



Pathways into and through higher education for young people with experience of children's social care

Leon Feinstein, Steve Peck, Marc Wigley, Kathryn Duckworth,
Julie Selwyn, Steve McIntosh and James Robson

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Glossary and acronyms

Term	Acronym	Definition
Care leaver		Care leavers are young people who have been in care at some point since they were 14 years old for three months or more <i>and</i> were in care on or after their 16th birthday.
Child in need		A child in need is defined under the Children Act 1989 as a child who is unlikely to reach or maintain a satisfactory level of health or development, or their health or development will be significantly impaired without the provision of children's social care services, or the child is disabled.
Child looked after	CLA	Under the Children Act 1989, a child is looked after by a local authority if he or she falls into one of the following: <ul style="list-style-type: none"> • is provided with accommodation, for a continuous period of more than 24 hours [Children Act 1989, Section 20 and 21] • is subject to a care order [Children Act 1989, Part IV] • is subject to a placement order.
Children in need	CIN	Children in need includes children on child protection plans, looked after children, and children on child in need plans, as well as other types of plan or arrangements. Children in need also includes children awaiting a referral to be considered, an assessment to start or, for an assessment which has started, for the assessment to be completed.
Child protection plan	CPP	A child in need becomes the subject of a child protection plan if they are assessed as being at risk of harm, at an initial child protection conference.
Free school meals	FSM	Children and young people in the UK are usually eligible for free school meals if their parents or carers are on a low income or in receipt of certain benefits.
Further education		The term further education refers to post-compulsory or pre-university education in the UK and is also used to refer to further education colleges with the power to award certificates at Level 3 or below for people over the age of 16.
Higher education		Higher education is a non-compulsory level of education that may at times refer to a set of institutions with degree-awarding powers, attendance at those institutions or a set of qualifications at Level 4 and above. Level 4 includes the first year of a higher level NVQ, a foundation degree, an undergraduate degree or a Level 4 BTEC qualification.
Individualised Learner Record	ILR	The ILR is the primary data collection about further education and work-based learning in England.
Key Stage 2	KS2	Key Stage 2 is the legal term for the four years of schooling in maintained schools in England and Wales normally known as Year 3, Year 4, Year 5 and Year 6, when the pupils are aged between seven and 11 years.
Key Stage 4	KS4	Key Stage 4 is the legal term for the two years of school education which incorporate GCSEs, and other examinations, in maintained schools in England normally known as Year 10 and Year 11, when pupils are aged between 14 and 16 by 31 August.
Key Stage 5	KS5	Key Stage 5 is a label used to describe the two years of education for students aged 16–18 and at sixth form or college. In England, Wales and Northern Ireland it is aligned with previous Key Stages in the National Curriculum.
National Pupil Database	NPD	The NPD is a database controlled by the Department for Education in England, based on multiple data collections from individuals aged two–21 in state-funded education. Data is matched using pupil names, dates of birth and other personal and school characteristics. Personal details are linked to pupils' attainment and exam results over a lifetime school attendance.

Term	Acronym	Definition
Post-16 education/ post-compulsory schooling		Following the introduction of statutory guidance on 'raising the participation age' in 2013, the age of compulsory participation in education in England is now 18. At 16, young people have three main pathways available to them: <ul style="list-style-type: none"> • stay in full-time education • start an apprenticeship • spend 20 hours or more a week working or volunteering, alongside part-time education or training.
Special educational needs	SEN	Our indicator of special educational needs pre-dates the changes made under the current special educational needs and disabilities (SEND) system introduced by the Children and Families Act (Department for Education, 2014) and separates the level of provision received by individuals in terms of those with and without a statement/ education, health and care plan.
Young person with experience of children's social care		A term used in this report to refer in the analysis carried out to the collective grouping of young people who are care leavers, have ever been in care, have been on child protection plans or are otherwise classified as in need.



Executive summary

This report provides new data on patterns of entry to higher education for young people in England with experience of children's social care. In our study, the term 'young person with experience of social care' refers to those who:

- meet the statutory definition of a care leaver
- were previously in care at any point after the age of five but did not meet the statutory definition of a care leaver
- were on a child protection plan at any point after the age of 11
- were categorised as a 'child in need' at any point after the age of 11.

This report provides basic statistical findings on the general research question: 'How do these different groups of young people with experience of children's social care tend to differ in their progression to and through higher education compared with each other and other young people?'

The report is supported by six appendices providing more detail on methods, coding of variables and the full set of statistical tables.

We make no presumption that higher education entry is a necessary goal for all young people or that other destinations including work, care, further education and other activities may not offer greater value and significance.

We hope this statistical information is helpful to those interested in improving higher education and further education access and experience, by providing a benchmark in terms of current rates and in evidencing insufficient realisation of the potential, capability and rights of many young people.

1. Methods

There is an identified gap in knowledge on the pathways into higher education and outcomes for young people with experience of children's social care. In particular, little is known about the variation within this group by the type of social work service and intervention they received. This study used five mutually exclusive analytical groups and two distinct comparison groups (see section 2.i for detailed definitions):

- Care leavers
- Ever in care
- Ever on a child protection plan
- Ever a child in need for more than six months
- Ever a child in need for less than six months
- Free school meal (FSM) population
- General population

This study draws on newly matched population datasets in relation to a birth year cohort of young people with stable residence in England from the age of 11 onwards born between 1 September 1998 and 31 August 1999. We draw on national administrative data in the following datasets to create a single bespoke compound dataset for analysis:

- Children Looked After (CLA; 2006–2017)
- Children in Need (CIN; 2010–2017)
- National Pupil Database (NPD; 2009/10, Key Stage 2; 2014/15, Key Stage 4)
- Individual Learner Records (ILR; 2016–2021)
- Higher Education Statistics Agency (HESA; 2017–2021) records on participation in higher education institutions.

This gives a national cohort with data from the age of 11 (academic year: 2009/10) to the age of 22 (2020/21).

We set out current rates of entry, continuity and completion by age 22 and consider university ranking and the type of qualification pursued. We also report average differences in pathways into higher education from age 16 in terms of further education and Key Stage 5 qualifications and registrations, including vocational and apprenticeship routes. We consider differences in outcomes and pathways for a range of characteristics including sex, prior attainment and special educational needs (SEN) status.

2. Headline findings

Four key themes emerged from the study:

The study results are in line with earlier findings showing that young people with experience of children's social care were less likely, on average, to enter higher education by the age of 22 than the general population or those eligible for free school meals (FSM).

Behind this stark statistic are multiple and variable causes and experiences. Among care leavers and those ever in care, 14% entered higher education by age 22. This figure is 16% for those ever on a child protection plan, 18% for children in need for more than six months after age 11, and 29% for children in need for less than six months. These average rates compare with 39% for those eligible for FSM and 48% for the remaining general population in this cohort.

We also found substantially lower rates in relation to higher education entry by age 18/19, entry to a 'top-tier' higher education institution (Boliver, 2015; see section 3.ii), and completion within the period to age 22. Withdrawal rates without qualifications for children with experience of social care are generally double those of the general population and, across groups, very similar to the withdrawal rates for those eligible for FSM. The rates for care leavers are particularly high.

Rates between groups were generally parallel to those of entry to higher education and achievement at school, in that among the five groups, rates of academic achievement were lowest for care leavers and those ever in care. Across most outcomes considered, the shorter-term children in need group and FSM comparison population were most similar. One exception is that care leavers had the second

highest entry rate at age 18/19 of all groups with experience of children's social care, possibly reflecting a higher level of support available for this group in the transition from post-16 settings to higher education.

Rates of higher education entry and other outcomes varied with prior attainment, sex and SEN status for those with experience of children's social care as for those in the general population.

Across all groups, lower proportions of young people with SEN entered higher education and, amongst these, fewer of those with statements or education, health and care plans entered higher education than those who received SEN support provision only. These proportions were lowest for care leavers and those ever in care or ever subject to a child protection plan (CPP); 4% for each group. These proportions were higher for those entering higher education from both children in need groups, possibly reflecting variation in the type of primary SEN need, but were less than half the rates of the general population.

Across all groups, higher proportions of females entered higher education than males, and greater proportions of young people with higher GCSE attainment entered higher education than those with either moderate or low Key Stage 4 achievement. Young people with experience of children's social care and 'low or no grades' at Key Stage 4 were very unlikely to enter higher education: of those with 'low or no grades', over a quarter (28%) of individuals in the general population comparison group entered higher education, compared with 4% or less of those with 'low or no grades' across the other groups.



We found that the size of these differences was reduced with statistical controls. However, holding constant sex, ethnicity, SEN status, socioeconomic circumstances, school type, exclusions and absences, and prior attainment, young people with experience of children's social care were still substantively less likely to enter higher education by age 22 than those in the FSM population.

These results suggest that the combined impacts on educational pathways of trauma, disruption, stigma and/or poverty by age 22 endure beyond the capacity of the current system of support to fully compensate.

We found that relatively high proportions of young people with experience of social care who did enter higher education took a vocational pathway to higher education, particularly care leavers.

Of those who entered higher education by the age of 22, over a third (36%) of care leavers got there via vocational post-16 routes; nearly three times as many as from the general population group (13%) and 50% higher than those eligible for FSM (24%). Indeed, all five groups of young people with experience of children's social care were more likely to follow vocational pathways to higher education than the comparison populations, and it represents the most common route to higher education for both care leavers and those ever in care.

For those with SEN, in each group (with the exception of those ever subject to a CPP), the vocational pathway was more likely to be the pathway to higher education than the traditional academic route. This was also the case for those eligible for FSM but not the general population.

Vocational pathways also appear to be routes more commonly taken by males, particularly care leavers, those ever in care or ever subject to a CPP, where entry rates amongst males were also lowest. By contrast, across all groups, females were more likely to enter higher education via the traditional academic route.

Across all seven groups, very few young people followed an apprenticeship pathway to higher education.

3. Conclusions

The study shows the potential of administrative data to shed light on national policy challenges. It also shows the weakness of this approach as a means to understanding the multiple and diverse causes and experiences that explain the statistical findings.

In this report, we provide a narrow set of descriptive headline findings from this rich data. We hope others will further investigate the data to replicate and deepen the analysis on the many specific questions that may be of interest, such as considering further forms of intersectionality and difference, or to add other cohorts and consider change over time. We will work with partners to provide the data in ethical and accessible forms to facilitate this.

