they have a real choice when they leave care, or are involved in their assessment and pathway planning, or feel that they have a choice of accommodation and support matched to their needs (A National Voice 2005; Morgan and Lindsay 2006). There is evidence that advocacy services may assist young people, including with accommodation issues, although not all service level agreements include young people aged over 18 (Ofsted 2009; Stein 2009).

As regards the latter, there is evidence of young people being involved in shaping the services they receive. This includes participation in supported lodgings and fostering panels, corporate parenting panels, local authority youth parliaments and children in care panels, and various strategy groups including those related to accommodation and homelessness (NCAS 2009; Ofsted 2009). They are also involved in training and recruiting staff, meetings and training with councillors and senior staff, as 'corporate parents', and assisting other looked-after young people as peer mentors. Some young people were also playing an active role in the work of A National Voice and the National Care Advisory Service.

A synthesis of studies that include the views of young people about being in 'settled, safe accommodation' suggests that it can be viewed as part of a process, involving a number of different stages:

- having a choice when to leave care – not just being expected to leave at 16 or 17 years of age
- being well prepared in practical, self-care and emotional and interpersonal skills and feeling ready to move on
- having a good choice of accommodation matched to their needs
- being in a safe neighbourhood in safe accommodation in good physical condition close to amenities
- being well supported – by key workers, by mentors and by positive family and friendship networks
- being assisted with mental health problems and difficulties
- being in education, employment or training, to have an income or receive adequate financial assistance.

Although the evidence is more limited on the views of 'policy-makers, housing and children's services staff' and those from 'the independent sector', where it does exist, it generally supports the views of young people as regards the importance of the different stages of this process.

6 The contribution of attitudes, skills and abilities of carers, staff and families to 'settled, safe accommodation'

This section examines what we know about:

- the contribution made to being in safe, settled accommodation of looked-after children and young people (LACYF) by the attitudes, skills and abilities of foster, residential, kinship carers, supported housing staff and birth families
- interventions to support this contribution.

Key messages

- The review shows we know very little about the 'attitudes, skills and abilities' of foster and residential carers, housing staff and birth family and kinship carers.
- Young people who remain in foster care beyond 18 years of age can be assisted to make a better transition to adulthood, although this may be different from providing a stable home base.
- Both foster and residential carers do provide support to young people who have left their care, although this receives little formal recognition as part of pathway planning.
- There is very little research on young people leaving care either by moving into, or moving on from, kinship care. The limited evidence does suggest that it is seen as very positive by young people. Its potential should be further explored.
- Young people also identify a wide range of family members, beyond their birth families, who they see as their 'closest family' and who, therefore, could also be seen as a potential source of support.
- As noted in the scoping review, there are very few studies of 'the attitudes, skills and abilities' of these groups or of 'the interventions' needed to support their contribution to young people 'being in settled, safe accommodation' (Bostock *et al* 2009). As detailed in Section 3, this section is based upon just 14 studies and the majority of these (10) are based on interviews. The studies drawn on in this section are cited within the text.

Foster care: extended placements

Foster care can assist young people with their accommodation in two main ways. First, it may give them the opportunity to remain with their carers beyond the age of 18, where they are settled and want to stay. This means that they will be able to leave care gradually, when they are prepared and ready to leave – more akin to the journey made by other young people. Research studies show that this process, as distinct from the accelerated and compressed transitions made by many care leavers, is associated with better outcomes (Stein 2004). These extended placements usually come about by foster carers being re-designated as 'supported lodgings' (Wade and Dixon 2006; Broad 2008).

The proposals within the Care Matters implementation plan for piloting Right2BCared4 and Staying Put, and new provisions contained within the *Children and Young Persons Act 2008* introduce a legal and policy framework for young people to move on from care when

they are ready. The evaluation of the two pilots will also provide a stronger evidence base on the use of extended placements. The available evidence on extended placements suggests that while they provide young people with the opportunity for 'a breathing space' to make planned transitions, they rarely provide them with a stable home base into adulthood (Wade and Dixon 2006).

An evaluation of a foster care scheme for young people remaining with their foster carers up to 21 years of age describes their role as helping 'young people mature and become independent' (McCrea 2008). They need the 'attitudes, skills and abilities' to assist young people on a range of fronts including:

- motivation and encouragement with education, training and employment and helping them find suitable work
- making decisions about their future
- emotional support including dealing with past issues, help with relationships, social networks and friendships
- interpersonal skills, self-esteem and boundary setting and decision-making
- finances to support young people and maintain their interests, hobbies and keep up to date with current fashion
- independence skills such as managing and running a home, budgeting and debt management and help with preparation towards independent living
- supporting young people's contact with their birth parent(s)
- opportunities for peer support.

The scheme evaluation shows that young people, in the main, thought that their foster carers were successful in meeting their needs in these respects. However, the evaluation does not include a description or analysis of the 'attitudes, skills and abilities' required by foster carers to assist young people with these tasks, beyond recognising the changing 'parenting role' with young adults.

As regards 'interventions' to support their role, the foster carers welcomed the support they received but wanted:

- more clarification of the separate roles and responsibilities of personal advisers, social workers and carers
- more training on specific issues related to their roles (as identified above)
- opportunities for peer support meetings
- increased financial support, in recognition of the costs associated with supporting young people in this age group with regard to education, employment and training, and especially lifestyle issues.

Although not specifically connected to accommodation, Schofield's (2002) is one of the very few studies that attempts to identify the 'attitudes, skills and abilities' of foster carers as well as the 'interventions' needed, which may contribute to positive outcomes. Drawing on the accounts of 40 young adults, Schofield proposes a 'psychosocial model of long-term foster care'. The study identifies five main domains:

- to love – promoting felt security

- to act – promoting self-efficacy
- to think – promoting resolution of loss and trauma and developing reflective functions
- to belong – promoting family membership in childhood and adult life
- to hope – promoting resilience.

Each of these domains contains specific points related to 'attitudes, skills and abilities'.

Foster care: providing ongoing support

The second way in which foster carers may assist young people with their accommodation is through providing ongoing support after young people have left their care. The evidence suggests that:

- such contact is common at first but drops off sharply over time
- it is generally very positive for young people and may reduce social isolation
- it can support young people in their life and social skills – both of which may help young people remain in their accommodation
- it is unlikely to be able to help young people when they face major difficulties in their lives
- as an 'intervention' it is invisible, in that it takes place informally, outside of the pathway planning process, and without financial support.

(Sinclair *et al* 2005; Wade 2008)

There is also one description of a 'pro-teen fostering' project which made provision for young people who found it too difficult to cope alone, to return to their foster placement until they felt they were prepared and ready to be 're-launched'. The project also provided the foster carers with additional and flexible financial support to maintain ongoing contact with young people (Jackson and Thomas 2001).

Residential workers

No recent studies of residential care were identified in the scoping review relevant to addressing this question (Bostock *et al* 2009). At a more general level, research into the outcomes of a social-pedagogical approach in residential care in Germany showed that positive gains made whilst in care, in education, life management, reduced offending; personality development and social relations, had been maintained for a majority of young people four to five years after leaving care (Stein and Munro 2008).

Social pedagogy represents a different approach to the practice of residential work in England, including different training and skills. It is also being piloted and evaluated as part of the Care Matters implementation plan. Research comparing English, German and Danish residential homes showed that those in Germany and Denmark, employing social pedagogues, considered it an important part of their role to help young people find suitable accommodation (Petrie *et al* 2006). There is evidence from England of young people keeping in touch with residential workers after they leave children's homes. Keeping in touch with former foster carers brings similar benefits to young people, and is also an unacknowledged and unsupported 'intervention' (Wade 2008).

Kinship care

Research studies on kinship care have, in the main, focused on younger children, and as a consequence very little attention has been given to leaving care from such placements, including the adult outcomes of former kinship care children (Inglehart 2004; Stein 2009). Only one study by Broad *et al* (2001) casts light on the 'attitudes, skills and abilities' of kinship carers which may be seen as helping young people feel 'safe and settled' in accommodation. From the viewpoint of young people, kinship carers made them:

- feel loved, valued and cared for, especially after being in care or by not going into care
- feel safe from harm and threatening behaviour in care
- feel they were listened to
- sustain a sense of who they are, through contact with family, siblings and friends
- feel that they belong and feel settled, especially in not being moved around.

The potential contribution of kinship care in providing young people with 'settled, safe accommodation' is underdeveloped – currently only about 11 per cent of looked-after children, of all ages, are placed with 'family and friends' in England (Stein 2009)

There is also evidence that young people identify a wide range of family members in their kinship network who they regard as their 'closest family', including siblings, aunts and uncles, and grandparents. Yet both social workers and leaving care workers are not good at identifying them or involving them in leaving care planning (Wade 2008).

Birth families

As discussed above (in response to the previous question), birth family relationships can be a mixed blessing. Where they are positive they can provide both practical and emotional support to young people, including assistance with accommodation and help when they may get into difficulties (Marsh and Peel 1999, cited in Stein 2004; Simon 2008). However, past difficulties in relationships may also cast a long shadow on young people's lives, making it more difficult for them to settle down. There is evidence that young people may regress educationally and suffer harm when they return home. Also, some young people leaving foster care are unable to distance themselves psychologically from the traumas they have suffered at the hands of their birth families – they are held back from being able to move on from care and find satisfaction with their lives after care (McAuley 2005; Sinclair *et al* 2005).

In this context, assessment of birth parents' 'attitudes, skills and abilities', and the 'interventions' needed in supporting parents, in meeting young people's accommodation needs, will be critical to the pathway planning process.

The review shows we know very little about the 'attitudes, skills and abilities' of foster and residential carers, housing staff and birth family and kinship carers. What we do know is that young people who remain in foster care can be assisted to make a better transition to adulthood, although this may be different from providing a stable home base. The review also shows that both foster and residential carers do provide support to young people who have left their care, although this receives little formal recognition as part of pathway planning. There is very little research on young people leaving care either by moving into,

or moving on from, kinship care. The limited evidence does suggest that it is seen as very positive by young people. Its potential should, therefore, be further explored. Young people also identify a wide range of family members, beyond their birth families, who they see as their 'closest family' and who could also be seen as a potential source of support. But, again, there is little evidence of their involvement in the pathway planning process.

7 Characteristics of young people not in suitable accommodation at age 19

This section identifies what we know about the 12.6 per cent of young people not in suitable accommodation at age 19 (as defined by national indicator 147).

Key messages

- There is a distinction to be made between young people who may experience homelessness, some time after leaving care, and those who have more entrenched poor housing outcomes.
- Leaving care services, the use of 'emergency accommodation' and better contingency planning may help prevent homelessness episodes.
- The groups most vulnerable to poor housing outcomes are young people with social, emotional and behavioural difficulties; those involved in offending, including a history of violence, substance misuse and running away from care; young disabled people who do not meet the threshold for adult services; and young asylum seekers with mental health problems.
- This suggests improving housing outcomes will require a multi-agency response including preventative services and interventions in response to the needs of the high-risk groups identified above.

It is based on 30 studies including 15 UK and 15 US studies. The majority are empirical and there is a mix of descriptive and evaluative work. The studies drawn on in this section are all cited in the text. As noted in the scoping review, 'current published data from the Department for Children, Schools and Families (SFR23/08) does not distinguish between suitable and unsuitable accommodation (DCSF 2008)' (Bostock *et al* 2009 p26). The Statistical First Release from 2007 (DCSF 2008) made this distinction, identifying 87.3 per cent of young people who were looked-after at age 16, in April 2004, as being in suitable accommodation at age 19.

Homelessness and housing outcomes

Recent research studies show that about one-third of young people experience homelessness at some stage, between six and 24 months after leaving care (Dixon and Stein 2005; Wade and Dixon 2006). The pattern in these follow-up studies was for these young people to move in and out of homelessness and there was not necessarily a connection between single episodes of homelessness and final housing outcomes.

In these studies homelessness had involved young people staying – or more likely 'kipping on the floor or the sofa' – with family or friends to prevent them 'sleeping rough', stopping at homeless hostels or refuges, sleeping rough, or spending short periods in bed and breakfast accommodation. The provision of more 'emergency accommodation' and better contingency planning could prevent some of these episodes (NCAS 2009; Ofsted 2009). Opportunities for young people to return to foster care placements could also be considered (Jackson and Thomas 2001).

There is recent evidence that the proportion of rough sleepers with a care background has fallen from 17 per cent in 2001–02, to 7 per cent in 2007–08: 'The findings do suggest an improvement in the way young people and children in care are provided with the skills for independent living and advice and support with housing when they become adults and leave care' (National Centre for Social Research 2009 p 4).

