



Policy Briefing, February 2024

Care leavers and their children:

Evidence on how care experience affects the next generation

This briefing covers important new evidence for all those who work to secure better outcomes for care leavers. It shows that with the right support they can thrive as adults, but there is an urgent need for lifelong support to ease psycho-social scarring and promote wellbeing for them and for their children.

In 2001, 44 out of every 10,000 children in England and Wales were in care – today that figure is 70 in every 10,000 and it continues to rise. Earlier studies have shown care leavers suffer deep and persistent inequalities in health, education and employment over their life course. Until now, though, there has been scant evidence on the intergenerational transmission of disadvantage linked to care experience.

About this research

This is the first UK study to look at care leavers as mothers, following their development and that of their children from early childhood to adolescence and into adulthood, using two British cohort studies. It shows how the long-term effects of care experience can be eased.

The research had three key aims:

- 1 To examine the socioeconomic resources available to care-experienced mothers.
- 2 To ask whether their children's outcomes are affected by that experience.
- 3 To identify what protective factors and processes can help these mothers and their children to live healthy, productive lives.

Key findings

Overall, care-experienced mothers suffered multiple disadvantages. They had lower levels of education than their peers and were more likely to be in workless families, on benefits or in poverty. They were more likely to live in rented, damp housing, to lack peace and quiet at home and to be dissatisfied with the areas where they lived. They were more likely to experience force by a partner, to have poor physical or mental health and to be dissatisfied with life.

Our findings highlight the corrosive effect of cumulative socioeconomic disadvantage in undermining children's attainment. However, when we compared children of mothers with and without care experience from similar socioeconomic backgrounds, we did not find a direct link between parental care experience and limited educational progress over the school years.

There is strong evidence that trauma associated with care experience is passed from care leavers to their children, with mental health scars very evident in this group. Both parents and offspring are at greater risk of mental health problems, including symptoms of depression and anxiety. Their children have increased levels of behavioural problems, self-harm and suicidal intent.

Resilience is key. More than a quarter of the mothers (27%) displayed resilience. These mothers were more likely to have had stable foster placements and better social support on leaving care. They gained higher levels of qualification, had better housing and were more likely to have jobs than other care leavers.

Policy context

The number of children in care in England and Wales is expected to reach 100,000 by the early 2030s. This will put pressure on public spending.

The 2022 Independent Review of Children's Social Care called for a Family Help system to keep more children in loving family networks. It recommended recruiting foster carers to provide long-term support and training new social workers to work with children and families. It said care experience should be a Protected Characteristic under equalities legislation.

In February 2023 the Department for Education responded in a consultation, 'Stable Homes, Built on Love'. It promised 'Families first for children' pilots in three areas to inform wider change; a fostering recruitment and retention programme and measures to support social worker recruitment. It also promised to consult on 'corporate parenting' responsibilities but did not agree to make care experience a Protected Characteristic under the Equality Act.

The review called for a total of £2.6 billion new funding over four years, but the government committed only £200m in initial investment. The House of Lords Public Service Committee has raised concerns about this. In February 2024 the Parliamentary Education Committee will investigate whether these government reforms go far or fast enough.

The UK government's 'Stable Homes, Built on Love' initiative makes some important promises: to build lasting family networks around those who experience the care system; to put love and relationships at the heart of the care system; and to make better use of evidence. While these measures are welcome, they do not go far enough.

“This work brings hope to care-experienced people. With the right support, we can provide what every parent should aspire to, for our children to have a better life than ours. There are steps our society can take to be a good ‘corporate grandparent’ and to facilitate environments in which our children can grow up surrounded by love and family.”

— Jonny Hoyle, Care Experienced Social Work Leader

Recommendations

We recommend further investment in building a care system which supports people throughout their lives, including:

1. Protected status Our findings provide robust support for the call to grant Protected Characteristic status to help eliminate the disadvantages, stigma and prejudice often encountered by care-experienced young adults and their families. Many of the care leavers in the study suffered multiple disadvantages, such as being in deprived areas or workless households, and adjustment problems such as mental health issues and chaotic home lives were very evident.