We would emphasise the fact that many young people with experience of children's social care enter higher education and thrive. Indeed, young people with experience of children's social care are providing some of the nation's best scholarship. This is a reminder that focusing on averages, however derived, risks remaining blind to the many important exceptions to such 'rules' (cf. Feinstein & Peck, 2008). That is, some individuals do succeed despite the relatively long odds of doing so, and we should not interpret statistical results in a causal or absolute way.

We hope, in particular, that Virtual School Heads – a regional role that acts as a headteacher for all children with a social worker within a particular local authority – will find this information helpful when working on the strategic goal of improving educational inclusion and participation for children and young people with experience of children's social care.

It would be straightforward for official sources to provide annual evidence on rates of entry from these datasets. An appropriate agency might provide local authority or college-level data, although this would require a different legal and ethical basis because of the small numbers involved.

We emphasise the finding from this study of the importance of considering post-16 educational experiences more broadly than the more narrowly conceived traditional academic route for many young people who have faced early adversity. Other routes to higher education, particularly vocational pathways sometimes taken after Level 3 NVQs, appear to offer substantive second chances for many.

Finally, we emphasise the importance of the roads less travelled and the many opportunities and pathways to higher education after the age of 22 years.

1. Introduction

There is an abiding concern about the educational opportunities and outcomes for young people who come into contact with the children's social care system. National statistics show that children looked after generally tend to perform and progress less well educationally than their peers, with most not reaching the required standard in English and maths, high rates of absenteeism, being more likely to be unemployed post-16, and less frequently observed in further and higher education.¹ These outcomes are a concern in all countries² that collect data on children in care and care leavers, and reflect critical issues around equity, rights and productivity.

The reasons for these disparities are multiple and variable. Educational outcomes are partially influenced by each young person's development and prior experiences, alongside resulting educational and social disruption. The cumulative effect of factors such as abuse and neglect, stigma, punitive learning environments, and other school, educational and social factors can also have a detrimental impact on mental health and children's ability to engage positively with school. Around half of children in need (CIN) have an identified special educational need (SEN),³ which is more than three times higher than the general population, and for the majority, their needs fall under the category of social, emotional and mental health.

Although there is a large and growing body of evidence about these relationships for the educational outcomes of school-aged children, relatively little is known about the routes to and through higher education for young people with experience of children's social care, particularly concerning their educational pathways compared with other young people in the population.

This report replicates, extends and develops research on the pathways into and through higher education for a recent birth cohort of young people in England who had experience of children's social care. Using population-level linked data, the study describes in detail young people's educational pathways into higher education, including the types of institutions attended, the continuity of pathways through higher education, and the likelihood of successfully attaining an undergraduate degree. The analysis considers a wider range of sub-groups within the population of young people with experience of children's social care than has been possible in previous studies. It also takes a broader look across different types of higher education outcome variables among these groups and looks at how they compare with the general population and a comparator group: young people eligible for free school meals (FSM).

2. Methods

There is an identified gap in knowledge on the routes into higher education and outcomes for young people with experience of children's social care. In particular, little is known about the variation within this group by the type of children's social work service and intervention they received.

We first describe how the different sub-groups were defined for the analysis (see Appendix A for further detail on background and methods).

i. Groups of interest

The study used five mutually exclusive analytical groups and two comparison groups:

Analytical groups

- **Care leavers (Group 1):** Young people who have been in care at some point since they were 14 years old for 13 weeks or more *and* were in care on or after their 16th birthday.
- **Ever in care (Group 2):** Young people who were in care at any point after the age of five⁴ but did not meet the statutory definition of a care leaver, including young people who were in care before age 14 but not after, and those in care for less than three months.
- **Ever on a child protection plan (Group 3):** Young people placed on a child protection plan (CPP) at any point after age 11⁵ but who were not in care at any point.

¹ [Outcomes for children in need, including children looked after by local authorities in England, Reporting year 2023 – Explore education statistics – GOV.UK](#)

² For example, Courtney et al. (2014) in the United States.

³ [Outcomes for children in need, including children looked after by local authorities in England, Reporting year 2023 – Explore education statistics – GOV.UK](#)

- **Ever a child in need for more than six months (Group 4):** Young people classified as in need for more than six months at any point after age 11.
- **Ever a child in need for less than six months (Group 5):** Young people who spent less than six months classified as in need at any point after age 11.

Comparison groups

- **FSM population (Group 6):** Young people from the same birth cohort who were not included in groups 1–5 but who were eligible for FSM at any point during the six years before they completed Key Stage (KS) 4.
- **General population (Group 7):** All other young people from the 1998/99 cohort who were **not** included in groups 1–6; that is, young people not in care at any point after age five nor designated as in need after the age of 11, and not eligible for FSM during the six years before they completed KS4.

ii. Research questions

The study addressed the following main research question:

- How do different groups of young people with experience of social care differ in their progression to and through higher education compared with each other and their peers?

This study explored this general question in relation to the following specific questions:

- How likely are young people with experience of children’s social care to enter higher education?
- When do they enter higher education?
- Where do they enter higher education?
- What happens to them after they enter higher education?
- How are individual characteristics such as sex, ethnicity and having an identified SEN associated with progression into and through higher education?

iii. Data

Data comes from a number of linked datasets which track the educational and care-related experiences of children and young people in England from the age of five to 22:

- Children Looked After (CLA) data return (2004–2021)
- Children in Need (CIN) Census (2009–2017)
- National Pupil Database (NPD; KS2: 2009/10; KS4: 2014/15)
- Individualised Learner Record (ILR; 2015–2021)
- Higher Education Student Statistics (HESA; 2016–2021)

The records from the social care and other datasets were matched to the NPD by project analysts using the pupil matching reference (PMR) numbers provided by the Department for Education (DfE). The data was de-identified and provided for analysis in the Secure Research Service (SRS) provided by the Office for National Statistics (ONS).

The sample (556,240) draws on a single cohort of young people born between 1 September 1998 and 31 August 1999. This cohort was eligible to take their GCSEs in 2015 and the first possible year of entry to higher education was 2017/18 when the young people were aged 18/19.

The sample included most children living in England from age 11 to 16 (i.e., those present in the NPD at KS2 and KS4). Excluded were children entering England after the age of 11, whether from elsewhere in the UK, the EU or further afield (e.g., unaccompanied asylum-seeking children). Also excluded were those educated in independent schools.

iv. Wave structure

One technical note is that the study defined and measured each young person’s educational pathway in terms of the sequence of qualifications attained as they moved through the system (as opposed to the years and ages at which they obtained these qualifications). To allow for the diversity of post-16 pathways by routes and ages, the data was organised as shown in Table 1.

⁴ Comprehensive records of ‘care’ in the administrative data only exist from 2003/04 onwards, meaning data for our sample is only available for those experiencing care at some point after the age of five.

⁵ We use age 11 as a cut-off point to ensure children have KS2 scores.

Table 1: Definition of waves of measurement for pathways into and through higher education

	Wave 2	Wave 3	Wave 4	Wave 5	Wave 6
Shorthand	Qualification at the end of KS4	Registered qualification at the start of further education	Qualification at the end of further education	Registered qualification at the start of higher education	Qualification at the end of higher education
Specification in data	GCSE qualification completed in Year 11.	Educational qualification registered for at the start of formal post-16 education and training, whenever that starts for the individual.	Level 2 or 3 qualification by age 22 or prior to entry to Level 4, whichever came first.	Educational qualification registered at the start of Level 4 qualifications (before age 22).	Educational qualification at the end of higher education or age 22, whichever came first.

v. Data limitations

The data and years requested are a strength of the study because the extensive changes to KS4 exam testing and grades occurred after 2016/17 (i.e., after this cohort completed KS4). Additionally, KS2, KS4 and KS5 had been completed by the study sample before the COVID-19 pandemic occurred, which resulted in lockdowns that led to school closures and exam cancellations. However, the linked datasets also had some limitations; the key limitations are listed here:

- The NPD only contains complete pupil-level data on those educated in state-funded schools.
- Pupils' progress could not be followed if they attended a further education college outside of England, as the ILR is exclusively learners in England. However, HESA records all UK entries, and therefore, if a young person was educated in England but chose a higher education institution in Wales, Scotland or Northern Ireland, their progress could still be followed.
- The social care data collection (SSDA903) began in 1992 but there was a period between 1998 and 2003 when only a one-third sample was collected before returning in 2004 to collect data on all children in care. Therefore, children not in the one-third sample but who entered care between 1998 and 2004 have their early care histories missing.
- The data is necessarily truncated at age 22, even though for many, particularly those with experience of children's social care, engagement in academic progression may come later in life.

We also note that a deeper analysis might take more account of the impact of COVID-19, perhaps by considering the evidence across cohorts.

vi. Measures

Outcome measures

The primary outcomes of interest related to initial participation in higher education, which was defined as a young person registering for a Level 4 qualification⁶ at either a higher education institution or a further education college.

The following outcome measures were explored across the seven analytical/comparison groups:

- Entry to higher education
- Age 18/19 entry
- Type of institution attended, including entry into a top-tier higher education institution
- Qualification pursued
- University continuity
- Degree completion by age 22

Explanatory variables

Our analyses also included a number of explanatory variables to facilitate comparisons between the seven groups and identify potential risks or protective factors that might operate differentially across the groups of young people. These include demographic characteristics, prior attainment and education pathways, as well as details of experiences in, and with, children's social care. These measures are summarised in Section III of Appendix B.

⁶ [What qualification levels mean: England, Wales and Northern Ireland – GOV.UK](https://www.gov.uk/guidance/what-qualification-levels-mean-england-wales-and-northern-ireland)

vii. Analytical approach

Our analytic plan involved four types of analysis:

- Bivariate descriptive analysis of each outcome and explanatory variables for the seven groups.
- Logistic regression analysis of the relations between the explanatory and outcome variables, focusing particularly on the extent to which the baseline relations between group

membership and outcomes were affected by each set of additional explanatory variables.

- Pathway analysis of the various routes from KS4, through further education into higher education, and through higher education to degree attainment.
- Further bivariate and three- and four-way crosstabulations of outcomes to understand elements of intersectionality.

3. Headline findings

The full set of statistical results is provided in Appendices 3–6, covering the different analytic approaches. This section presents high-level findings from our analysis. It summarises results in terms of four sets of findings:

- Describing the groups.
- Variation in entry to and through higher education.
- Regression analysis and intersectional analysis of variation in entry to higher education.
- Progression to higher education: variation in post-16 educational pathways.