Care leavers most vulnerable to poor housing outcomes

The patterns from these follow-up studies and related research also suggests key issues in respect of the group of care leavers who are most vulnerable to be living in unsuitable accommodation.

First, they are likely to leave care early, often at 16 or 17 years of age, following a placement breakdown. Some of these young people see themselves as 'out of place' and 'pushed out' of children's homes and 'too old' for foster care (Dixon and Stein 2005 p 72). Leaving care early may also be a result of young people's expectations, wanting to be independent, 'I was 16, I felt ready and wanted to move on' (Dixon and Stein 2005 p 72).

A survey of all 35 Scottish local authorities and the views of young people and workers also showed that young people may feel pressure to leave care at just 16, before they feel they are prepared or ready to leave (SCCYP 2008). The views of these young people raise issues about the role, culture and organisation of both children's homes and foster care in relation to preparing, engaging and supporting young people during their journey to adulthood, as distinct from their role in looking after younger children.

There is also evidence that foster placement breakdown may be a consequence of young people being unable to settle and commit themselves to their foster carers because of their unresolved feeling towards their birth families (Sinclair *et al* 2005). Leaving care early is also strongly associated with young people being at greater risk of unemployment after care which is likely to contribute to young people being in unsuitable accommodation (Wade and Dixon 2006).

Second, this group of highly vulnerable young people is likely to move more frequently for negative reasons. This may include an inability to manage in their accommodation, getting into debt, or not getting on with the people with whom they are living. Also, those who moved most frequently, for negative reasons, often found themselves in the most unstable and insecure types of accommodation. This included bed and breakfast, hostels, friends and returning to very difficult family relationships (Dixon and Stein 2005).

Third, frequent movement and instability, and poor housing outcomes are significantly higher for young people with mental health problems, emotional and behavioural difficulties, and those involved in offending, running away from care and substance misuse (Slesnick and Meade 2001; Social Exclusion Unit 2002; Vasillou and Ryrie 2006; Wade and Dixon 2006). Evidence from the US suggests that the roots of these problems, resulting in homelessness, may be related to the 'more general out-of-home care experience', including the lasting effects of abuse, removal from the family home and lack of family support, rather than failures of specific preparation programmes (Park *et al* 2004).

There is evidence in relation to men who have sex with men, including those who have been in care that homelessness itself may contribute to drug use and result in poor access to healthcare (Clatts *et al* 2005; Kushel *et al* 2007). In addition to these groups, young disabled people, young asylum seekers and young offenders leaving secure

accommodation – including those who have a history of violence – are vulnerable to poor housing outcomes (Stanley 2001; Youth Justice Board 2007).

As detailed above, there is evidence that leaving care services and independent living programmes can assist young people when they get into difficulties (Collins 2001; Dixon and Stein 2005; Georgiades 2005a; Courtney and Dworsky 2006; Wade and Dixon 2006). Even for those young people experiencing the greatest instability, continuity of support by services can prevent a descent into homelessness or a rapid escape from it. This is achieved in two ways: first, by the role of leaving care services in accessing a range of accommodation options, including emergency accommodation; second, by the commitment and ongoing support from leaving care workers in helping young people in sustaining their tenancies and being available to assist them at times of crisis (Simon 2008).

However, as detailed above, preventing and helping young people out of homelessness, experienced by about a third of young people in follow-up studies, is different from tackling more entrenched poor housing outcomes – or those young people 'not in suitable accommodation'. It is those young people who leave care early, who have many negative moves and who have a lot of problems that present the biggest challenge to leaving care services.

The current legal and policy provisions for young people to leave care later – when they are prepared and ready to leave – are a starting point. But the evidence also suggests that more attention needs to be given to young people with complex problems. Drawing on the youth homelessness literature highlights the importance of preventative services (Quilgars *et al* 2008). In the context of the different groups of very troubled young people living in care this suggests:

- The need for early identification of problems and agreed multi-agency interventions (Biehal *et al* 2000; Slesnick and Meade 2001).
- Where problems persist during and after care, the evidence shows that there is a shortage of more specialist accommodation for young people with higher support needs, including young people with mental health problems, disabled young people who do not meet the threshold for adult services, persistent offenders and young people with drug dependencies (Wade and Dixon 2006).
- This suggests the need for a more comprehensive approach, across the life course of care leavers, from early prevention to ongoing aftercare support (Choca *et al* 2004).

8 Conclusions and main messages

Increasing the numbers of care leavers in 'settled, safe accommodation' has been the subject of this research review. The evidence shows that how young people fare after they leave care, including, in relation to their housing, is associated with their experiences while they are in care, their transitions from care and the services they receive. Being in 'settled, safe accommodation' is also associated with connected and reinforcing pathways to adulthood: entering further and higher education or training, finding satisfying employment, and achieving good health and a positive sense of wellbeing.

The foundation stones upon which effective leaving care services must build are good-quality placements providing young people with stability, giving high priority to their education, health and wellbeing, and supporting them during their gradual journey into adulthood. These are also the foundations for promoting resilience – for young people achieving the Every Child Matters outcomes. The review also identified how leaving care services may contribute to each of the five outcomes in respect of young people being in 'settled, safe accommodation'.

Be healthy

There is evidence that being settled in accommodation can contribute to a young person's enhanced sense of wellbeing, and this can, to some extent, help some young people overcome past difficulties. However, this is not the case for young people with very complex needs, including mental health problems and social, emotional and behavioural difficulties. They are less likely to be able to settle, and have the poorest housing outcomes. There is some evidence that healthcare, including physical health and emotional wellbeing, does not receive as much attention in leaving care services as other areas of need. There is also evidence that services for disabled young people are not always well coordinated with leaving care services resulting in restricted housing choices and poor support after care.

Staying safe

Studies show that not all young people feel safe in their accommodation. They have serious concerns about living in 'rough areas' with high levels of crime, including drug dealing, prostitution and thieving. They also feel unsafe when living in isolated areas, away from social networks and facilities, including work and college, shops and leisure. Black and minority ethnic (BME) young people could feel unsafe in 'rough' predominantly white areas. The physical state of their properties could also concern young people, especially if they had poor security, faulty electrical wiring and were generally run down or neglected. Young mothers could fear for their children's safety if there were unsafe play facilities.

Enjoy and achieve

A positive experience of education provides the platform for future success in careers, including young people being able to support themselves and manage their accommodation. The research review shows that good educational outcomes are associated with placement quality, providing for stability, a carer highly committed to helping the young person with their education, and a supportive and encouraging

environment for study. There is also evidence that young people who have had several placements can achieve educational success if they remain in the same school, maintaining positive friendships and contacts with helpful teachers.

Make a positive contribution

School, further and higher education, employment, or care itself, may also open the door for participation in a range of leisure or extra curricular activities that may lead to new friends and opportunities, including the learning of new skills. The review shows that positive friendship networks can support and assist young people in being settled in their accommodation, and in helping them when they get into difficulties. There is also evidence of young people making a positive contribution through their involvement in service development, planning, recruitment, training, as well as in organisations such as A National Voice and the National Care Advisory Service.

Achieve economic wellbeing

The review shows that young people are acutely aware of the importance of having an income or consistent financial support, in sustaining their accommodation, including being in education, employment and training. The evidence suggests that although leaving care services can greatly assist young people in accessing further and higher education, employment and training, the foundations of future achievements lie within having a positive experience of school and the factors associated with this, as identified above.

Policy and practice recommendations arising from the review

The Every Child Matters outcomes framework reflects normative aspirations for children and young people – what any good parent would want for their child – and proposes a model of whole-system change to bring about improvements in outcomes. The issues identified below, arising from the main findings of this review, will have implications for the different layers of the 'onion' (DCSF 2008b). The aim of this review is to identify evidence-informed recommendations, as a basis for Children's Trusts, acting as corporate parents, to develop in detail the 'wedge of the onion', including what actions would be necessary to connect outcomes for young people through to inter-agency governance. The evidence of variability in the range and quality of services is a major challenge that has implications for central government, including the contribution of National Standards and revised Guidance.

A connecting theme of this review is young people having the opportunity for more gradual and supported transitions well into adulthood. This is recognised in the current and proposed legal and policy framework. However, the implications are far reaching and will require major changes in the way services are planned and organised by local authorities acting as corporate parents.

Inter-agency governance

- Children's Trusts should identify that the main purpose of multi-agency services is the preparation and support for young people from care into adulthood – not just at the time of 'leaving care'.

- This purpose, as well as the linked accommodation and support needs of young people, should be detailed in the Children and Young People's Plan, the local authorities housing and homeless strategies and the Supporting People strategy.
- Children's Trusts should carry out a strategic review of the implications of this purpose for: the relationship between children's and adult services; the recruitment, support, funding and training of foster carers, including their re-designation as supported lodgings; the organisation, role and culture of children's homes; the contribution of kinship care; and the supply and range of supported transitional accommodation.

The review shows that leaving care services are successful in assisting most young people in accessing and maintaining their accommodation. For young people, being in 'settled, safe accommodation' is the outcome of a process, involving a number of different stages: choosing when to leave care; being well prepared; having a choice of accommodation; being safe; being supported by leaving care services, family, friends and mentors; having an income or receiving financial assistance; and being involved. Services could be improved by:

Integrated processes

- Joint protocols and agreements between children's services, housing authorities, health, adult services and the third sector, to increase the choice and range of accommodation options available to young people from care into adulthood.
- Recognition of the different stages (identified above) within policy documentation and practice guides.
- Greater multi-agency recognition of the accommodation and support needs of specific groups of young people, including: those with mental health problems and complex needs; those returning from 'out of authority' placements who may be very vulnerable and require intensive support; young parents; BME young people – recognition of family and community links, and young asylum seekers. This should include joint protocols and agreements in respect of these vulnerable groups and for service commissioning
- Better joint planning and coordination between leaving care services and disability teams of accommodation services for disabled young people
- Good-quality needs assessment and pathway planning is essential in order to identify the individual housing needs of young people and improve their housing outcomes.

Integrated strategies

- Children's services and housing authorities should review the level of leaving care grants to ensure they cover the costs attached to moving and setting-up in accommodation.
- Monitoring of services and outcome evidence, to assess the impact of services and strategies.

Integrated frontline delivery

- Leaving care services and housing should ensure accommodation is in a safe neighbourhood, close to required facilities, and in a good physical condition.
- Needs assessments and pathway planning should ensure young people have the range and levels of support they need, including out-of-hours support, by leaving care services, mentoring and informal family, friendship and kinship networks.

The review shows that we know very little about the 'attitudes, skills and abilities' of carers, families and staff. In addition to much-needed research, more consideration should be given at a **strategic level** to:

- formal recognition of the role, training and support needs of former foster and residential carers in providing ongoing personal and practical support
- the contribution of kinship care including extended family and friendship networks, in supporting young people after they leave care.

The evidence suggests that there is a distinction to be made between young people who may experience homelessness, some time after leaving care, and those who have more entrenched poor housing outcomes. Leaving care services assist most of the former group, although more emergency accommodation and better contingency planning may prevent homelessness. It is the latter group who are most likely to be in unsuitable accommodation. The main strategic implications are:

- The development of preventative services by housing and children's services, including the early identification of problems and the provision of emergency accommodation.
- Multi-agency interventions in response to the groups of young people most vulnerable to poor housing outcomes. The high-risk groups are: young people with mental health problems and social emotional and behavioural difficulties; those involved in offending, including a history of violence, substance misuse and running away from care; young disabled people who do not meet the threshold for adult services; and young asylum seekers with mental health problems.
- Children's services, housing and health should review the need for more specialist accommodation for young people with higher support needs.

Data annexe

1. Introduction and availability of data

The main focus of this priority is 'increasing the number of care leavers (young people) in "settled, safe accommodation"'. In the majority of cases, children cease to be looked-after on their 18th birthday, although, under the provisions of the *Children Act 1989 Section 20(5)* (GB. Statutes 1989) young people may be looked-after until their 21st birthday if they are being looked-after in a community home suitable for children aged 16 and over. In practice, few young people fall into this category and, according to the Department for Children, Schools and Families (DCSF), those that do, tend to be young persons with severe physical or mental disabilities (DCSF 2009).

The DCSF is the main source of data on Every Child Matters (ECM) outcomes for looked-after children up to the age of 16. It provides data on activities and accommodation on their 19th birthday for those young people who were looked-after during the final year of compulsory education (Year 11). Tracking data on young people who were looked-after in previous academic years, but who returned to their families by Year 11, is not systematically recorded.