2. Ongoing support through ‘corporate grandparents’ This research underlines an important point: there are key measures which can help ensure good outcomes for the care experienced and their children. They need an enduring safety net of secure housing and supportive relationships, and the state must be prepared to play a role in enabling this throughout their lives. Our findings clearly support the call to extend service provision to care leavers and their families further into the adult years. Such support is a lever for building resilience: as we found that the most resilient care-experienced mothers lived in more secure housing in less deprived areas, and just five per cent were in workless households compared with 18 per cent of the general population.

3. Government Initiatives A Basic Income Pilot was launched in Wales in 2022 and offers a degree of financial security to care leavers, in recognition of the fact that they were disproportionately disadvantaged compared to their peers. Eligible care leavers receive £1,280 every month for two years following their 18th birthday. Additionally, the Scottish government has announced an extension of early learning and childcare eligibility to two-year-olds with a care experienced parent. The UK government should pay attention to these programmes, which if successful could provide a more effective and lasting scaffolding for care leavers and their children. We found almost half of care-experienced mothers lived in poverty, compared with a quarter of those who had not been in care (**See table 1**).

4. Joined up thinking Effective support means integrated service delivery which can address the multiple challenges care leavers face when coming of age. They need support to access education, employment, decent housing and, importantly, mental health services.

5. Mental health The evaluation of the government initiative to better assess the mental health needs of children in care is welcome: in particular, assessments need to be consistently implemented and properly resourced if the wellbeing of the children is to be improved. The pandemic has highlighted an imbalance between demand and provision in mental health care, with an estimated 1.6 million people on waiting lists for mental health services. More needs to be done to address the mental health care needs of this potentially vulnerable population (See table 2). Compared to others in their 50s, we found care leavers and adult children of care leavers were more than twice as likely to report poor mental health both pre- and during the pandemic and to report feelings of loneliness. Further research is urgently needed to uncover the protective factors which can help minimise the impact of care experience on mental health.

6. Education Effective measures should be in place to enable young people with care experience, along with young mothers who have left school early due to traumatic experiences at home, to return to education. They must be supported to acquire appropriate qualifications, and to fulfil their desires for upskilling and reskilling. While we did not find a direct link between parental care experience and limited educational progress, our findings highlight the corrosive effect of cumulative socioeconomic disadvantage in undermining these children’s attainment. More than half the children of the most resilient care-experienced mothers gained at least five good GCSEs, compared to fewer than three in 10 of those whose mothers were impoverished or distressed. This gap needs to be addressed through improved statutory support for care leavers’ children beyond age 16, including for a return to education in later life.

7. Housing Adequate housing for this vulnerable group is a vital support structure and must be put into place. Without appropriate or secure housing the competencies of parents were challenged, affecting their health and wellbeing as well as their children’s healthy development. The mothers in our study were more likely to live in noisy homes where abuse was more likely to occur. We found a fifth of them lived in damp homes, compared with 13 per cent of those who had not been in care.

8. Integrated service delivery. This is crucial to break the vicious cycle of socioeconomic disadvantage and care experience – in particular regarding access to education, employment, decent housing and mental health services.