In each set of results we consider findings in relation to our five groups of interest, the two core comparison groups and, for completeness, the results for the cohort as a whole (i.e., the total population) for the 1998/99 birth cohort.

i. Describing the groups

Demographic profil

Sex: As shown in Table 2, a higher proportion of care leavers (Group [G] 1) were male than in the other groups of young people with experience of children’s social care, and both the FSM (G6) and general population (G7) comparison groups. There were higher proportions of females than males in the three other groups of young people with experience of social care: ever on a CPP (G3) and both the longer- and shorter-term CIN groups (G4 and G5).

Ethnicity: Black young people were over-represented in all five care and need groups relative to the general population (G7) but not the FSM comparison group (G6). Those of mixed ethnicity were also over-represented among all groups with experience of children’s social care compared with the general population group (G7).

English as an additional language: Care leavers (G1) were less likely to have English as an additional language than young people in the other groups with experience of social care (G2–G5) and the general population (G7) but not the FSM group (G6), for which the rate was the highest. English was also more likely to have been an additional language for young people in the ever in care (G2), ever CPP (G3) and in need for less than six months (G5) groups compared with young people in the care leavers group.

Socioeconomic status: Young people in the ever CPP group (G3) were, on average, the most likely to have been eligible for FSM of the five groups with experience of children’s social care, with 76% of young people in the ever CPP group (G3) having been FSM eligible; nearly three times higher than for young people in the total population average.⁷ Higher proportions of young people in the ever CPP group (G3) were also reported to have lived in the most deprived areas compared with others with experience of children’s social care; 38% from the most deprived areas (Q5 in the Income Deprivation Affecting Children Index [IDACI], where Q5 is the most deprived areas of the country and Q1 the least deprived areas) and 8% from the least deprived areas.

The FSM population (G6) had high rates of local area deprivation, with more than four in 10 (42%) of this group living in Q5. In line with Harrison et al. (2023), amongst the groups with experience of children’s social care, the profile for young people in the care leavers group (G1) was most similar to the profile for young people in the general population, with care leavers having had the lowest proportion eligible for FSM (47%) and the most even distribution across the five IDACI quintiles.

⁷ Reference here is made to the overall total population for the 1998/99 cohort as the two comparison groups are split by those eligible or not for free school meals and so by definition the proportions within each are 100% and 0%, respectively.

Table 2: Demographic profile by group

		Care leavers (G1)	Ever in care (G2)	Ever CPP (G3)	CIN >6 months (G4)	CIN <6 months (G5)	FSM pop. (G6)	General pop. (G7)	Total pop.
Sex	Male	54%	51%	44%	49%	47%	52%	51%	51%
Ethnicity	Female	46%	49%	56%	51%	53%	48%	49%	49%
	White	74%	69%	77%	78%	77%	68%	80%	77%
	Asian	3%	6%	7%	5%	8%	13%	8%	8%
	Black	5%	8%	4%	5%	5%	10%	3%	4%
	Mixed	7%	7%	5%	5%	5%	6%	3%	4%
	Other	2%	3%	2%	3%	2%	s	2%	2%
	Missing	10%	7%	4%	4%	3%	c	5%	4%
English as an additional language	Yes	3%	10%	10%	9%	11%	22%	9%	11%
	No	97%	90%	91%	91%	89%	78%	91%	89%
FSM	Yes	47%	63%	76%	63%	52%	100%	n/a	26%
	No	53%	37%	24%	37%	48%	n/a	100%	74%
IDACI quintiles	1	22%	13%	8%	11%	11%	5%	25%	19%
	2	20%	12%	10%	13%	15%	11%	26%	22%
	3	20%	17%	17%	19%	20%	17%	21%	20%
	4	20%	24%	26%	25%	25%	26%	16%	19%
	5	17%	33%	38%	32%	30%	42%	12%	20%
TOTAL		4,350	6,590	5,670	26,550	43,930	96,460	372,690	556,240

Counts are rounded to the nearest 10. "c": suppressed if counts are less than 10; "s": secondary suppression to avoid calculation of suppressed values from totals.

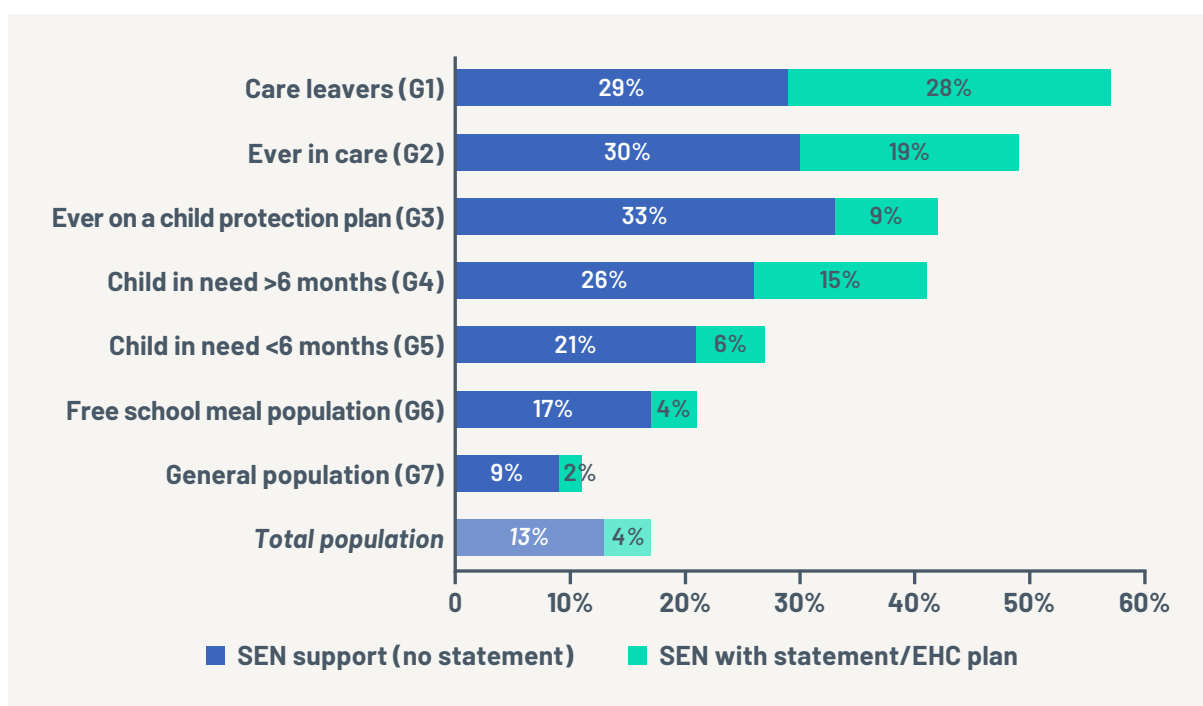


Special educational needs⁸

SEN level of provision: In all five groups of young people with experience of children’s social care, a higher proportion had SEN than either comparison group. This was particularly so amongst care leavers (G1) where over half (57%) had an identified need: 29% were in receipt of SEN support⁹ and 28% were recorded as having a statement or education, health and care (EHC) plan¹⁰ in place. The proportion with a SEN statement or EHC plan was markedly higher than for any other group with experience of children’s social care and

was nearly 50% higher than for those in the ever in care group (G2), the next highest proportion of individuals recorded as having had a SEN statement or EHC plan. Note also that young people who were in need for more than six months (G4) had a far higher incidence of SEN with a statement or EHC plan than those who were CIN for shorter periods (G5): 15% compared with 6%. Figure 1 also shows that care leavers (G1) had rates of SEN statement or EHC plan provision 14 times greater than in the general population (G7): 28% versus 2%.

Figure 1: SEN level of provision by group



Percentages are rounded to the nearest 1.

⁸ Details of SEN were measured at KS4 in the NPD and pre-date the changes made under the current special educational needs and disabilities (SEND) system introduced by the Children and Families Act (Department for Education, 2014).

⁹ Previously captured by the categories School Action and School Action Plus.

¹⁰ A local authority may issue an EHC plan for a pupil who needs more support than is available through SEN support. An EHC plan is intended to consider the child’s specific needs, and any relevant health and social care needs; set long-term outcomes; and detail provision. The most common type of need for those with an EHC plan is autistic spectrum disorder.

SEN primary need: In terms of the type of primary SEN, young people with social, emotional and mental health (SEMH) needs were over-represented in all five groups with experience of children’s social care relative to the FSM and general population comparison groups (Table 3). Amongst care leavers (G1), those ever in care (G2) and ever CPP (G3), the most common type of primary need among those with identified SEN needs was SEMH, accounting for around half of all needs, compared with one in four of those with SEN in the FSM population (G6) and 15% of those with SEN in the general population group (G7).

Young people in need for less than six months (G5) had the highest rate of cognition and learning needs relative to the other groups with experience of children’s social care but a lower rate than the two comparison groups. Those in the CIN more than six months group (G4) had a relatively higher incidence of communication and interaction needs, and slightly higher rates of sensory or physical needs, compared with young people in the other groups with experience of children’s social care.

Table 3: Type of primary need for those with SEN by group

	Care leavers (G1)	Ever in care (G2)	Ever CPP (G3)	CIN >6 months (G4)	CIN <6 months (G5)	FSM pop. (G6)	General pop. (G7)	Total pop.
Communication and interaction	11%	11%	9%	16%	14%	15%	19%	16%
Cognition and learning	34%	33%	31%	34%	40%	46%	49%	44%
SEMH	47%	49%	50%	38%	34%	25%	15%	26%
Sensory/physical	3%	3%	3%	6%	5%	5%	8%	6%
Other	6%	5%	6%	6%	7%	8%	9%	8%
TOTAL	2,380	3,010	2,230	10,800	10,080	16,420	31,780	76,700

Counts are rounded to the nearest 10 and are reported only for those with an identified SEN; percentages are rounded to the nearest 1. SEN primary need is grouped. ‘Other’ includes: ‘No specialist assessment’ and ‘Other’

Prior attainment

Achievement gaps between those with experience of children’s social care and those without are substantial and evident across both KS2 and KS4 attainment (Table 4).

Care leavers (G1) and those ever in care (G2) had the lowest proportions achieving Level 2 qualifications (five A*-C/9-4 grades, or equivalent):¹¹ 13% and 14%, respectively. Young people in the shorter-term CIN group (G5) achieved, on average, the highest grades of those with experience of children’s social care, with 31% achieving five A*-C/9-4 grades (or equivalent). This compares with 63% of young

people in the general population (G7) and 40% of those in the FSM group (G6) achieving this.