This data annexe presents further discussion about the data currently available on the accommodation of care leavers. It provides:

- a summary of the search strategy for identifying data
- an overview of the nature and scope of the data that was found, with a brief commentary on the quality of this data, and any gaps that have been identified
- some examples of the types of charts and diagrams that could be produced, showing, for example, comparisons between outcomes for looked-after children and all children.

A summary table of the data sources of readily available, published data for looked-after children at a national, regional and/or local authority level is produced in Appendix 2 of this data annexe.

2. Search strategy

There are a number of archival databases in the UK, such as the National Digital Archive of Datasets (NDAD) and the UK Data Archive, some of which have services that facilitate searching or access to macro- and micro-datasets (including Economic and Social Data Service (ESDS) International). Even so, searching for current and recently published data cannot yet be conducted in the same way as searching for published research findings. Access to newly published data is not supported by comprehensive searchable databases

in the same way that literature searches are supported, although the DCSF and Department for Innovation, Universities & Skills (DIUS) produce a publications schedule for Statistical First Releases and Statistical Volumes.

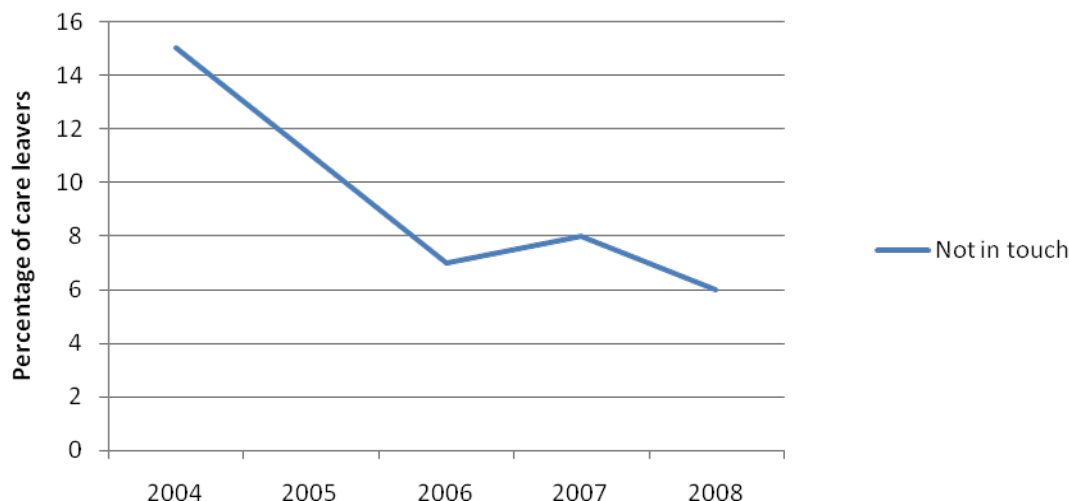
Data for this data annexe was obtained by a combination of search methods but primarily by obtaining online access to known government publications (such as the Statistical First Releases and Statistical Volumes from the DCSF) and exploring data published by the Department of Health and Office for National Statistics, other government departments, the National Health Service and other national, regional and local bodies. It should be noted that links to statistical sources that were live at the time of searching may not remain live at the time of publication.

3. Nature and scope of the data

Data on looked-after children has been collated for at least seven years via local authority OC2 statistical returns. Data on the outcomes for children and young people who are looked-after is presented for fewer young people than would actually have been in care, as it refers only to those young people who were in care continuously for a period of at least 12 months. In 2007, for example, a total of 60,000 young people were recorded as having been looked-after. Of these, 44,200 (just under three-quarters) were identified as having been in long-term care.

4. Examples of charts showing trends

The key change in relation to the National Indicator 147 (care leavers in suitable accommodation) is that the proportion of those about whom local authorities have no information has decreased markedly from 15 per cent in 2004 (see Figure 2). Nonetheless, the data indicates that for at least 6 per cent of the 5,800 children and young people who comprised the long-term looked-after cohort in 2008, living facilities were unknown.

Figure 2. Care leavers with whom the local authorities have no contact

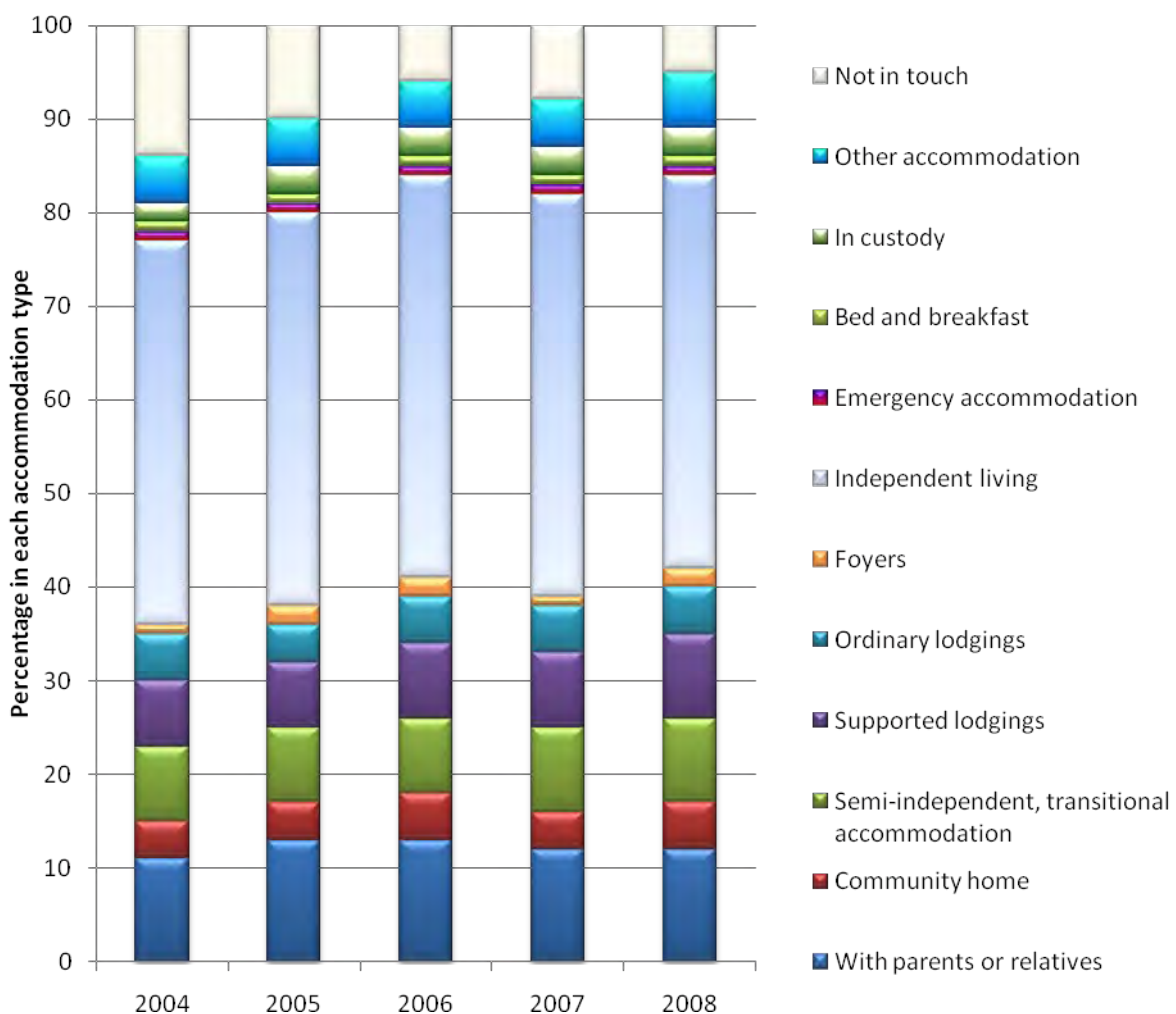
Source: DCSF 2008

Although data on accommodation at age 19 is now available for 94 per cent of the 5,800 young people who were in the cohort in local authority care for at least 12 months by April 2005, current published data from the DCSF (SFR23/2008) does not distinguish between suitable and unsuitable accommodation (DCSF 2008). Earlier publications, such as the Statistical First Release for 2007 (DCSF 2007) (updated 31/03/08) made this distinction, with 87.3 per cent of the young people who were looked-after at age 16, in April 2004 (5,800), said to be in accommodation considered suitable at age 19 (an increase of 12.8 percentage points since 2003). For 5 per cent, however, accommodation at age 19 was not deemed suitable.

Publicly available data (9 March 2009) does not yet distinguish between suitable and unsuitable accommodation for the cohort who were aged 16 and in care in April 2005. The trend data published in the DCSF Statistical First Release for 2008 (DCSF 2008) differs from historical data as a result of 'implemented amendments and corrections'. The picture now available suggests that there has been a marginal increase over the five years from 2004 to 2008 in the proportion of care leavers living in supported lodgings (from 7 to 9 per cent), but that the proportion living in other types of accommodation has remained fairly constant across the years. The highest proportion of care leavers in each year (over 40 per cent) appear to have been living independently, with smaller proportions living with parents or relatives (around 12 per cent), in semi-independent or transitional accommodation (around 9 per cent) or in community homes (around 5 per cent). For some, however, living facilities were in custody (3 per cent), in emergency accommodation (1 per cent) or in some form of bed and breakfast arrangement (1 per cent). Figure 3 provides an overview of the pattern of accommodation.

Accurate comparisons with the living circumstances of all other young people in this age group are not available, though the indications from Stein (2004) are that young people leaving care may be more likely to become young householders or become homeless than their peers. The difficulties faced by some young people leaving care were highlighted in the Stein report (2004), which suggested that there was evidence that young disabled people leaving care were not accessing mainstream services.

Figure 3. Accommodation of care leavers: by type of setting



Source: DCSF 2008

5. Summary

Data is available on the accommodation types of young care leavers who had been looked-after continuously for at least 12 months and who were still in care aged 16 in April

of their final year of compulsory education. The most recent dataset, however, does not distinguish between accommodation deemed suitable and that deemed unsuitable.

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Appendix 1: Research review methods

The review includes literature identified by a Centre for Excellence and Outcomes in Children and Young People's Services scoping study (Bostock *et al* 2009) as being relevant to the review questions. The scoping study used systematic searching of key databases and other sources to identify literature that was then screened and coded (see other Appendices for the parameters document, search strategy and coding frame). Apart from reference harvesting, no further searching for material other than that located by the scoping review was undertaken for this review (although three recently published reports, highly relevant to this review were included).

The review team used a 'best evidence' approach to select literature of the greatest relevance and quality for the review. This entailed identifying:

- the items of greatest relevance to the review questions
- the items that came closest to providing an ideal design to answer the review questions
- the quality of the research methods, execution and reporting.

The review team investigated all priority items and summarised their findings in relation to the review questions. The team also assessed the quality of the evidence in each case. In judging the quality of studies, they were guided by principles established to assess quantitative research (Farrington *et al* 2002) and qualitative studies (Spencer *et al* 2003).

Appendix 2: Scoping study process

The study began with the Theme Advisory Group (TAG) – a group of experts in the policy, research and practice field of vulnerable (looked-after) children – establishing the key questions to be addressed and the parameters for the search (see Appendix 1). The scoping study used a broad range of sources to identify relevant material:

- searches of bibliographic databases
- searches of research project databases
- browsing the websites of relevant organisations
- recommendations from TAG.

(See the Search strategy section below for the sources and strategy used.)

The research team undertook an initial screening process of the search results, using record titles and abstracts (where available) to ensure the search results conformed to the search parameters and were relevant for answering the scoping study questions. Items were excluded if:

- they were not about looked-after children or care leavers, aged up to 25
- they had been published before 2000
- they were not from a peer-reviewed journal or report or not a key book
- they were not empirical research
- they did not relate to a study in the UK, Ireland, USA, Canada, Australia or New Zealand
- they did not answer the scoping study questions
- a fuller report was published elsewhere

- they could not be obtained in full text, either at all, or within the scoping study deadline
- they were duplicate records.

The inclusion/exclusion criteria are shown in Table 8.