Table 1: Social and economic disadvantages

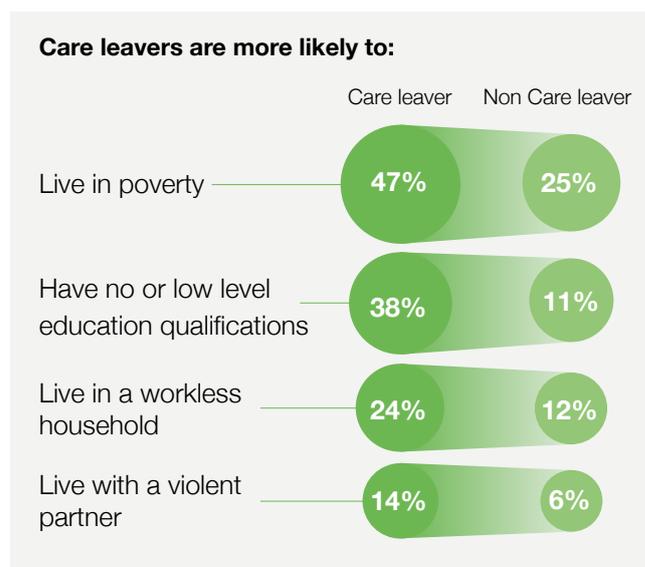
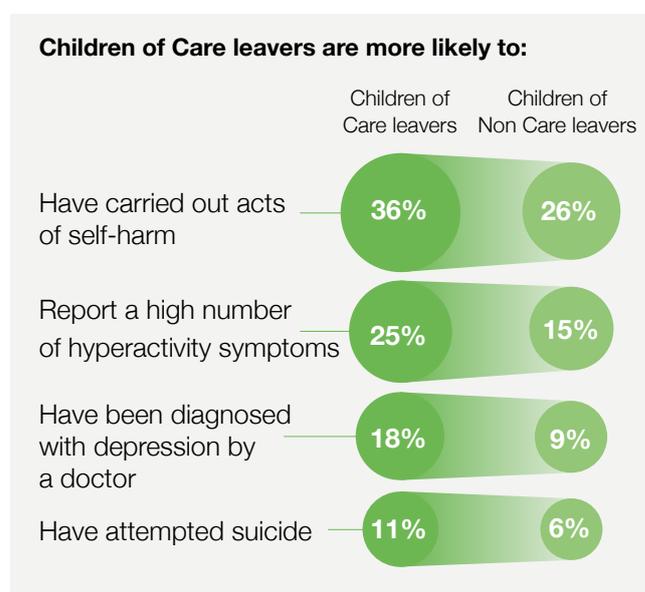


Table 2: Mental health issues



“This important work shows the resilience of care experienced families who break the cycle, but more than anything it gives further evidence to the intolerable intergenerational disadvantage faced by those with an experience of care.”

— Josh MacAlister, Chair, Independent Review of Children’s Social Care

About the research

This research has used two of the UK's longitudinal birth cohort studies, the 1970 British Cohort Study and the Millennium Cohort Study. Over the course of their lives, a wide range of information has been collected about the participants' health; physical, educational and social development; and socioeconomic circumstances, among other factors.

1970 British Cohort Study

This study follows the lives of more than 17,000 people born in England, Scotland and Wales in one week of 1970. Since the birth survey there have been nine further waves of data collection at ages 5, 10, 16, 26, 30, 34, 38, 42 and 46-48 when 8,581 cohort members took part.

Of the 12,740 cohort members for whom we have information on both their mothers' care experience and their own care experience: 430 (3.4 per cent) had a care experienced mother and 610 (4.8 per cent) had experienced care themselves before age 17. It is important to note here, that contrary to popular belief, the majority of children with a mother with care experience do not end up in care themselves: 11 per cent of children with a care experienced mother also experience time in care compared to 3 per cent of children of mothers with no care experience.

Millennium Cohort Study

The Millennium Cohort Study follows the lives of approximately 19,000 people born in the UK between September 2000 and January 2002. Data have been collected when the cohort members were aged around 9 months, 3, 5, 7, 11, 14 and 17, at which point 10,625 families participated.

Of the 18,552 families who took part in wave 1 of the study and a further 692 new families introduced at wave 2, 456 (2.4 per cent) cohort members had a care-experienced parent: 304 a mother, 142 a father, and 10 both mother and father.

For more information on the 1970 British Cohort Study and the Millennium Cohort Study, visit the CLS website at www.cls.ucl.ac.uk.

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Notes:

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