These results are echoed in both the KS2 and KS4 overall points scores, with young people in the care leavers (G1) and ever in care (G2) groups scoring the lowest on average of the groups with experience of children’s social care and young people in the CIN less than six months group (G5) scoring the highest. At KS2, young people in the CIN less than six months group (G5) scored slightly higher on average than young people in the FSM group (i.e., 36.9 versus 36.1, respectively), but this small advantage was lost by KS4¹².

¹¹ See Appendices A and B for further detail on what different levels of qualifications mean and how they were measured.

¹² These results are purely descriptive and do not take into account when the young person entered care or was classified as in need. No causal relationship is implied here (see Sebba et al., 2015, for a more detailed exploration of the relationship between the timing of entry into care and school attainment).

Table 4: Prior attainment by group

		Care leavers (G1)	Ever in care (G2)	Ever CPP (G3)	CIN >6 months (G4)	CIN <6 months (G5)	FSM pop. (G6)	General pop. (G7)	Total pop.
Five A*-C / 9-4 (or equiv.)	Yes	13%	14%	16%	20%	31%	40%	63%	54%
	No	87%	87%	84%	80%	69%	60%	37%	46%
Total KS2 points score	Mean	33.2	33.8	34.7	35.3	36.9	36.1	42.5	40.4
Total KS4 points score	Mean	167.5	167.4	197.7	210.7	283.3	324.6	402.3	365.1
TOTAL		4,350	6,590	5,670	26,550	43,930	96,460	372,690	556,240

Counts are rounded to the nearest 10; percentages are rounded to the nearest 1.

Exclusions and absences

On average, around one in eight young people (13%) had at least one fixed period exclusion¹³ recorded at KS4 (Table 5). This figure was 7% for those in the general population (G7) and was slightly higher for the FSM population (G6). However, amongst young people with experience of children's social care, fixed period exclusions were far more frequently observed, with just over one in four (27%) of those in the shorter-term CIN group (G5) having had at least one exclusion and just under half (49%) of those ever in care (G2); seven times the rate for the general population (G7).

Across all groups, persistent absence rates¹⁴ were higher than those for the incidence of any fixed period exclusions, with the exception of care leavers (G1) where absence rates were lower and on a par with those in the FSM comparison group (G6). Rates of persistent absence were highest for young people in the ever CPP group (G3), with nearly two-thirds (63%) recorded as having missed 10% or more possible school sessions.

Table 5: Exclusions and absences by group

		Care leavers (G1)	Ever in care (G2)	Ever CPP (G3)	CIN >6 months (G4)	CIN <6 months (G5)	FSM pop. (G6)	General pop. (G7)	Total pop.
Any fixed period exclusion	Yes	45%	49%	42%	35%	27%	17%	7%	13%
	No	55%	51%	58%	65%	73%	83%	93%	87%
Persistent absentee	Yes	30%	54%	63%	52%	41%	30%	14%	22%
	No	70%	46%	37%	48%	59%	70%	86%	78%
TOTAL		4,350	6,590	5,670	26,550	43,930	96,460	372,690	556,240

Counts are rounded to the nearest 10; percentages are rounded to the nearest 1.

¹³ A fixed period exclusion can involve a part of the school day and it does not have to be for a continuous period. A pupil may be excluded for one or more fixed periods up to a maximum of 45 school days in a single academic year.

¹⁴ A pupil's enrolment is identified as persistently absent if 10% or more of possible sessions are missed: 10% of sessions translates to around seven days of absence across the term.



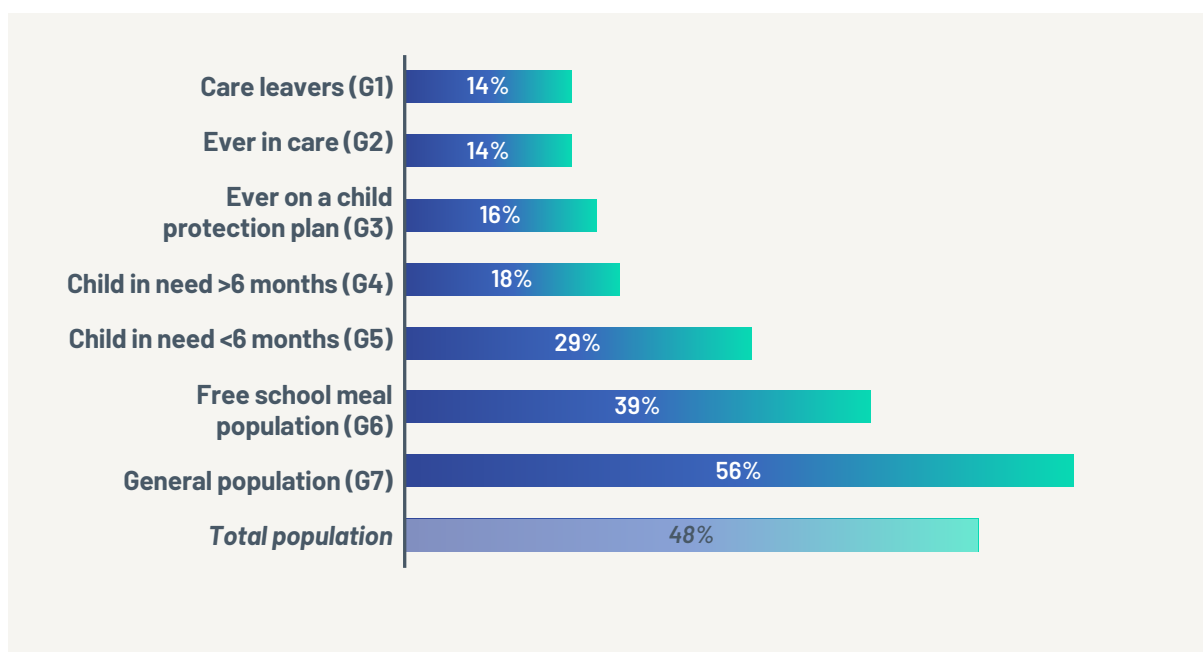
ii. Variation in entry to and through higher education

Entry to higher education

Overall, the results show very low average rates of higher education entry by age 22 for all five groups of young people with experience of social care relative to both the general population and those from the FSM eligible comparison group (Figure 2). Care leavers (G1) and those ever in care (G2) had the lowest rates of entry to higher education by age 22,

with 14% in each group entering by age 22; nearly three times lower than those in the FSM group (G6) and four times lower than those in the general population (G7).¹⁵ Of those with experience of children's social care, those in the shorter-term CIN group (G5) had the highest rates of entry by age 22 (29%).

Figure 2: Initial entry to higher education by age 22 by group



Percentages are rounded to the nearest 1. Further breakdowns of these entry rates for different sub-groups within these populations are available in Appendix F.

¹⁵ The rates for the FSM group (G6) and general population (G7) presented here differ slightly from other reported figures due to the group definitions applied and the nature of their mutual exclusivity. That is, the FSM group (G6) excludes all those young people eligible for FSM who are in any of the groups with experience of children's social care (Groups 1-5). Similarly, the general population group (G7) excludes all those with experience of children's social care and those eligible for FSM. Other figures, including those from the Department for Education, for example, only report a simple binary split of those eligible for FSM compared with all other pupils. Note too that these are entry rates to higher education by age 22, not 19 as is commonly reported in official statistics.

In general, young people with experience of children's social care were less likely to enter higher education at the earliest possible point, namely age 18/19, compared with other young people. Table 6 shows that the rate of age 18/19 entry amongst those who entered higher education by age 22 was highest amongst those in the general population (G7: 68%) and FSM population (G6: 59%), with around half of all those who enter higher education by age 22 in the groups with experience of children's social care having done so at age 18/19, immediately on completion of A-levels or other Level 3 equivalent qualifications.

As with the outcome of overall higher education entry by age 22, the entry rate by age 18/19 for those in the shorter-term CIN group (G5) was the highest amongst our core interest groups, but it is worthy of note that care leavers (G1), who have the lowest rates of entry to higher education overall, have the second highest entry at age 18/19 amongst young people with experience of children's social care, at 51%. Moreover, this rate was three percentage points higher than

for the ever in care group (G2), which had the same overall entry rate to higher education by age 22.

Type of higher education institution and qualification initially pursued

Differences across groups in the initial higher education institution attended (by age 22) was greater for entry to top-tier universities, i.e., Oxbridge, Russell Group and old universities, than for entry to lower-tier institutions (Table 7).¹⁶ Considering only those who entered higher education by age 22, care leavers (G1) had the lowest rate of entry to top-tier universities (13%), followed again by those in the ever in care group (G2: 16%), compared with 20% of those in the FSM group (G6) and over a third of the general population (G7: 35%). Amongst the in need populations, rates of entry to top-tier universities similarly rose with decreasing experience of social care interventions, with young people in the shorter-term CIN group (G5) the same as the FSM population group (G6) in terms of the type of higher education institution initially attended.

Table 6: Age 18/19 entry to higher education by group

Age of entry to higher education	Care leavers (G1)	Ever in care (G2)	Ever CPP (G3)	CIN >6 months (G4)	CIN <6 months (G5)	FSM pop. (G6)	General pop. (G7)	Total pop.
Age 18/19	51%	48%	49%	50%	55%	59%	68%	65%
Age 19/20 – 21/22	49%	52%	51%	50%	45%	42%	33%	35%
TOTAL	600	920	890	4,800	12,770	37,630	207,400	265,010

Counts are rounded to the nearest 10; percentages are rounded to the nearest 1.

Table 7: Boliver status of higher education institution initially attended by group

Boliver status groups:	Care leavers (G1)	Ever in care (G2)	Ever CPP (G3)	CIN >6 months (G4)	CIN <6 months (G5)	FSM pop. (G6)	General pop. (G7)	Total pop.
Top-tier	13%	16%	17%	18%	20%	20%	35%	32%
Lower-tier	87%	84%	83%	82%	80%	80%	65%	68%
TOTAL	600	920	890	4,800	12,770	37,630	207,400	265,010

Counts are rounded to the nearest 10; percentages are rounded to the nearest 1.

¹⁶ This study used Boliver clusters (Boliver, 2015) to categorise the type of institution attended. Boliver used HESA data on research activity, teaching quality, economic resources, academic selectivity and socioeconomic student mix across 126 UK universities to classify four distinct groups: (1) Oxford and Cambridge; (2) Russell Group and the majority of other pre-1992 universities; (3) new (post-1992) and remaining old (pre-1992) universities; and (4) around a quarter of new universities forming a distinctive lower tier. Our analysis also includes two further categories: those not grouped within the Boliver clusters (e.g., some private institutions and the Open University) and further education colleges which were excluded from Boliver's study. See Section II of Appendix B for further detail on the coding of the type of institution initially attended. In Table 7, 'Top-tier' institutions are Boliver clusters 1 and 2; 'Lower tier' institutions are Boliver clusters 3 and 4, and our own two additional groups. Full breakdowns of these groupings are given in Appendix C.