Table 8. Inclusion/exclusion criteria

The following criteria were applied sequentially from the top down:

Inclusion/ exclusion criteria		Guidance
1	Exclude date of publication if before 2000	Published before 2000
2	Exclude publication type if not peer-reviewed journal or report	Exclude books, dissertation abstracts, trade magazines, policy (unless evaluated), guidance (unless evaluated) Include relevant reports, evaluated policy
3	Exclude location if not UK, Ireland, USA, Canada, Australia, New Zealand	
4	Exclude population if not about looked-after children or care leavers, or their care	Upper age limit 25
5	Exclude research type if not empirical research	Exclude case study, vignette, opinion piece, commentary or briefing

6	Exclude scope	Use if not excluded above but does not answer one of the questions
7	Exclude if insufficient details to identify reference	
8	Exclude if unable to retrieve	Covers records for which full text could not be obtained at all or not in time for this piece of work
9	Exclude full study already reported	For studies where identical methodology and findings are reported in more than one record
10	INCLUDE	Guidance not excluded by the above
Extra exclusion criterion for questions 3.2.2, and for 3.2.3 where intervention involved	Exclude not intervention	Intervention is defined as a named, bounded, activity or set of activities with specific objectives that are assessed/evaluated in some way.

Additional criteria were applied in relation to sub-questions 3.2.2 and 3.2.3 and the records rescreened. This served to define interventions more strictly as a specific activity with specified outcomes that concerned the emotional and behavioural health (EBH) of looked-after children and young people (LACYF). The papers included in 3.2.2 and 3.2.3 were also required to include some evaluation of outcomes, whether related to effectiveness, accessibility or acceptability: descriptive accounts were excluded as it was felt they did not contribute to our understanding of interventions. These measures were intended to narrow the focus and to exclude system-wide approaches (such as an account of introducing looked-after children (LAC) into a child welfare system). While system-wide approaches may concern the EBH of LACYF, they are not always linked directly to outcomes addressing emotional and behavioural difficulties and usually have a wide remit to improve the overall performance and accountability of the child welfare system. Policy was excluded unless evaluated.

A proportion of records of doubtful relevance according to the available abstract/title were parked for later examination.

Records from the searches which were screened as relevant according to title or abstract were then loaded into the Evidence for Policy and Practice Information and Co-ordinating Centre (EPPI)-Reviewer database.

Full texts were retrieved for the second stage of screening, since the team considered that scoping required the use of full texts. All records screened for inclusion were sought. Inclusion/exclusion criteria were then applied to the full text articles. Approximately one-third of retrieved items were excluded using full texts (see exclusion criteria above; see flow chart, below). Thirty-eight items could not be retrieved in full text within the scoping study deadline.

The content of the **rejected** records included those that focused on:

- adopted children
- policy
- overviews or briefings of the topic
- descriptions of interventions with no indication of outcomes.

The research team then assessed the remaining items and coded them in relation to the following:

- relevance to research question or questions
- country (UK, Ireland, Canada, USA, Australia or New Zealand)
- study type (including experimental study with comparison/control, non-experimental study, systematic review etc.)
- main methods (including survey, interviews and focus groups, control trial, literature review etc.)
- intervention setting (including foster care, residential care, school, housing services or floating support etc.)
- study population (including LACYP, care leavers, health, education, housing and education staff etc.)
- cross-cutting issues (child poverty and safeguarding).

It was subsequently agreed that the term 'intervention setting' is an ambiguous, and therefore unhelpful, term. It can capture both the environmental space in which an intervention happens (a school meeting room, for example) or the context in which the child(ren) are placed. Many studies don't report either and, therefore, the scoping review does not analyse the responses checked on this section of the coding form.

An agreed part of the scoping methodology was to undertake independent coding quality assurance checks on 10 per cent of the references. References were selected randomly from EndNote listings of papers allocated to each sub-question. In addition, all studies excluded on reading the full text were checked (i.e. reviewed by at least two people).

The checks on coding demonstrated a high degree of consistency and reliability in the use of the coding tool. With minor exceptions (for example, varied understanding of 'intervention setting': see above), the result of double coding was principally to add to the recording of methodological detail.

The check on exclusions at full text again demonstrated the consistent and reliable use of scoping criteria, and did not reveal any systematic bias in the decisions. In three cases, an exclusion decision was subject to further discussion before being resolved. The process is summarised in Table 9 below.

Table 9. Summary of different stages

	Stage	Material used
1	Question setting	
2	Searching, browsing and recommendations to identify relevant material	
3	Initial screening using inclusion/exclusion criteria	Using title and abstract
4	Included studies entered into EPPI-Reviewer software	
5	Second stage screening	Using full paper
6	Final included studies coded	Using full paper
7	QA on 10% of coded papers	Full paper
8	Assessment of content and scope of included papers	Full paper

See Table 12 (below) for a full copy of the coding tool.

The numbers of items found by the initial search, and subsequently selected, can be found in the following table. The three columns represent:

- items found in the initial searches
- items selected at first screening for further consideration (that is those complying with the search parameters after the removal of duplicates)

- items considered relevant to the study at second screening by a researcher who had read the abstract and/or accessed the full document.

Table 10. Overview of searches for all topics

Source	Items found ¹	Items selected for consideration	Items identified as relevant to this theme
Databases			
Applied Social Sciences Index and Abstracts (ASSIA)	3,508	128	7
Australian Society and Family Abstracts	59	52	2
British Education Index (BEI)	443	291	7
ChildData	8,576	977	57
CINAHL Plus	3,889	576	29
Cochrane Library	71	10	1
EMBASE	2,929	277	2
Google	n/a	1	1
HMIC	2,615	154	0
IBSS	900	47	6
MEDLINE	3,325	235	15
PsycInfo	4,539	908	26
Social Care Online	7,673	490	35
Social Services Abstracts	3,114	257	6

¹ Where n/a is indicated, this is because these resources were browsed rather than searched. Initial output was publication date from beginning of 1990, this was restricted to the start of 2000 at first screening.

Social Work Abstracts	2,044	187	3
Zetoc	1,159	4	1
Internet databases/portals (also see Search strategy section)			
Barnardo's	n/a	1	1
British Library Welfare Reform on the Web	n/a	n/a	n/a
CERUKplus	57	47	1
Intute	n/a	n/a	n/a
INVOLVE	n/a	n/a	n/a
JSTOR	n/a	n/a	n/a
Research Register for Social Care	Incorporated in Social Care Online search		
Reference harvest 'Taking care of education'	n/a	9	2
TAG recommendations (including texts and organisations)	n/a	56	8

Note: duplicate removal was ongoing throughout the process.

Total number of relevant records by question

3.3 Care leavers in 'settled, safe accommodation': 83

3.3.1 LACYP's views: 50

3.3.2 Services/interventions (effectiveness, acceptability, accessibility): 63

3.3.3 Attitudes and skills of carers and families: 12

3.3.4 What is known about those not in 'settled, safe accommodation' at 19?: 26

Note: studies may be coded as relevant to more than one priority.

Table 11. Overview of search output for care leavers in 'settled, safe accommodation'

Source	Items identified as relevant to this priority
Databases	
ASSIA	1
Australian Society and Family Abstracts	0
BEI	2
ChildData	22
CINAHL Plus	6
Cochrane Library	1
EMBASE	0
HMIC	0
Google	0
IBSS	3
MEDLINE	4
PsycInfo	8
Social Care Online	14
Social Services Abstracts	2

Social Work Abstracts	2
Zetoc	1
Barnardo's	1
Reference harvest: 'Taking care of education'	1
TAG recommendations (including texts and organisations)	15

Note: as this was derived from aggregated output of all searches, no columns are given for initial output.

Search strategy

The following section provides information on the keywords and search strategy for each database and web source searched as part of the scoping study. Searching was carried out by the Social Care Institute for Excellence (SCIE) social care information specialist.

The list of databases and sources to be searched included the databases recommended for systematic reviews, 40 organisations' databases and subject portals identified by a SCIE scope and recommendations from TAG members. The general approach was:

- A detailed search on relevant terms for the looked-after children population was carried out across 15 databases. The search strategy was translated for each database and the output was de-duplicated, creating a database of approximately 19,000 records.
- Topic-specific searches were carried out on this combined population database, to create a second database.
- References obtained by recommendation and browsing were added to these records, creating a database of approximately 5,000 records.
- All these records were screened for relevance to all the questions. This approach dealt with significant overlap in topic relevance between the priorities.

All searches were limited to publication years 2000 to 2008, in English language only.

Increasing the number of care leavers in 'settled, safe accommodation'

The keywords used in the searches, together with a brief description of each of the databases searched, are outlined below.

The following conventions have been used: (ft) denotes that free-text search terms were used and * denotes a truncation of terms. (+NT) denotes that narrower subject terms have been included (where available).

1.1.1 Stage 1

1.1.2. Compiling the looked-after children population set

Applied Social Sciences Index and Abstracts (ASSIA)

(searched via CSA Illumina 27/08/08)

ASSIA is an index of articles from over 500 international English language social science journal

- | | | | |
|----|---|-----|---|
| #1 | looked-after child* (ft) | #10 | #6 and #9 |
| #2 | child* in care (ft) | #11 | care orders |
| #3 | foster care (+NT) | #12 | special guardianship (ft) |
| #4 | adoption (+NT) | #13 | leaving care (ft) |
| #5 | kinship care (ft) | #14 | care leaver* |
| #6 | children (+NT) or adolescents (+NT) or young people (+NT) | #15 | secure accommodation |
| #7 | residential care (+NT) | #16 | unaccompanied asylum seeking child* (ft) |
| #8 | #6 and #7 | #17 | placement (ft) and #6 |
| #9 | group homes (+NT) | #18 | #1 or #2 or #3 or #4 or #5 or #8 or #10 or #11 or #12 or #13 or #14 or #14 or #15 or #16 or #17 |

Australian Family and Society Abstracts

(searched via Informit 13/11/08)

- | | | | |
|----|-----------------------------|----|-----------------------|
| #1 | child* (ft) | #4 | residential childcare |
| #2 | adopt* (ft) or foster* (ft) | #5 | looked-after children |
| #3 | #1 and #2 | #6 | #3 or #4 or #5 |

British Education Index (BEI)

(searched via Dialog 11/11/08)

BEI provides information on research, policy and practice in education and training in the UK. Sources include over 300 journals, mostly published in the UK, plus other material including reports, series and conference papers.

- | | | | |
|-----|--|-----|---|
| #1 | looked-after children (ft) | #11 | care order* (ft) |
| #2 | child* looked-after (ft) | #12 | special guardian* (ft) |
| #3 | child* in care (ft) | #13 | care leav* (ft) |
| #4 | orphan* (ft) | #14 | leav* care (ft) |
| #5 | orphans | #15 | secure accommodation (ft) |
| #6 | adopted children | #16 | unaccompanied asylum seeking child* (ft) |
| #7 | foster (ft) | #17 | placement* (ft) and (child* (ft) or children) |
| #8 | foster care or foster children | #18 | #1 or #2 or #3 or #4 or #5 or #6 or #7 or #8 or #9 or #10 or #11 or |
| #9 | residential child care (ft) | | |
| #10 | residential care and (child* (ft) or children) | | |

Increasing the number of care leavers in 'settled, safe accommodation'

#12 or #13 or #14 or #15 or #16 or

#17

Campbell Collaboration C2 Library

(searched 14/10/08)

The Campbell Collaboration Library of Systematic Reviews contains systematic reviews and review protocols in the areas of education, criminal justice and social welfare.

The Education and Social Welfare sections were browsed but no relevant records were found.

CERUKplus

(searched 11/11/08)

The CERUKplus database provides access to information about current and recently completed research, PhD level work and practitioner research in the field of education and children's services.

#1 (looked-after children) or (care leavers)

ChildData

(searched via NCB Inmagic interface 01/09/08)

ChildData is the National Children's Bureau database, containing details of around 35,000 books, reports and journal articles about children and young people.

#1 children in care	#9 group home* (ft)
#2 looked-after child* (ft)	#10 children's homes
#3 child* looked-after (ft)	#11 care orders
#4 orphans	#12 special guardianship
#5 foster care or foster carers or foster children	#13 leaving care
#6 kinship care	#16 care leaver* (ft)
#7 adoption or adopted children	#17 unaccompanied asylum seeking child* (ft)
#8 residential care or residential care staff	#18 placement

#19 #1 or #2 or #3 or #4 or #5 or #6
or #7 or #8 or #9 or #10 or #11 or

#12 or #13 or #14 or #15 or #16
or #17 or #18

Cochrane Library

(searched via Wiley Interscience 09/09/08)

#1 child, institutionalized (+NT)

#2 looked-after child* (ft)

#3 child* in care (ft)

#4 child, orphaned

#5 orphanages

#6 foster home care

#7 kinship care (ft)

#8 adoption (+NT)

#9 residential child care (ft)

#10 group homes (+NT)

#11 care order* (ft)

#12 special guardianship (ft)

#13 care leaver* (ft)

#14 secure accommodation (ft)

#15 unaccompanied asylum seeking
child* (ft)

#16 #1 or #2 or #3 or #4 or #5 or #6 or
#7 or #8 or #9 or #10 or #11 or
#12 or #13 or #14 or #15

1.1.3. Cumulative Index to Nursing and Allied Health Literature (CINAHL Plus)

(searched via EBSCO Host 29/08/08)

CINAHL Plus provides indexing for 3,802 journals from the fields of nursing and allied health.