A similar pattern emerged with respect to the type of programme initially pursued (Table 8), whereby care leavers (G1) were least likely to start out on a degree path (85%), those in the shorter-term CIN group (G5) were the most likely of those with experience of children’s social care to begin degrees (87%), and those in the two comparison groups were more likely again; 90% for both. However, as with age 18/19 entry, there was less overall variation between the different groups with experience of social care for this outcome.

Higher education continuity and degree attainment

After entry, the majority of young people – 72% on average – across all seven groups experienced a fairly high degree of continuity through higher education; that is, they evidenced no pause in their studies, no changes in the university attended, and no changes to the primary subject studied (Table 9).

Rates were again lowest for care leavers (G1) and those ever in care (G2), but two-thirds of both groups experienced continuity through higher education. The shorter-term CIN (G5) and ever CPP (G3) groups had average continuity rates comparable with the FSM population group (G6).

Table 8: Type of higher education programme initially pursued by group

Programme initially pursued:	Care leavers (G1)	Ever in care (G2)	Ever CPP (G3)	CIN >6 months (G4)	CIN <6 months (G5)	FSM pop. (G6)	General pop. (G7)	Total pop.
Degree	85%	87%	86%	85%	87%	90%	90%	90%
Sub-degree	15%	13%	14%	14%	13%	10%	10%	10%
TOTAL	600	920	890	4,800	12,770	37,630	207,400	265,010

Counts are rounded to the nearest 10; percentages are rounded to the nearest 1.

Table 9: Continuity through higher education by group

Programme continuity:	Care leavers (G1)	Ever in care (G2)	Ever CPP (G3)	CIN >6 months (G4)	CIN <6 months (G5)	FSM pop. (G6)	General pop. (G7)	Total pop.
Yes	66%	66%	70%	69%	70%	70%	73%	72%
No	34%	34%	30%	31%	30%	30%	27%	28%
TOTAL	540	850	810	4330	11,670	35,020	194,010	247,230

Counts are rounded to the nearest 10; percentages are rounded to the nearest 1.

There was greater variation in the rates of higher education completion and withdrawal (Table 10). On average, well over half (60%) of those who entered higher education completed their degree by age 22. This proportion rose to nearly two-thirds amongst those in the general population (G7: 63%) but nearly halved for care leavers (G1: 33%) and those ever in care (G2: 32%). Again, those in the CIN less than six months group (G5) were most similar to the FSM comparison group (G6), with just under half of those who entered higher education completing a degree-level qualification by age 22; 46% and 49% respectively.

Across all groups with experience of children's social care, the proportion continuing their studies was higher than for either comparison group and was highest amongst those ever in care (G2: 43%). Care leavers (G1) had the highest level of withdrawal¹⁷ from higher education of any group, with rates around two and a half times larger than the proportions observed for the general population (G7): 18% of care leavers withdrew from higher education in the period, compared with 12% of both the short-term CIN (G5) and FSM (G6) groups, and just 7% of those in the general population. Across all groups, low proportions of young people left with unplanned qualifications.

Table 10: Higher education qualification achieved (by age 22) by group

Programme continuity:	Care leavers (G1)	Ever in care (G2)	Ever CPP (G3)	CIN >6 months (G4)	CIN <6 months (G5)	FSM pop. (G6)	General pop. (G7)	Total pop.
Completed: Degree	33%	32%	38%	39%	46%	49%	63%	60%
Completed: Sub-degree	7%	9%	9%	8%	8%	7%	6%	6%
Continuing studies	41%	43%	39%	38%	33%	31%	23%	25%
Withdrew: No qualification	18%	15%	12%	14%	12%	12%	7%	8%
Withdrew: Unplanned qualification¹⁸	2%	1%	2%	2%	2%	2%	1%	1%
TOTAL	600	920	890	4,800	12,770	37,630	207,400	265,010

Counts are rounded to the nearest 10; percentages are rounded to the nearest 1.

¹⁷ The reasons for withdrawal from higher education study were beyond the scope of the current analyses. HESA lists 10 different reasons for ending the current instance of study, including 'academic failure', 'health reasons', 'financial reasons' and 'gone into employment' which are fully detailed in Section II of Appendix B.

¹⁸ 'Unplanned qualifications' are those where an individual received a lower qualification than their initially planned learning aim.



iii. Regression analysis and intersectional analysis of variation in entry to higher education

Building on the descriptive overview of the different groups and the variation in entry to and through higher education, this section presents a summary of the regression analyses conducted to explore in more detail the relations between some of the other factors associated with both entry to higher education and experience of children's social care (see Appendix D for additional regression analyses). We then present intersectional analysis of some of the variation in entry to higher education by age 22 to help further unpack interesting multivariate associations between our explanatory variables, group membership and outcome variables (see Appendix F for additional intersectional analyses).

Simplified regression analysis

Our logistic regression model represents a reduced version of the one used by Harrison et al. (2023) in their paper exploring post-16 outcomes using different categories of young people with experience of children's social care.¹⁹ Four sequential models from this simplified analysis are presented in Table 11. Together, they show the extent to which the baseline associations between group membership and entry to higher education were affected by each set of additional explanatory variables. The four models presented are:

- **Model 1:** Unadjusted/raw association between group and likelihood of entering higher education by age 22.

- **Model 2:** Model 1 + sex, ethnicity, SEN status, IDACI, FSM eligibility, and exclusion and absenteeism information.
- **Model 3:** Model 2 + KS4 attainment.
- **Model 4:** Model 3 + type of post-16 study.

Model 1 reports the coefficients of a logistic regression showing the association between group membership and the likelihood of entering higher education compared with those in the comparison group of young people from the FSM population (G6). As above, each group of young people with experience of children's social care was substantively and significantly less likely to enter higher education than those in the FSM comparison population, while those in the general population (G7) were more likely to do so.

With the addition of each set of explanatory control variables, the strength of these statistical associations was reduced, but even in our most comprehensive model, this overarching result remained. That is, holding constant sex and ethnicity, SEN status, socioeconomic circumstances, school type, exclusions and absences, and prior attainment, young people with experience of children's social care were still less likely to enter higher education by age 22 than those in the FSM population.

¹⁹ To minimise the adverse effects of multicollinearity, which limits the ability to meaningfully interpret the strength of any given association, we present a simplified version of their model. We note, however, that in their full model, with all the NPD measures included, Harrison et al. (2023) found no significant difference in the rate of entry to higher education by age 22 between both care leavers and late care-experienced young people and those in the general population reference group. In contrast, significant differences in higher education entry remained between those in the 'formerly in need' group and the general population. We were able to replicate this pattern of findings in our own analyses and will investigate the heterogeneity between the in care and in need populations in these data in future work. The full set of regressions are provided in Appendix D.

Table 11: Logistic regression of higher education entry by age 22 – coefficients from reduced, step model

	Model 1	Model 2	Model 3	Model 4
Groups (Ref: FSM population [G6])				
- Care leavers (G1)	-1.319***	-.753***	-.496***	-.450***
- Ever in care (G2)	-1.329***	-.770***	-.576***	-.560***
- CPP (G3)	-1.212***	-.647***	-.489***	-.438***
- CIN >6 months (G4)	-1.053***	-.536***	-.413***	-.387***
- CIN <6 months (G5)	-.443***	-.372***	-.267***	-.231***
- General population (G7)	.635***	.196***	.108***	.058**
Explanatory variables:				
Sex (Female)		.461***	.383***	.363***
Ethnicity (Ref: White)				
- Asian		1.501***	1.546***	1.387***
- Black		1.682***	1.750***	1.586***
- Mixed		.727***	.671***	.567***
- Other		1.097***	1.086***	.924***
SEN status (Ref: No SEN)				
- SEN without statement or EHC plan		-.822***	-.267***	-.163***
- SEN with statement or EHC plan		-1.153***	-.450***	-.399***
IDACI score		-1.324***	-.742***	-.543***
FSM eligibility (Yes)		-.268***	-.150***	-.132***
School type (Mainstream)		1.508***	1.145***	1.457***
Fixed exclusion (Yes)		-1.000***	-.698***	-.563***
Ever a persistent absentee (Yes)		-.816***	-.525***	-.393***
5 A*-C inc. English and maths (Yes)			1.923***	1.348***
Post-16 study (Ref: School only)				
- None				-2.868***
- Further education college only				-2.030***
- Mix school and further education college				-.998***
Constant	-.447***	-1.418***	-2.429***	-1.376***
Nagelkerke's R²	.080	.256	.398	.475
N				532,530

Ref = reference group; Significance levels: *** $p < .001$, ** $p < .01$, * $p < .05$.

This pattern of results was also observed for those with and without an identified SEN when considered separately (Table 12), whereby in the model with all the explanatory variables included (Model 4), young people in each of the groups with experience of

children's social care were less likely than those in the FSM reference group (G6) to have entered higher education by age 22 regardless of whether or not they had an identified SEN at school.

Table 12: Logistic regression of higher education entry by age 22, separately for young people with and without SEN – coefficients from reduced, step model (Model 4 only)

	SEN: Model 4	No SEN: Model 4
Groups (Ref: FSM population [G6])		
- Care leavers (G1)	-.660***	-.308***
- Ever in care (G2)	-.656***	-.523***
- CPP (G3)	-.711***	-.335***
- CIN >6 months (G4)	-.467***	-.361***
- CIN <6 months (G5)	-.323***	-.202***
- General population (G7)	-.050	.100**
Explanatory variables:		
Sex (Female)	.325***	.372***
Ethnicity (Ref: White)		
- Asian	1.142***	1.429***
- Black	1.603***	1.576***
- Mixed	.581***	.561***
- Other	.963***	.909***
IDACI score	-.432***	-.559***
FSM eligibility (Yes)	-.223***	-.094***
School type (Mainstream)	1.642***	.763***
Fixed exclusion (Yes)	-.615***	-.554***
Ever a persistent absentee (Yes)	-.324***	-.407***
5 A*-C inc. English and maths (Yes)	1.684***	1.306***
Post-16 study (Ref: School only)		
- None	-2.916***	-2.845***
- Further education college only	-1.749***	-2.072***
- Mix school and further education college	-.891***	-1.009***
Constant	-1.897***	-.685***
Nagelkerke's R²	.432	.434
N	90,570	441,970

Ref = reference group; Significance levels: *** $p < .001$, ** $p < .01$, * $p < .05$.

These results suggest that the combined impacts of trauma, disruption and, possibly for some, other difficulties leading to and/or resulting from experience of children's social care, could have an enduring impact on the likelihood of entering higher education by age 22.

Moreover, these analyses indicate that despite a higher average incidence of SEN amongst young people with experience of children's social care, lower rates of entry are not explained by SEN status alone. The next section explores some of these potential intersectionalities in more detail.

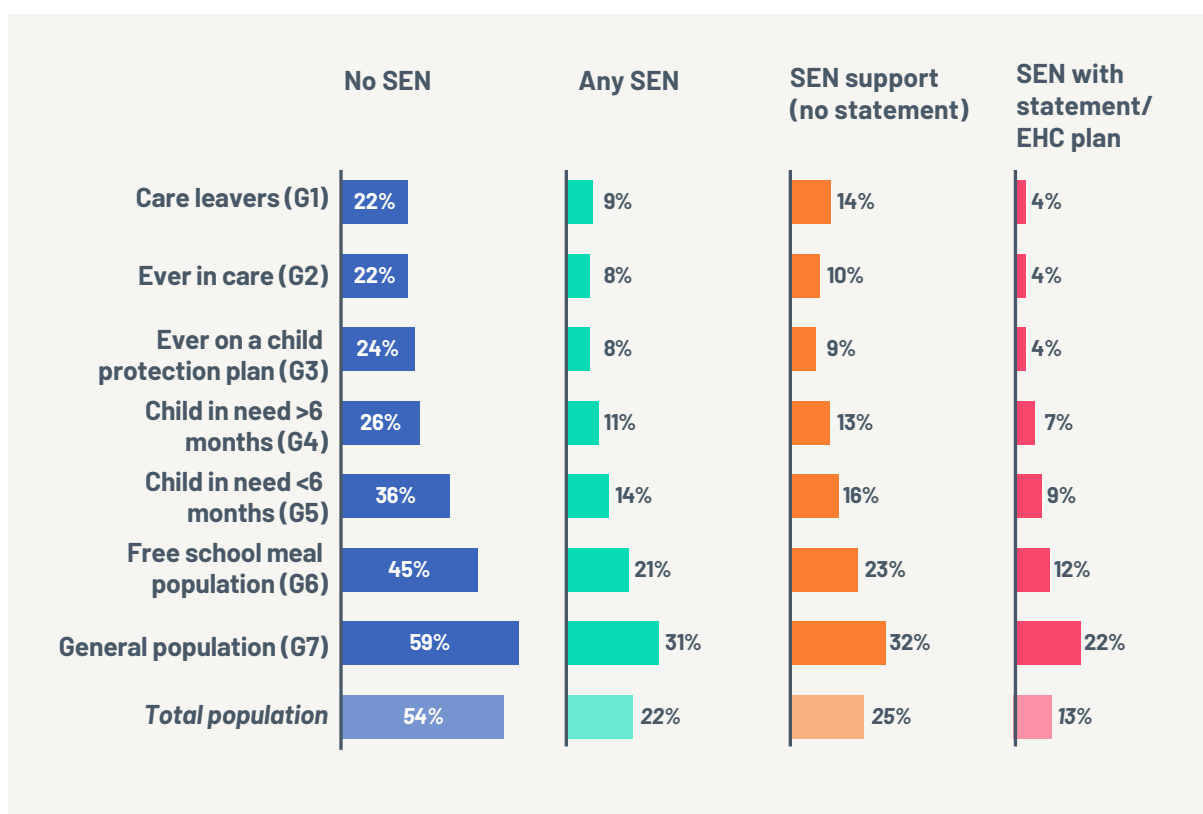
Variation in entry to higher education by SEN, sex and KS4 attainment

Figure 3 shows how entry rates to higher education by age 22 varied by group separately for young people with and without an identified SEN.

For those with an identified SEN, rates are also shown for those who received SEN support provision only (i.e., those without a statement) and those who had statements or EHC plans.

Across all groups, the rate of entry to higher education is lower for those with SEN than without, and within those with SEN, lower proportions of young people with statements or EHC plans entered higher education than those who received SEN support provision only. The rates for those with statements or EHC plans were lowest for care leavers (G1), and those ever in care (G2) or ever subject to a CPP (G3); 4% for each group. These proportions were higher for those from both CIN groups (G4 and G5), possibly reflecting variation in the type of primary SEN need, but rates of higher education entry were less than half of those reported for the general population (G7).

Figure 3: Higher education entry rates for different SEN statuses (combined 'Any identified SEN' and separated by level of provision) for each group

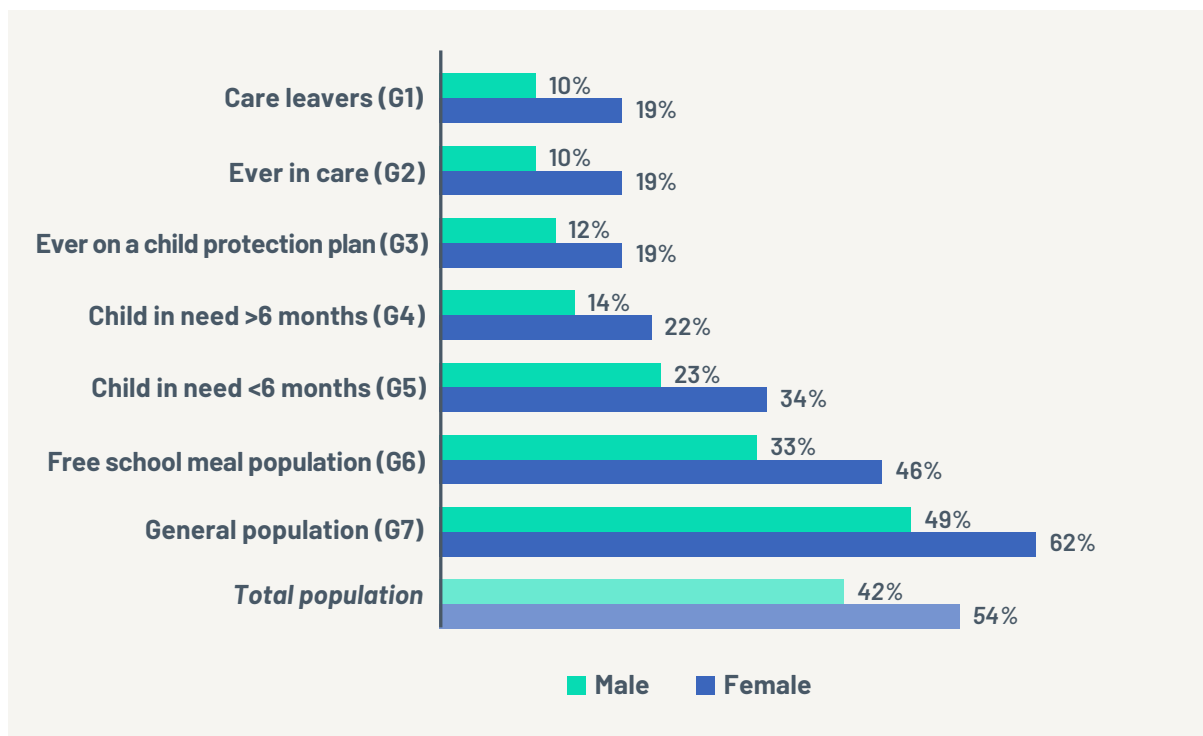


Percentages are rounded to the nearest 1. Figure is based on raw data. Further breakdowns are available in Appendix F.

Figure 4 shows how the rates of entry to higher education by age 22 varied by sex and highlights

that across all groups, higher proportions of females entered higher education than males.

Figure 4: Higher education entry rates for males and females for each group

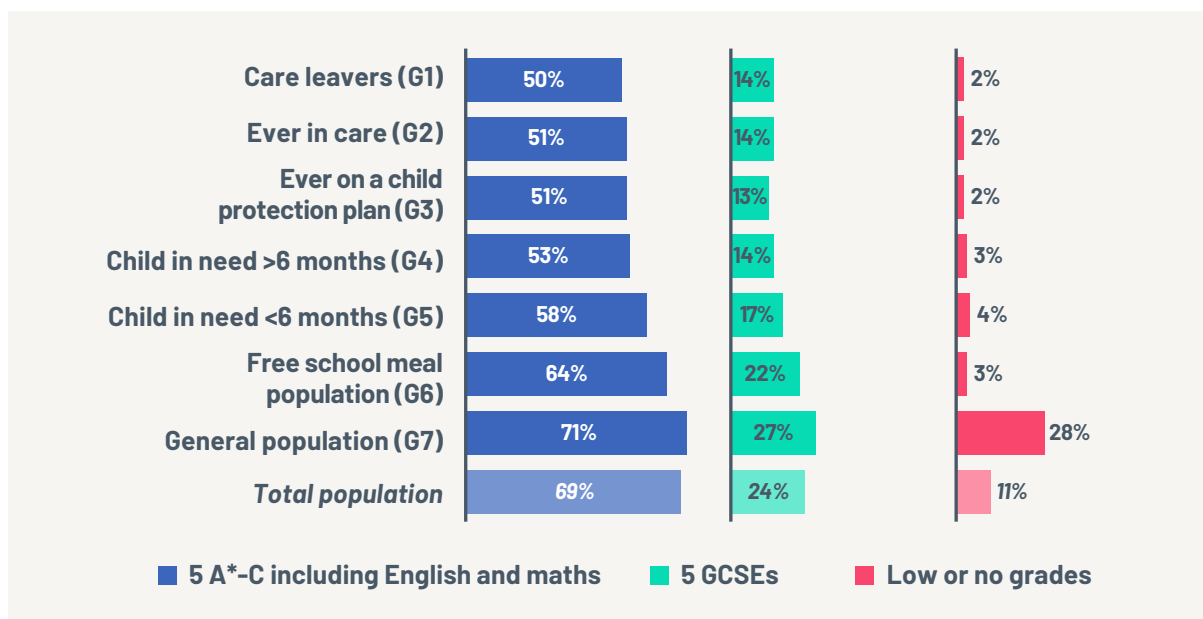


Percentages are rounded to the nearest 1. Figure is based on raw data. Further breakdowns are available in Appendix F.