#1 looked-after child* (ft)

#2 child* in care (ft)

#3 "orphans and orphanages" (+NT)

#4 foster home care (+NT)

#5 kinship care (ft)

#6 adoption

#7 residential child care (ft)

#8 special guardianship (ft)

#9 leaving care (ft)

#10 care leaver* (ft)

#11 secure accommodation (ft)

#12 unaccompanied asylum seeking
child* (ft)

#13 #1 or #2 or #3 or #4 or #5 or #6
or #7 or #8 or #9 or #10 or #11 or
#12

EMBASE

(searched via Ovid SP 05/09/08)

Increasing the number of care leavers in 'settled, safe accommodation'

The Excerpta Medica database (EMBASE) is a major biomedical and pharmaceutical database. There is selective coverage for nursing, dentistry, veterinary medicine, psychology, and alternative medicine.

- | | | | |
|----|--|-----|---|
| #1 | looked-after child* (ft) | #9 | care orders (ft) |
| #2 | child* in care (ft) | #10 | special guardianship (ft) |
| #3 | orphanage (+NT) | #11 | leaving care (ft) |
| #4 | foster care (+NT) | #12 | care leaver* (ft) |
| #5 | adoption (+NT) or adopted child (+NT) | #13 | secure accommodation (ft) |
| #6 | residential home (+NT) and (child* or adolescen* (ft)) | #14 | unaccompanied asylum seeking child* (ft) |
| #7 | group homes (ft) and (child* or adolescen* (ft)) | #15 | #1 or #2 or #3 or #4 or #5 or #6 or #7 or #8 or #9 or #10 or #11 or #12 or #13 or #14 |
| #8 | children's homes (ft) | | |

Health Management Information Consortium (HMIC)

(searched via Ovid SP 03/09/08)

The Health Management Information Consortium (HMIC) database is a compilation of data from two sources, the Department of Health's Library and Information Services and King's Fund Information and Library Service. Topic coverage is on health services.

- | | | | |
|----|--|-----|---|
| #1 | looked-after child* (ft) | #10 | children's homes (ft) |
| #2 | child* in care (ft) | #11 | care orders |
| #3 | children in care | #12 | special guardianship (ft) |
| #4 | orphans | #13 | former children in care or care leavers |
| #5 | disabilities (+NT) | #14 | secure accommodation |
| #6 | (foster care or foster children or foster parents) (+NT) | #15 | unaccompanied asylum seeking child* (ft) |
| #7 | kinship care (ft) | #16 | placement (ft) and children (+NT) |
| #8 | (adoption or adopted children or adoptive parents) (+NT) | #17 | #1 or #2 or #3 or #4 or #5 or #6 or #7 or #8 or #9 or #10 or #11 or #12 or #13 or #14 or #15 or #16 |
| #9 | residential child care (+NT) | | |

International Bibliography of the Social Sciences (IBSS)

(searched via EBSCO Host 05/09/08)

- | | | | |
|----|--|-----|--|
| #1 | looked-after child* (ft) | #10 | care order* (ft) |
| #2 | children in care | #11 | special guardianship (ft) |
| #3 | orphanages | #12 | leaving care (ft) |
| #4 | orphans | #13 | care leaver* (ft) |
| #5 | (foster care or foster child* or foster parent) (ft) | #14 | secure accommodation |
| #6 | kinship care (ft) | #15 | unaccompanied asylum seeking child* (ft) |
| #7 | adopted children | #16 | #1 or #2 or #3 or #4 or #5 or #6 or #7 or #8 or #9 or #10 or #11 or #12 or #13 or #14 or #15 |
| #8 | residential child care (ft) | | |
| #9 | children's homes (ft) | | |

JSTOR

(searched 14/11/08)

JSTOR is an international archive of journal articles and grey literature.

- #1 children in care (ft)

MEDLINE

(searched via Ovid SP 27/08/08)

MEDLINE is the primary source of international literature on biomedicine and healthcare

- | | | | |
|----|-----------------------------|-----|--|
| #1 | looked-after children (ft) | #10 | special guardianship (ft) |
| #2 | child* in care (ft) | #11 | leaving care (ft) |
| #3 | looked-after child* (ft) | #12 | secure accommodation (ft) |
| #4 | child, orphaned (+NT) | #13 | unaccompanied asylum seeking child* (ft) |
| #5 | orphanages (+NT) | #14 | #1 or #2 or #3 or #4 or #5 or #6 or #7 or #8 or #9 or #10 or #11 or #12 or #13 |
| #6 | foster home care (+NT) | #15 | child (+NT) or adolescent |
| #7 | kinship care (ft) | #16 | group homes (+NT) |
| #8 | adoption (+NT) | | |
| #9 | residential child care (ft) | | |

Increasing the number of care leavers in 'settled, safe accommodation'

#17 #15 and #16

#18 #14 or #17

PsycInfo

(searched via Ovid SP 05/09/08)

PsycInfo contains more than 2.5 million records on psychological and behavioural science.

- | | | | |
|-----|--|-----|--|
| #1 | looked-after child* (ft) | #12 | leaving care (ft) |
| #2 | child* in care (ft) | #13 | care leaver* (ft) |
| #3 | orphans (+NT) | #14 | secure accommodation (ft) |
| #4 | orphanages (+NT) | #15 | unaccompanied asylum seeking child* (ft) |
| #5 | foster children (+NT) or foster care (+NT) or foster parents (+NT) | #16 | #1 or #2 or #3 or #4 or #5 or #6 or #7 or #8 or #9 or #10 or #11 or #12 or #13 or #14 or #15 |
| #6 | kinship care (ft) | #17 | child (+NT) or adolescent |
| #7 | adoption (child) (+NT) | #18 | group homes (+NT) |
| #8 | adopted children (+NT) | #19 | #17 and #18 |
| #9 | residential child care (ft) | #20 | #16 or #19 |
| #10 | care orders (ft) | | |
| #11 | special guardianship (ft) | | |

Social Care Online

(searched 21/08/08)

Social Care Online is the Social Care Institute for Excellence's (SCIE's) database covering an extensive range of information and research on all aspects of social care. Content is drawn from a range of sources including journal articles, websites, research reviews, legislation and government documents, and from the knowledge of people using these services.

- | | | | |
|----|----------------------------|-----|------------------------|
| #1 | looked-after children | #7 | adopted children |
| #2 | children looked-after (ft) | #8 | residential child care |
| #3 | child* in care (ft) | #9 | care orders |
| #4 | foster care (+NT) | #10 | special guardianship |
| #5 | foster children | #11 | leaving care |
| #6 | adoption (+NT) | #12 | care leaver* (ft) |

#13 secure accommodation and
(children or young people)

#14 unaccompanied asylum seeking
child* (ft)

#15 placement and (children or young
people)

#16 #1 or #2 or #3 or #4 or #5 or #6 or #7 or #8 or #9 or
#10 or #11 or #12 or #13 or #14 or #15

Social Services Abstracts

(searched via CSA Illumina 02/09/08)

Social Services Abstracts is an international database covering social work, social welfare and social policy.

#1 looked-after child* (ft)

#2 child* in care (ft)

#3 orphans

#4 foster care or foster children

#5 adoption (+NT)

#6 adopted children (+NT)

#7 residential care (ft) and (children
(+NT))

#8 children's homes (ft)

#9 special guardianship (ft)

#10 care leaver* (ft)

#11 secure accommodation (ft)

#12 unaccompanied asylum seeking
child* (ft)

#13 placement and (child (+NT))

#14 #1 or #2 or #3 or #4 or #5 or #6 or
#7 or #8 or #9 or #10 or #11 or
#12 or #13

Social Work Abstracts

(searched via Ovid SP 03/09/08)

Social Work Abstracts covers material published in primarily US-based journals with social work relevance

#1 looked-after child* (ft)

#2 child* in care (ft)

#3 orphan* (ft)

#4 foster* (ft)

#5 kinship care (ft)

#6 adoption (ft)

#7 residential child care (ft)

#8 children's homes (ft)

#9 care orders (ft)

#10 special guardianship (ft)

#11 care leaver* (ft)

#12 leaving care (ft)

#13 secure accommodation (ft)

#14 unaccompanied asylum seeking
child* (ft)

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#15 placement and (child* (ft))

#16 #1 or #2 or #3 or #4 or #5 or #6 or
#7 or #8 or #9 or #10 or #11 or
#12 or #13 or #14 or #15

Zetoc

(searched via British Library 03/09/08)

Zetoc provides access to the British Library's electronic table of contents of journals and conference proceedings. This search interface has quite limited functionality

#1	looked-after children (ft)	#7	care leaver (ft)
#2	foster care (ft) and health (ft)	#8	care leavers (ft)
#3	adopted children (ft) and health (ft)	#9	secure accommodation (ft)
#4	residential child care (ft)	#10	placement (ft) and children (ft) and care (ft)
#5	children's homes (ft)	#11	#1 or #2 or #3 or #4 or #5 or #6 or #7 or #8 or #9 or #10
#6	special guardianship (ft)		

Search output from each database was combined (using OR) in an EndNote library, which was subsequently searched for each priority. The EndNote library was produced from the above references on 05/12/08.

1.1.4 Stage 2

Topic-specific searches

(All later aggregated for screening for all priorities, due to overlap in relevance.)

Education priority

#1	school* (ft)	#4	pupil* (ft)
#2	education* (ft)	#5	#1 or #2 or #3 or #4
#3	learning (ft)		

The output from this set was searched using the following terms:

Educational outcomes and positive school experiences set

- | | |
|------------------------|---|
| #1 achievement* (ft) | #13 exclu* (ft) |
| #2 qualification* (ft) | #14 friend* (ft) |
| #3 examin* (ft) | #15 career* (ft) |
| #4 key stage* (ft) | #16 occupation* (ft) |
| #5 college* (ft) | #17 job* (ft) |
| #6 university (ft) | #18 employ* (ft) |
| #7 degree* (ft) | #19 citizen* (ft) |
| #8 attendance (ft) | #20 school refusal (ft) |
| #9 truan* (ft) | #21 school phobia (ft) |
| #10 stability (ft) | #22 #1 or #2 or #3 or #4 or #5 or #6 or |
| #11 dropout* (ft) | #7 or #8 or #9 or #10 or #11 or |
| #12 expulsion* (ft) | #12 or #13 or #14 or #15 or #16 or |
| | #17 or #18 or #19 or #20 or #21 |

The output from this set was searched using the following terms:

Views set

- | | |
|------------------|-------------------------------|
| #1 opinion* (ft) | #4 listen* (ft) |
| #2 view* (ft) | #5 voice* (ft) |
| #3 feedback (ft) | #6 #1 or #2 or #3 or #4 or #5 |

This output was used to answer Q 3.1.1

The education set was searched using the following terms:

Educational policy and interventions set

- | | |
|--------------------------------------|----------------------------------|
| #1 virtual school head* (ft) | #7 personal education plan* (ft) |
| #2 education support (ft) | #8 mentor* (ft) |
| #3 out of school hours learning (ft) | #9 education at home (ft) |
| #4 specialist* (ft) | #10 guidance (ft) |
| #5 designated teacher* (ft) | #11 policy |
| #6 club* (ft) | #12 green paper* (ft) |

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- | | |
|--------------------------------------|---|
| #13 white paper* (ft) | #19 camhs (ft) |
| #14 Every Child Matters (ft) | #20 achievement ceremon* (ft) |
| #15 Children's Act | #21 #1 or #2 or #3 or #4 or #5 or #6 or |
| #16 Care Matters (ft) | #7 or #8 or #9 or #10 or #11 or |
| #17 educational psychologist* (ft) | #12 or #13 or #14 or #15 or #16 or |
| #18 mental health professional* (ft) | #17 or #18 or #19 or #20 |