Figure 5 shows how the rates of entry to higher education by age 22 varied by high, medium and low levels of GCSE attainment. Across all groups, greater proportions of young people with higher GCSE attainment entered higher education than those with either moderate or low KS4 achievement. With the exception of the general population (G7),

young people with 'low or no grades' were very unlikely to enter higher education: of those with 'low or no grades', over a quarter (28%) of individuals in the general population (G7) entered higher education, compared with 4% or less of those with 'low or no grades' across the other groups.

Figure 5: Higher education entry rates for different levels of KS4 achievement for each group



Percentages are rounded to the nearest 1. Figure is based on raw data. Further breakdowns are available in Appendix F.



iv. Progression to higher education: Variation in post-16 educational pathways

This next set of results summarises our educational pathway analyses based on the sequencing of young people's academic registrations and qualifications gained from the end of KS4 through to the end of higher education. The detailed descriptions of these post-16 pathways are shown in the appendices (Appendix B) but are simplified to capture five mutually exclusive pathways:

- **Traditional academic:** Young people who attained five or more A*-C or 9-4 grades for GCSEs (or equivalents), including English and maths, followed by two or more A-levels, and immediate entry to higher education.
- **Alternative academic:** Pathways characterised by entry to higher education with academic qualifications, but not those captured by the 'traditional' pathway. For example, pathways including 'moderate' KS4 attainment (five or more A*-C or 9-4 grades for GCSEs or equivalents that did not include English and maths by the end of KS4), 'low' KS4 attainment (one or more A*-G grades or 9-1 grades) or fewer than two A-levels.
- **Vocational:** Pathways where young people entered higher education through vocational qualifications, such as an NVQ Level 3 qualification at the end of further education.
- **Apprenticeship:** Pathways where young people entered higher education after successful completion of an apprenticeship. For example, individuals who registered for an apprenticeship at the start of further education, attained an advanced (i.e., Level 3) apprenticeship qualification at the end of further education and then entered higher education.
- **Other:** Other pathways are those that did not fit the previously described academic, vocational and apprenticeship pathways variables and involved a mix of academic, vocational and apprenticeship registrations and qualifications across waves.

Figure 6 shows the proportions who followed each pathway to higher education for each of our seven groups. In line with existing evidence, care leavers (G1) and those ever in care (G2) were the least likely to follow the traditional academic pathway to higher education, while those in the general population (G7) were most likely to follow this track (58%).

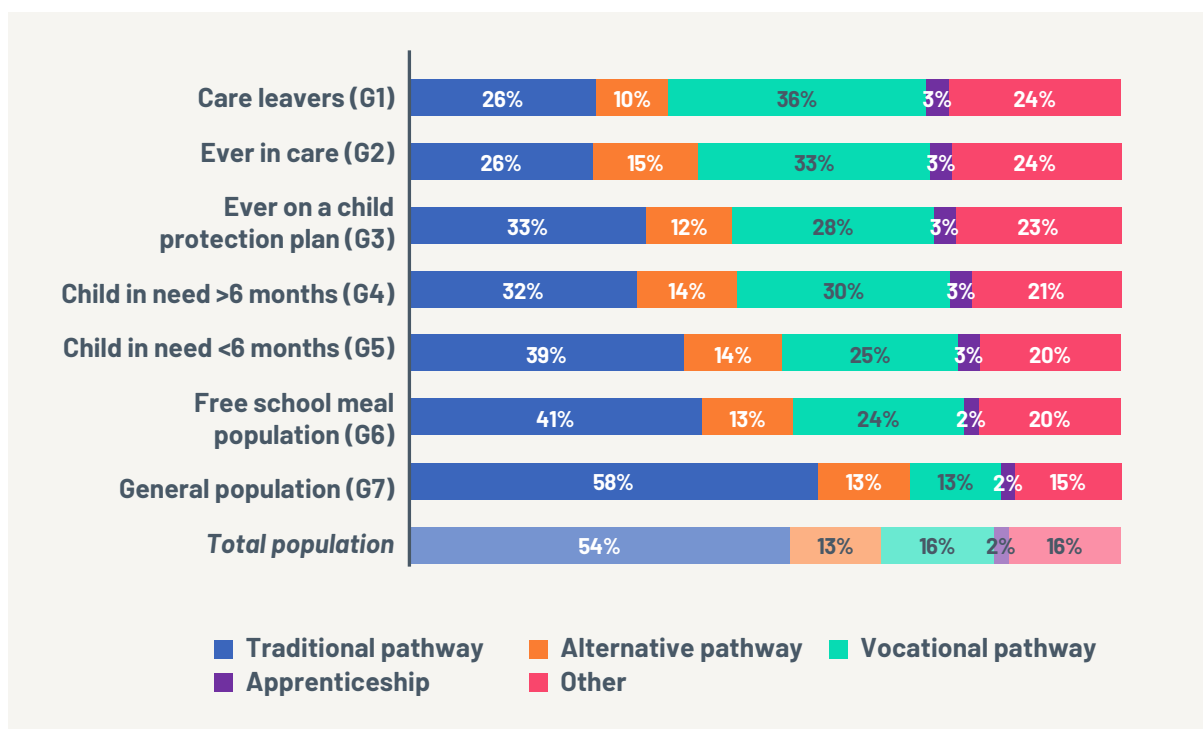
The trend observed for the different higher education outcomes described above is also evident here, with those in the ever CPP (G3) and longer-term CIN (G4) groups more likely to follow the traditional pathway than the G1 and G2 care-experienced groups, and the shorter-term CIN group (G5) most like the FSM population (G6). There was less variation across groups in the proportions taking an alternative academic track, with between 10% and 15% of each group having done so.

These results show relatively high proportions of young people with experience of social care, particularly care leavers (G1), taking a vocational pathway to higher education. Of those who entered higher education by the age of 22, over a third (36%) of care leavers (G1) got there via vocational post-16 routes; nearly three times as many as from the general population group (G7: 13%) and 50% higher than the other comparison group, those eligible for FSM (G6: 24%). Indeed, all five groups of young people with experience of children's social care were more likely to follow vocational pathways to higher education than the comparison populations, and it represents the most common route to higher education for young people in both the care leavers (G1) and the ever in care (G2) groups.

'Other' pathways to higher education, those that involved a mixture of academic, vocational and apprenticeship pathways, were followed, on average, by 16% of all young people and were, again, more common for young people with experience of children's social care as well as those eligible for FSM (G6) than for the general population.

Across all seven groups, very few young people followed an apprenticeship pathway to higher education.

Figure 6: Simplified educational pathways to higher education entry by group



Percentages are rounded to the nearest 1.

Similar patterns were also evident amongst those entering top-tier universities – Oxbridge, Russell Group and ‘old’ universities (see also Table 7) – with the majority doing so via a traditional

or alternative academic pathway and a small proportion gaining access via a vocational route, particularly so amongst care leavers (G1: 18%) and those ever subject to a CPP (G3: 14%).

Table 13: Simplified educational pathways to a top-tier higher education institution by group

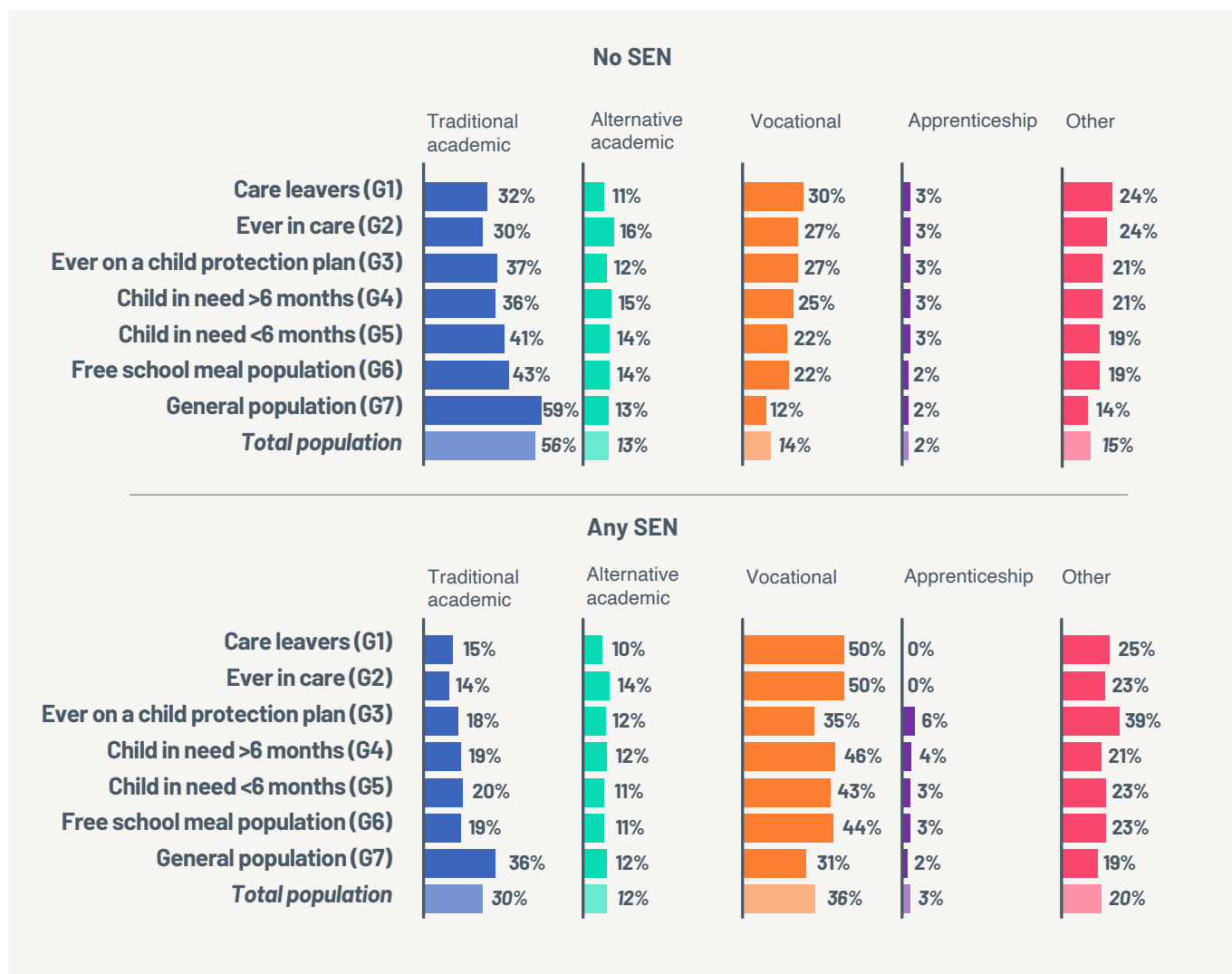
Entry to top-tier institution:	Care leavers (G1)	Ever in care (G2)	Ever CPP (G3)	CIN >6 months (G4)	CIN <6 months (G5)	FSM pop. (G6)	General pop. (G7)	Total pop.
Traditional	61%	56%	59%	62%	67%	70%	77%	76%
Alternative	c	15%	14%	13%	12%	9%	11%	11%
Vocational (inc. apprenticeship)	18%	7%	14%	9%	8%	7%	3%	4%
Other	s	22%	14%	16%	14%	14%	9%	10%
TOTAL	70	140	150	870	2,550	7,630	72,460	83,890

Columns sum to 100%, subject to rounding errors. Counts are rounded to the nearest 10; percentages are rounded to the nearest 1. “c”: suppressed if counts are less than five; “s” secondary suppression to avoid calculation of suppressed values from totals.