The output from this set was searched using the following terms:

Acceptability, access sibility and effectiveness set

- | | |
|------------------------|---|
| #1 acceptab* (ft) | #10 What works (ft) |
| #2 accessib* (ft) | #11 outcomes (ft) |
| #3 satisfaction (ft) | #12 evaluat* (ft) |
| #4 service uptake (ft) | #13 making a difference (ft) |
| #5 service use (ft) | #14 success* (ft) |
| #6 engage* (ft) | #15 improvement (ft) |
| #7 involv* (ft) | #16 implementation (ft) |
| #8 participat* (ft) | #17 #1 or #2 or #3 or #4 or #5 or #6 or |
| #9 effective* (ft) | #7 or #8 or #9 or #10 or #11 or |
| | #12 or #13 or #14 or #15 or #16 |

This output was used to answer Qs 3.1.2 and 3.1.3

The education set was searched using the following terms:

Foster, residential and kinship carers and birth families

- | | |
|--------------------|--|
| #1 carer* (ft) | #6 mother* (ft) |
| #2 worker* (ft) | #7 father* (ft) |
| #3 assistant* (ft) | #8 parent* (ft) |
| #4 guardian* (ft) | #9 #1 or #2 or #3 or #4 or #5 or #6 or |
| #5 family (ft) | #7 or #8 |

The output from this set was searched using the following terms:

Attitudes, skills, aptitudes and behaviours set

- | | |
|-------------------|----------------|
| #1 attitude* (ft) | #2 skill* (ft) |
|-------------------|----------------|

- | | | | |
|-----|-----------------|-----|--|
| #3 | abilit* (ft) | #11 | help* (ft) |
| #4 | behaviour* (ft) | #12 | assist* (ft) |
| #5 | behavior* (ft) | #13 | facilitate (ft) |
| #6 | encourage* (ft) | #14 | value (ft) |
| #7 | supportive (ft) | #15 | engage* (ft) |
| #8 | supporting (ft) | #16 | #1 or #2 or #3 or #4 or #5 or #6 or #7 or #8 or #9 or #10 or #11 or #12 or #13 or #14 or #15 |
| #9 | empathy (ft) | | |
| #10 | promote (ft) | | |

The output from this set was searched using the following terms:

Training and support for above behaviours set

- | | | | |
|----|----------------|----|----------------------------------|
| #1 | training (ft) | #5 | counselling (ft) |
| #2 | support* (ft) | #6 | assess* (ft) |
| #3 | competen* (ft) | #7 | #1 or #2 or #3 or #4 or #5 or #6 |
| #4 | regist* (ft) | | |

The output from this set was searched using the following terms:

Quantitative, correlate set

- | | | | |
|----|-------------------|----|--|
| #1 | quantitative (ft) | #6 | percentage (ft) |
| #2 | correlate* (ft) | #7 | significant difference (ft) |
| #3 | effective* (ft) | #8 | #1 or #2 or #3 or #4 or #5 or #6 or #7 |
| #4 | statistic* (ft) | | |
| #5 | cohort* (ft) | | |

This output was used to answer Q 3.1.4

Emotional/behavioural health priority

Population terms EndNote library above was searched using the following terms:

Emotional/behavioural health set

- | | | | |
|----|-------------------------|----|-------------|
| #1 | children's centre* (ft) | #4 | esteem (ft) |
| #2 | family centre* (ft) | #5 | grie* (ft) |
| #3 | confiden* (ft) | #6 | happy (ft) |

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- | | |
|--------------------------|---|
| #7 happiness (ft) | #27 risk taking (ft) |
| #8 emotion* (ft) | #28 self harm (ft) |
| #9 self control (ft) | #29 stress (ft) |
| #10 mental* (ft) | #30 suicide (ft) |
| #11 qaly (ft) | #31 personality disorder* (ft) |
| #12 quality of life (ft) | #32 ADHD (ft) |
| #13 resilen* (ft) | #33 buddy (ft) |
| #14 respect (ft) | #34 mentor* (ft) |
| #15 wellbeing (ft) | #35 counsellor* (ft) |
| #16 antisocial (ft) | #36 psych* (ft) |
| #17 anxi* (ft) | #37 advoca* (ft) |
| #18 attach* (ft) | #38 therap* (ft) |
| #19 behav* (ft) | #39 support worker* (ft) |
| #20 bereav* (ft) | #40 key worker* (ft) |
| #21 bully* (ft) | #41 #1 or #2 or #3 or #4 or #5 or #6 or |
| #22 conduct (ft) | #7 or #8 or #9 or #10 or #11 or |
| #23 cortisol (ft) | #12 or #13 or #14 or #15 or #16 or |
| #24 depress* (ft) | #17 or #18 or #19 or #20# or #21 |
| #25 hyperactiv* (ft) | or #22 or #23 or #24 or #25 or #26 |
| #26 relationship* (ft) | or #27 or #28 or #29 or #30 or #31 |
| | or #32 or #33 or #34 or #35 or #36 |
| | or #37 or #38 or #39 or #40 |

The output from this set was searched using the following terms:

Positive emotional and behavioural health set

- | | |
|--------------------------|---|
| #1 confiden* (ft) | #14 respect (ft) |
| #2 esteem (ft) | #15 wellbeing (ft) |
| #6 happy (ft) | #16 feeling good (ft) |
| #7 happiness (ft) | #17 feel good (ft) |
| #9 self control (ft) | #18 #1 or #2 or #3 or #4 or #5 or #6 or |
| #11 qaly (ft) | #7 or #8 or #9 or #10 or #11 or |
| #12 quality of life (ft) | #12 or #13 or #14 or #15 or #16 or |
| #13 resilen* (ft) | #17 |

The output from this set was searched using the following terms:

Views set

- | | | | |
|----|---------------|----|----------------------------|
| #1 | opinion* (ft) | #4 | listen* (ft) |
| #2 | view* (ft) | #5 | voice* (ft) |
| #3 | feedback (ft) | #6 | #1 or #2 or #3 or #4 or #5 |

This output was used to answer Q 3.2.1

The emotional/behavioural health set was searched using the following terms:

Emotional/behavioural health policy and interventions set

- | | | | |
|-----|--------------------------|-----|--|
| #1 | advoca* (ft) | #13 | secure attachment (ft) |
| #2 | mentor* (ft) | #14 | Healthy Care (ft) |
| #3 | counsell* (ft) | #15 | mental health professional* (ft) |
| #4 | therap* (ft) | #19 | camhs (ft) |
| #5 | dedicated (ft) | #20 | achievement ceremon* (ft) |
| #6 | specialist (ft) | #21 | guidance (ft) |
| #7 | policy (ft) | #22 | educational psychologist* (ft) |
| #8 | legislation (ft) | #23 | psychiatrist* (ft) |
| #9 | green paper (ft) | #24 | #1 or #2 or #3 or #4 or #5 or #6 or #7 or #8 or #9 or #10 or #11 or #12 or #13 or #14 or #15 or #16 or #17 or #18 or #19 or #20 or #21 or #22 or #23 |
| #10 | white paper (ft) | | |
| #11 | Every Child Matters (ft) | | |
| #12 | Children's Act | | |

The output from this set was searched using the following terms:

Acceptability, accessibility and effectiveness set

- | | | | |
|----|---------------------|-----|--------------------------|
| #1 | acceptab* (ft) | #9 | effective* (ft) |
| #2 | accessib* (ft) | #10 | What works (ft) |
| #3 | satisfaction (ft) | #11 | outcomes (ft) |
| #4 | service uptake (ft) | #12 | evaluat* (ft) |
| #5 | service use (ft) | #13 | making a difference (ft) |
| #6 | engage* (ft) | #14 | success* (ft) |
| #7 | involv* (ft) | #15 | improvement (ft) |
| #8 | participat* (ft) | #16 | implementation (ft) |

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#17 #1 or #2 or #3 or #4 or #5 or #6 or
#7 or #8 or #9 or #10 or #11 or

#12 or #13 or #14 or #15 or #16

This output was used to answer Q 3.2.2

The emotional/behavioural health set was searched using the following terms:

Foster, residential and kinship carers and birth families set

#1 carer* (ft)

#6 mother* (ft)

#2 worker* (ft)

#7 father* (ft)

#3 assistant* (ft)

#8 parent* (ft)

#4 guardian* (ft)

#9 #1 or #2 or #3 or #4 or #5 or #6 or
#7 or #8

#5 family (ft)

The output from this set was searched using the following terms:

Attitudes, skills, aptitudes and behaviours set

#1 attitude* (ft)

#13 facilitate (ft)

#2 skill* (ft)

#14 value (ft)

#3 abilit* (ft)

#15 engage* (ft)

#4 behaviour* (ft)

#16 bond (ft)

#5 behavior* (ft)

#17 sympath* (ft)

#6 encourage* (ft)

#18 warmth (ft)

#7 supportive (ft)

#19 love (ft)

#8 supporting (ft)

#20 belonging (ft)

#9 empathy (ft)

#21 #1 or #2 or #3 or #4 or #5 or #6 or
#7 or #8 or #9 or #10 or #11 or
#12 or #13 or #14 or #15 or #16 or
#17 or #18 or #19 or #20

#10 promote (ft)

#11 help* (ft)

#12 assist* (ft)

The output from this set was searched using the following terms:

Training and support for above behaviours set

#1 training (ft)

#4 regist* (ft)

#2 support* (ft)

#5 counselling (ft)

#3 competen* (ft)

#6 assess* (ft)

#7 #1 or #2 or #3 or #4 or #5 or #6

The output from this set was searched using the following terms:

Quantitative, correlate set

- | | | | |
|----|-------------------|----|--|
| #1 | quantitative (ft) | #6 | percentage (ft) |
| #2 | correlate* (ft) | #7 | significant difference (ft) |
| #3 | effective* (ft) | #8 | #1 or #2 or #3 or #4 or #5 or #6 or #7 |
| #4 | statistic* (ft) | | |
| #5 | cohort* (ft) | | |

This output was used to answer Q 3.2.3

Safe, settled accommodation priority

Population terms EndNote library above was searched using the following terms:

Accommodation set

- | | | | |
|----|--------------------|-----|---|
| #1 | accommodation (ft) | #8 | independent living (ft) |
| #2 | housing (ft) | #9 | floating support (ft) |
| #3 | homeless* (ft) | #10 | tenan* (ft) |
| #4 | flat* (ft) | #11 | B&B (ft) |
| #5 | bedsit* (ft) | #12 | bed and breakfast (ft) |
| #6 | lodging* (ft) | #13 | #1 or #2 or #3 or #4 or #5 or #6 or #7 or #8 or #9 or #10 or #11 or #12 |
| #7 | hostel* (ft) | | |

The output from this set was searched using the following terms:

Safe, settled set

- | | | | |
|----|--------------|----|----------------------|
| #1 | safe* (ft) | #4 | permanen* (ft) |
| #2 | settled (ft) | #5 | #1 or #2 or #3 or #4 |
| #3 | secur* (ft) | | |

The output from this set was searched using the following terms:

Increasing the number of care leavers in 'settled, safe accommodation'

Views set

- | | | | |
|----|---------------|----|----------------------------|
| #1 | opinion* (ft) | #4 | listen* (ft) |
| #2 | view* (ft) | #5 | voice* (ft) |
| #3 | feedback (ft) | #6 | #1 or #2 or #3 or #4 or #5 |

This output was used to answer Q 3.3.1

The accommodation set was searched using the following terms:

Not in settled accommodation set

- | | | | |
|----|---------------------|-----|--|
| #1 | unsafe (ft) | #7 | lost (ft) |
| #2 | unsettled (ft) | #8 | rough sleep* (ft) |
| #3 | temporary (ft) | #9 | on the street* (ft) |
| #4 | homeless* (ft) | #10 | #1 or #2 or #3 or #4 or #5 or #6 or #7 or #8 or #9 |
| #5 | out of touch (ft) | | |
| #6 | not in contact (ft) | | |

This output was used to answer Q 3.3.2

The accommodation set was searched using the following terms:

Accommodation policy and interventions set

- | | | | |
|-----|-----------------------|-----|---|
| #1 | floating support (ft) | #13 | green paper (ft) |
| #2 | housing support (ft) | #14 | white paper (ft) |
| #3 | housing service* (ft) | #15 | Children (Leaving Care) Act (ft) |
| #4 | housing officer* (ft) | #16 | affordable (ft) |
| #5 | benefit* (ft) | #17 | low cost (ft) |
| #6 | credit* (ft) | #18 | guidance (ft) |
| #7 | grant* (ft) | #19 | joint working (ft) |
| #8 | fund* (ft) | #20 | Homelessness Act (ft) |
| #9 | dedicated | #21 | #1 or #2 or #3 or #4 or #5 or #6 or #7 or #8 or #9 or #10 or #11 or #12 or #13 or #14 or #15 or #16 or #17 or #18 or #19 or #20 |
| #10 | specialist* (ft) | | |
| #11 | policy | | |
| #12 | legislation | | |

The output from this set was searched using the following terms:

Acceptability, accessibility and effectiveness set

- | | | | |
|----|---------------------|-----|---|
| #1 | acceptab* (ft) | #10 | What works (ft) |
| #2 | accessib* (ft) | #11 | outcomes (ft) |
| #3 | satisfaction (ft) | #12 | evaluat* (ft) |
| #4 | service uptake (ft) | #13 | making a difference (ft) |
| #5 | service use (ft) | #14 | success* (ft) |
| #6 | engage* (ft) | #15 | improvement (ft) |
| #7 | involv* (ft) | #16 | implementation (ft) |
| #8 | participat* (ft) | #17 | #1 or #2 or #3 or #4 or #5 or #6 or #7 or #8 or #9 or #10 or #11 or #12 or #13 or #14 or #15 or #16 |
| #9 | effective* (ft) | | |

This output was used to answer Q 3.3.3

The emotional/behavioural health set was searched using the following terms:

Foster, residential and kinship carers and birth families

- | | | | |
|----|-----------------|----|--|
| #1 | carer* (ft) | #6 | mother* (ft) |
| #2 | worker* (ft) | #7 | father* (ft) |
| #3 | assistant* (ft) | #8 | parent* (ft) |
| #4 | guardian* (ft) | #9 | #1 or #2 or #3 or #4 or #5 or #6 or #7 or #8 |
| #5 | family (ft) | | |

The output from this set was searched using the following terms:

Attitudes, skills, aptitudes and behaviours set

- | | | | |
|----|-----------------|-----|-----------------|
| #1 | attitude* (ft) | #9 | empathy (ft) |
| #2 | skill* (ft) | #10 | promote (ft) |
| #3 | abilit* (ft) | #11 | help* (ft) |
| #4 | behaviour* (ft) | #12 | assist* (ft) |
| #5 | behavior* (ft) | #13 | facilitate (ft) |
| #6 | encourage* (ft) | #14 | value (ft) |
| #7 | supportive (ft) | #15 | engage* (ft) |
| #8 | supporting (ft) | #16 | financ* (ft) |

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#17 fund* (ft)

#12 or #13 or #14 or #15 or #16 or #17

#18 #1 or #2 or #3 or #4 or #5 or #6 or #7 or #8 or #9 or #10 or #11 or

The output from this set was searched using the following terms:

Training and support for above behaviours set

#1 training (ft)

#5 counselling (ft)

#2 support* (ft)

#6 assess* (ft)

#3 competen* (ft)

#7 #1 or #2 or #3 or #4 or #5 or #6

#4 regist* (ft)

The output from this set was searched using the following terms:

Quantitative, correlate set

#1 quantitative (ft)

#6 percentage (ft)

#2 correlate* (ft)

#7 significant difference (ft)

#3 effective* (ft)

#8 #1 or #2 or #3 or #4 or #5 or #6 or #7

#4 statistic* (ft)

#5 cohort* (ft)

This output was used to answer Q 3.3.4

For all priorities

Literature suggestions from Theme Advisory Group and other experts

These were incorporated into the pool of references that were screened.

Policy, government agencies, academic and third sector websites

The following websites were browsed and searched for each priority, and relevant documents incorporated in the screening EndNote libraries. These websites included government departments and agencies, academic centres and third-sector organisations.

Output figures were not compiled for each website because this work was carried out during background preparation for this project.

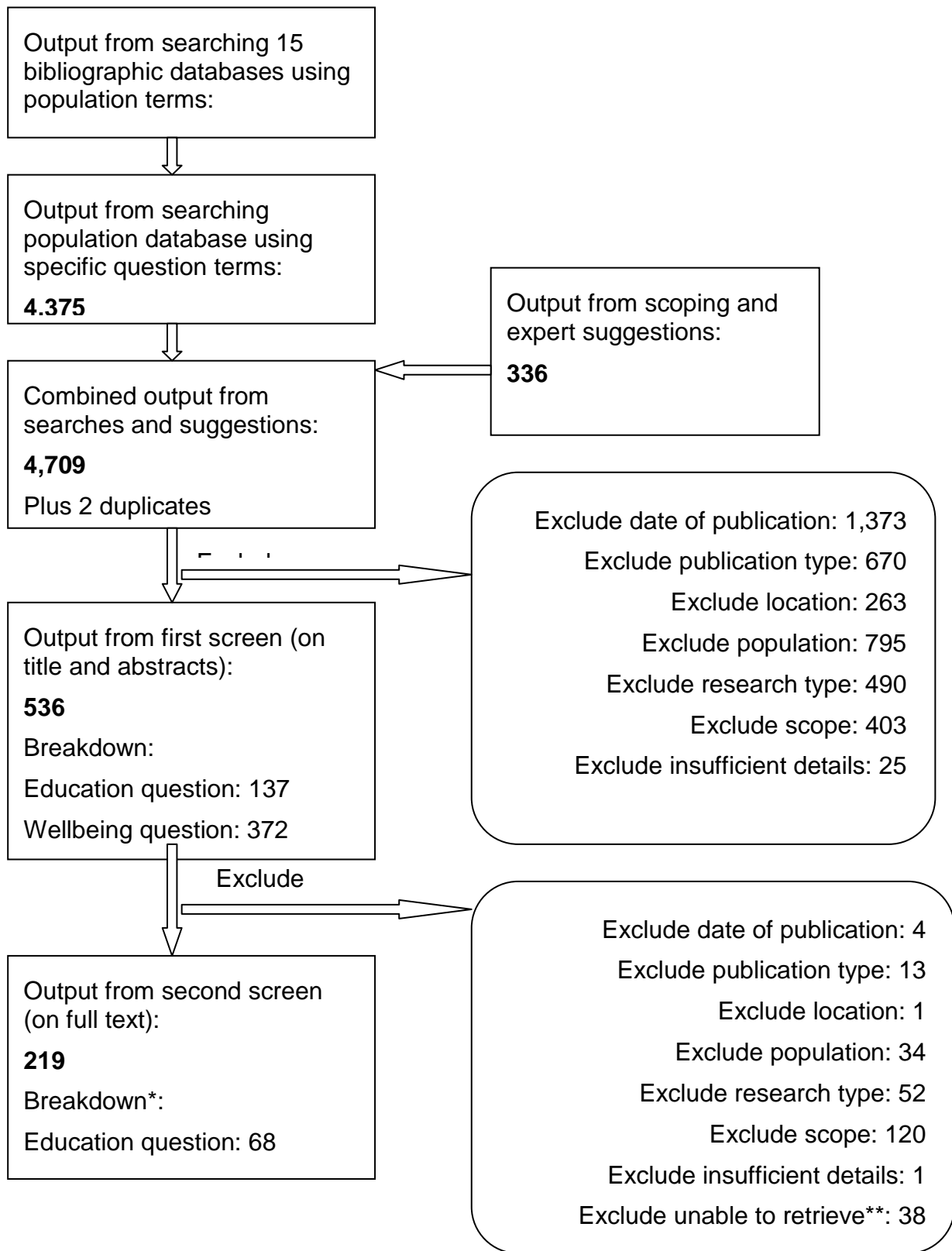
Organisation	URL
4 Nations Child Policy Network	www.childpolicy.org.uk/
A National Voice	www.anationalvoice.org/
Barnardo's	www.barnardos.org.uk/
British Association for Adoption & Fostering	www.baaf.org.uk/
Care Services Improvement Partnership Knowledge Community	http://kc.csip.org.uk/
Caspari Foundation	www.caspari.org.uk/
Centre for Policy Studies	www.cps.org.uk/
Connexions Direct	www.connexions-direct.com/
DEMOS	www.demos.co.uk/
Department for Children, Schools and Families	www.dcsf.gov.uk/
Department of Health	www.dh.gov.uk/en/index.htm
Evidence Network	www.evidencenetwork.org/

Government Social Research	www.gsr.gov.uk/
Howard League for Penal Reform	www.howardleague.org/
Intute	www.intute.ac.uk/
INVOLVE	www.invo.org.uk/
Institute for Public Policy Research	www.ippr.org.uk/
Joseph Rowntree Foundation	www.jrf.org.uk/
Kings' Fund	www.kingsfund.org.uk/
Local Government Analysis and Research	www.local.gov.uk
Mental Health Foundation	www.mentalhealth.org.uk/
Nacro	www.nacro.org.uk/
National Centre for Excellence in Residential Child Care	www.ncb.org.uk/Page.asp?sve=934
National Centre for Social Research (NATCEN)	www.natcen.ac.uk/
National Children's Bureau	www.ncb.org.uk/Page.asp
National Library for Health	www.library.nhs.uk/
Office for National Statistics	www.statistics.gov.uk/default.asp
NCVCCO (Children England)	www.ncvcco.org/
National Foundation for Educational Research	www.nfer.ac.uk/index.cfm
National Youth Agency	www.nya.org.uk/
Northern Ireland Commissioner for Children and Young People	www.niccy.org/
Personal Social Services Research Unit	www.pssru.ac.uk/
Prison Reform Trust	www.prisonreformtrust.org.uk/
Promising Practices Network	www.promisingpractices.net/

Research in Practice	www.rip.org.uk/
Restorative Justice Consortium	www.restorativejustice.org.uk/
Rethink	www.rethink.org/
What Works for Children	www.whatworksforchildren.org.uk/
York Systematic Reviews in Social Policy and Social Care	www.york.ac.uk/inst/chp/srspsc/index.htm
Young Minds	www.youngminds.org.uk/

Figure 4. Literature flow chart

Note: removal of duplicate references took place throughout; referral between priorities took place at second screening.



Notes:

* includes material that could not be obtained at all, as well as records that could not be obtained in time for this piece of work.

** includes referrals from other priorities

Table 12. Coding tool – vulnerable children keywording guideline

Section A:

<p>A.1 On reading full text, is this paper now excluded? <i>(Date, publication type, location, population not LACs, research type, doesn't address scope questions)</i></p>	<p>A.1.1 No</p> <p>A.1.2 Yes (add reason for exclusion) <i>(add reason for exclusion)</i></p>
<p>A.2 Research question relevance <i>Code all priorities that apply. Code for sub-questions (all that apply) also as far as possible.</i></p>	<p>A.2.1 Relevant 3.1 Improving educational outcomes</p> <p>A.2.2 Relevant 3.1.1 LACYP's views</p> <p>A.2.3 Relevant 3.1.2 Services/interventions (effectiveness, acceptable, accessible)</p> <p>A.2.4 Relevant 3.1.3 Attitudes and skills of carers and families</p> <p>A.2.5 Relevant 3.2 Emotional/behavioural health</p> <p>A.2.6 Relevant 3.2.1 LACYP's views</p> <p>A.2.7 Relevant 3.2.2 Services/interventions (effectiveness, acceptable, accessible)</p> <p>A.2.8 Relevant 3.2.3 Attitudes and skills of carers and families</p> <p>A.2.9 Relevant 3.3 Care leavers in settled safe accommodation</p> <p>A.2.10 Relevant 3.3.1 LACYP's views</p>

	<p>A.2.11 Relevant 3.3.2 Services/interventions (effectiveness, acceptable, accessible)</p> <p>A.2.12 Relevant 3.3.3 Attitudes and skills of carers and families</p> <p>A.2.13 Relevant 3.3.4 What is known about those not in SSA at 19?</p> <p>A.2.14 Concept, theory or policy paper (important background)</p>
<p>A.3 Country <i>(Tick all that apply)</i></p>	<p>A.3.1 UK</p> <p>A.3.2 Ireland</p> <p>A.3.3 Canada</p> <p>A.3.4 USA</p> <p>A.3.5 Australia or New Zealand</p> <p>A.3.6 Not specified</p>
<p>A.4 Study type <i>(Tick one)</i></p>	<p>A.4.1 Systematic review <i>(QA of papers and transparent methodology)</i></p> <p>A.4.2 Empirical experimental study with comparison/control <i>(controlled trials, before/after designs, matched/waiting list control)</i></p> <p>A.4.3 Empirical non-experimental study <i>(includes qualitative studies of the views of people who use services, their carers and supporters, case studies, survey reports, testing of assessment tools, surveys and cohort studies)</i></p> <p>A.4.4 Review article</p>

	<p><i>(expert, consensus, literature: NOT systematic or unbiased)</i></p> <p>A.4.5 Background critical account of policy, concepts, definitions, models</p> <p>A.4.6 Inadequate information</p> <p>A.4.7 Other <i>(specify)</i></p>
<p>A.5 Main methods <i>(Tick all that apply)</i></p>	<p>A.5.1 Not research <i>(opinion, policy, etc.)</i></p> <p>A.5.2 Survey</p> <p>A.5.3 Interviews and focus groups</p> <p>A.5.4 Observation</p> <p>A.5.5 Ethnographic study</p> <p>A.5.6 Secondary analysis</p> <p>A.5.7 Controlled trial <i>(+/- randomisation)</i></p> <p>A.5.8 Case study/case studies</p> <p>A.5.9 Literature review</p> <p>A.5.10 Inadequate information</p> <p>A.5.11 Other <i>(specify)</i></p>
<p>A.6 Intervention setting <i>(tick all that apply)</i></p> <p>NOTES: 1. Primarily this is where intervention is delivered, or with/to whom, though if that's not important, may relate to who delivers (for example, housing workers).</p>	<p>A.6.1 No intervention in study</p> <p>A.6.2 Foster care placement</p> <p>A.6.3 Residential care</p>

<p>2. <i>This data is important to accessibility and acceptability of interventions.</i></p> <p>3. <i>If study evaluates different care settings, such as family versus residential placement, that is the intervention.</i></p>	<p>A.6.4 Secure settings</p> <p>A.6.5 Relatives/friends (kinship) placement</p> <p>A.6.6 Birth family</p> <p>A.6.7 School or school-related service</p> <p>A.6.8 Healthcare settings</p> <p>A.6.9 Children's or youth centres</p> <p>A.6.10 Housing services or floating support</p> <p>A.6.11 Unspecified</p> <p>A.6.12 Other <i>(specify)</i></p>
<p>A.7 Study population <i>(tick all that apply)</i></p>	<p>A.7.1 LACYP <i>(specify age range if given)</i></p> <p>A.7.2 Male LACYP only</p> <p>A.7.3 Female LACYP only</p> <p>A.7.4 Disabled LACs or those with LTCs <i>(incl. with Learning Difficulties and SENs)</i></p> <p>A.7.5 Care leavers</p> <p>A.7.6 LACYP of BME background <i>(incl. travellers, Irish, any ethnic minority)</i></p> <p>A.7.7 Unaccompanied asylum seekers in care</p> <p>A.7.8 LAC in secure accommodation <i>(incl. YOI, psychiatric)</i></p>

	<p>A.7.9 Sibling groups of LACYP</p> <p>A.7.10 Birth families</p> <p>A.7.11 Family and relatives of LACYP</p> <p>A.7.12 Frontline paid carers <i>(foster, kinship carers, residential workers)</i></p> <p>A.7.13 Other health, social care and housing staff <i>(not covered in above, managers, for example)</i></p> <p>A.7.14 Other <i>(specify)</i></p>
<p>A.8 Identify as key item in relation to one of the topics? <i>Is this one of the 10–20 most relevant items for the vulnerable children theme? Complete the following, all that apply</i></p>	<p>A.8.1 NO: Definitely not a key item <i>(scores nil)</i></p> <p>A.8.2 YES: Suggest a reason if you wish</p> <p>A.8.3 Key item for 3.1 Educational outcomes <i>(enter all that apply)</i></p> <p>A.8.4 Key item for 3.2 Emotional health and wellbeing <i>(enter all that apply)</i></p> <p>A.8.5 Key item for 3.3. Accommodation <i>(enter all that apply)</i></p>
<p>A.9 Cross-cutting issues</p>	<p>A.9.1 Child poverty</p> <p>A.9.2 Safeguarding children <i>(Government definition: The process of protecting children from abuse or neglect, preventing impairment of their health and development, and ensuring they are growing up in circumstances consistent with the provision of safe and effective care that enables children to have</i></p>

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	<i>optimum life chances and enter adulthood successfully.)</i>
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Appendix 3: Parameters document

1. C4EO Theme 3 Vulnerable Children

2. Priority

3.3 This appendix contains the parameters for the scoping study set up by the Theme Advisory Group (TAG) to examine the priority of increasing the number of care leavers in 'settled, safe accommodation'

3. Context for this priority

Increasing the numbers of care leavers in 'settled, safe accommodation' is a key priority for the government and is reflected in its Public Service Agreements (PSA). Housing stability and support are precursors to the outcomes outlined in Every Child Matters (ECM). Examples of effective practice from the Department for Children, Schools and Families (DCSF) focus on multi-agency collaboration, such as the Leaving Care Councils and illustrate the systems-level change required. Steps on the ways to achieving the outcomes outlined in ECM, include: planned moves towards independence; maintained or developing family support where safe; and appropriate and increased use of supported housing via improved joint working between housing and children's services². Young people themselves emphasise the importance of affordability and housing choice³.

² CLG and DCSF (2008) Joint working between housing and children's services: preventing homelessness and tackling its effects on children and young people. London: CLG and DCSF.

³ A National Voice (2005) There's no place like home: housing for care leavers. Manchester: ANV.

4. Main review questions⁴ to be addressed in this scoping study (no more than five, preferably fewer)

Overall question:

What do we know about how to improve the number of care leavers in 'settled, safe accommodation'?

Sub-questions:

1. What are looked-after children and young people's (LACYP's) views on what constitutes safe and settled accommodation and how do they compare to those of policy-makers, housing and children's services personnel and independent sector providers?

2. What do we know about the 12.6 per cent of young people not in suitable accommodation at age 19 (as defined by National Indicator 147)?

3. What do we know about the accessibility, acceptability and effectiveness of policies, services and interventions initiated by central, regional and local government and independent sector, including housing services and housing support services, for LACYP?

4. What do we know about the contribution made to being in safe, settled accommodation of LACYP by the attitudes, skills and abilities of foster, residential, kinship carers, supported housing staff and birth families, and interventions to support this contribution?

5. Which cross-cutting issues should be included?

(Child poverty; safeguarding; equality and diversity; disability; workforce development; change management; leadership; learning organisations?) Please specify the review questions for cross-cutting issues in this scope, and please keep these limited in number.

Child poverty

Safeguarding

⁴ See guidance note on setting review questions at the end of this form.

6. Definitions for any terms used in the review questions¹

Population of young people:

- Looked-after children and young people in medium- and long-term care (more than 6 months) – wherever they are looked-after (for example, residential care, foster care, young offenders institution) – up to age 25, and their families.
- Children and young people who have several short-term (up to 6 months) periods in local authority care (either under a care order, or on a voluntary basis).
- Children and young people preparing to leave medium-term or long-term local authority care.

Outcomes

ECM outcomes:

- Be healthy
- Stay safe
- Enjoy and achieve
- Make a positive contribution
- Achieve economic wellbeing.

Government indicators of the above outcomes:

- National Indicator 147: Care leavers in suitable accommodation
- PSA 14: Increasing the number of young people on the path to success

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- PSA16: Increase the proportion of socially excluded adults in settled accommodation and employment, education or training
- Specific LACYP definitions of safe and settled and how this might differ to be identified during the scope.

7. What will be the likely geographical scope of the searches?

(Work conducted in/including the following countries.)

- England only
- UK only
- Europe only
- Europe and other countries (English language)

NB: UK, Ireland, US, Canada, Australia and New Zealand (can't tick/cross the boxes).

8. Age range for children and young people (CYP):

13–25

9. Literature search dates

Start year

2000

10. Suggestions for keywords to be used for searching the literature

See Appendix 2 for complete list of search terms.

11. Suggestions for websites, databases, networks and experts to be searched or included as key sources.

National Children's Bureau (NCB) resources www.ncb.org.uk/

National Centre for Excellence in Residential Child Care

www.ncb.org.uk/page.asp?sve=934

Scottish Institute for Residential Child Care www.sircc.org.uk/

National Care Advisory Service, Rainer: www.nlcas.org/

Leavingcare.org www.leavingcare.org/

Shelter – preparing to leave care

http://england.shelter.org.uk/get_advice/advice_topics/finding_a_place_to_live/leaving_home/preparing_to_leave_care

Shelter – support on leaving care

http://england.shelter.org.uk/get_advice/advice_topics/homelessness/help_from_social_services/support_for_care_leavers

Children's Rights Director www.rights4me.org/reports.cfm

National Asylum Support Service (NASS)

www.asylumsupport.info/specialfeatures/children.htm

Fostering Network

BAAF

PSA 16 data on care leavers (October 2008)

Voice www.voiceyp.org/ngen_public/default.asp

12. Any key texts/books/seminal works that you wish to see included?

Mike Stein publication list

Barnardo's *What works for young people leaving care?*

National Care Advisory Service: www.nlcas.org/

www.leavingcare.org/ – series of reports on accommodation

www.leavingcare.org/professionals/research/leaving_care__accommodation

Quality Protects research briefings – MRC/RIP.

A National Voice (2005) *There's no place like home.*

What young people in, and formerly in, residential and foster care think about leaving care, 2006, Children's Rights Director.

Young people's views on leaving care, 2006, Children's Rights Directors

www.rights4me.org/reports.cfm.

DTLR, DH & Centrepont (2002) *Care leaving strategies: a good practice guide.*

CLG and DCSF (2008) Joint working between housing and children's services: preventing homelessness and tackling its effects on children and young people.

SEU, 2005, *Transitions: young adults with complex needs.*

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13. Anything else that should be included or taken into account?

Receive housing and support up to 18 before passing into general housing system.

Focus on financial support.

Not in employment, education or training (NEETS).

Importance of fostering resilience to outcomes, see SCIE Resource guide 4.

The National Care Advisory Service (NCAS) and Shelter are producing a good practice guide on accommodation for care leavers that will contain good practice examples and be backed up by resources on www.leavingcare.org.

Note on setting review questions

The review questions are important because the scoping team will use these to assess the available literature. Review questions need to be clear, specific and answerable. For example, the questions addressed in a scoping study on diversity in the early years might identify the following questions:

1. What is the evidence of different outcomes for children from diverse backgrounds and with different characteristics?
2. In what ways do early-learning environments impact on children's sense of identity and understating of diversity?
3. What is the evidence to support specific strategies that help children from all backgrounds and with diverse characteristics to access the curriculum and make good progress in the early years?

In addition to suggesting review questions, it is important to provide definitions of key terms and concepts (for example, for 'outcomes' 'diversity' 'early-learning environment' and 'early years' in the above example).

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Appendix 4: National indicators and key data sources

Table 13. Relevant National Indicators and data sources for Priority 3.3: Increasing the number of care leavers (young people) in 'settled, safe accommodation'

ECM outcome	National Indicator (NI)	NI Detail	Data source (published information)	Scale (published information)	Links to data source
Additional indicators: Population		Population characteristics	DCSF: Children looked-after in England (including adoption and care leavers) year ending 31 March 2009	National, regional and LA	http://www.dcsf.gov.uk/rsgateway/DB/SFR/s000878/index.shtml
Stay safe	NI 61	Timeliness of placements of looked-after children for adoption following an agency decision that the child should be placed for adoption	DCSF: Children looked-after in England (including adoption and care leavers) year ending 31 March 2009	National, regional and LA	http://www.dcsf.gov.uk/rsgateway/DB/SFR/s000878/index.shtml
	NI 62	Stability of placements of looked-after children: number of	DCSF: Children looked-after in England (including adoption and care leavers) year ending	National, regional and LA	http://www.dcsf.gov.uk/rsgateway/DB/SFR/s000878/index.shtml

ECM outcome	National Indicator (NI)	NI Detail	Data source (published information)	Scale (published information)	Links to data source
		placements	31 March 2009		
	NI 63	Stability of placements of looked-after children: length of placement	DCSF: Children looked-after in England (including adoption and care leavers) year ending 31 March 2009	National, regional and LA	http://www.dcsf.gov.uk/rsgateway/DB/SFR/s000878/index.shtml
Achieve economic wellbeing	NI 147	Care leavers in suitable accommodation	DCSF: Children looked-after in England (including adoption and care leavers) year ending 31 March 2009	National, regional and LA	http://www.dcsf.gov.uk/rsgateway/DB/SFR/s000878/index.shtml

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