Figure 7 shows the proportions following each pathway to higher education for young people in each group with and without identified SEN status. In each group the vocational pathway was substantially more likely

to be the pathway to higher education for those with SEN, and the traditional academic route less likely. This further suggests that vocational pathways may particularly benefit those with additional needs.

Figure 7: Pathways to higher education entry by group and SEN status



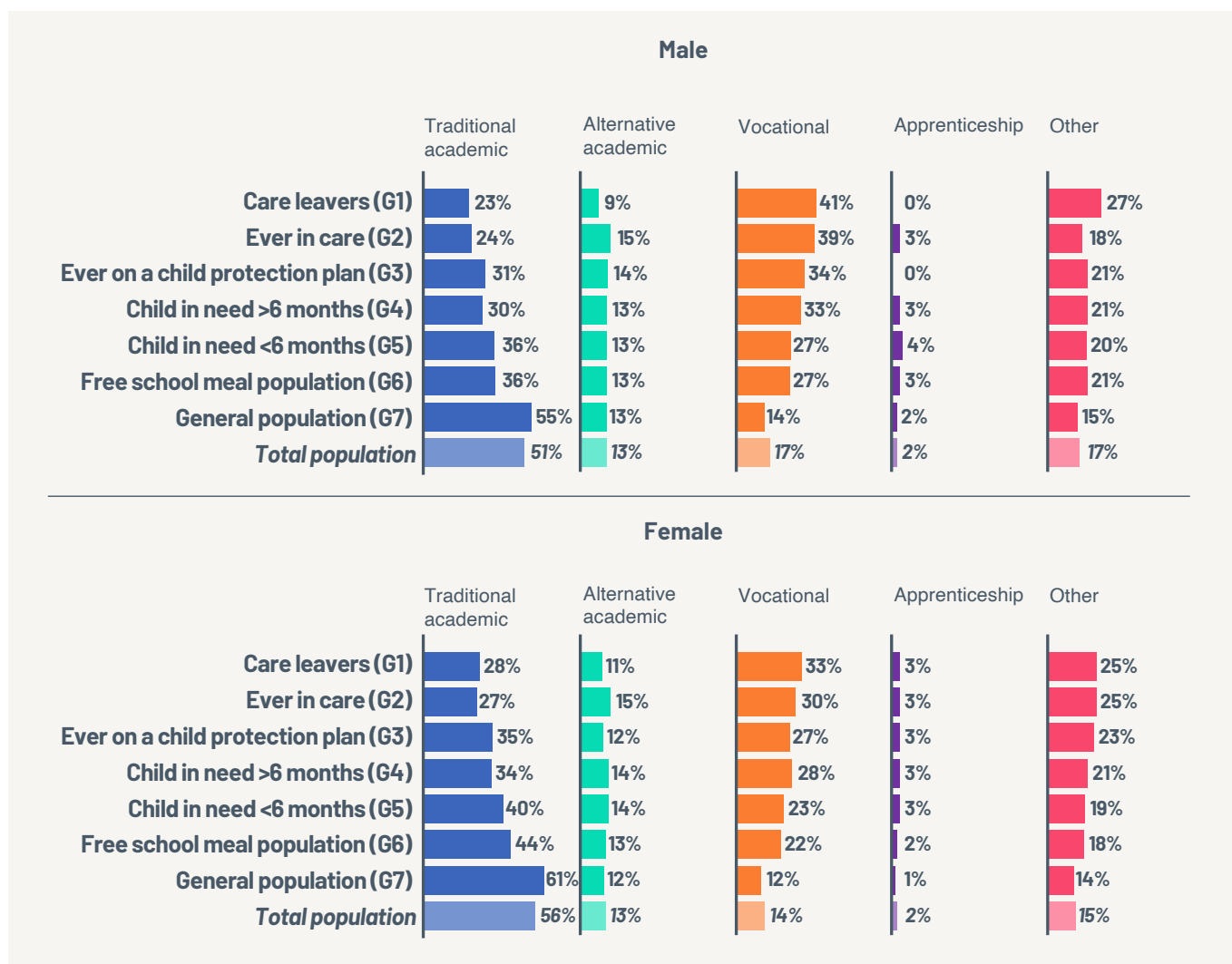
Percentages are rounded to the nearest 1. 'Any SEN' = young person has been identified as having SEN, whether with a statement (statement/EHC plan) or without (SEN support only).

Vocational pathways also appear to be routes more commonly taken by males (Figure 8), particularly care leavers (G1), those ever in care (G2) and ever subject to a CPP (G3), where entry rates amongst males were also lowest (10%, 11% and 13%, respectively – see Figure 4).

By contrast, across all groups, females were more likely to enter higher education via the traditional academic

route. However, for both males and females, vocational pathways appear to have offered a route to higher education entry that was taken by a high proportion of young people with experience of being in care, and was more common amongst all five groups with experience of children's social care and those eligible for FSM than for the general population (G7) comparison group.

Figure 8: Pathways to higher education entry by group and sex



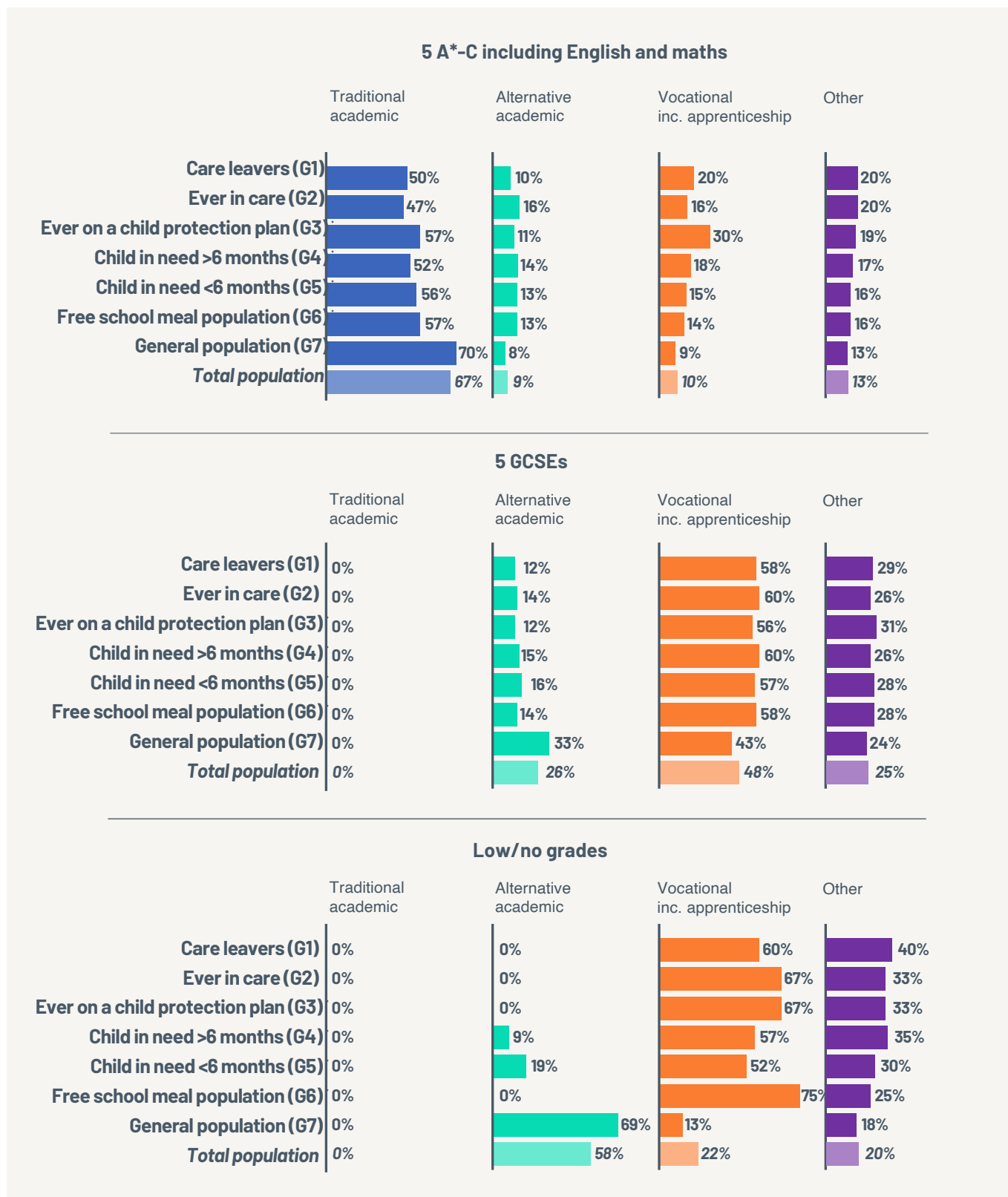
Percentages are rounded to the nearest 1.

The pathways to higher education entry by KS4 achievement are given in Figure 9 and show that, of those with high attainment, young people with experience of care were less likely than the general population to take the traditional route but that this was still the most common pathway to higher education. For example, 50% of care leavers with 5 A*-C grade GCSEs including English and maths who entered higher education did so via the traditional route, compared with 57% of the FSM group and 70% in the general population. Those with five GCSEs, mid-range KS4 results, cannot take the traditional academic route by virtue of the definition imposed. Here, the alternative academic pathway was more common amongst the general

population than amongst the groups with experience of children's social care or FSM eligible. A very high proportion (69%) of young people in the general population group (G7) with 'low or no grades' entered higher education via alternative pathways. These young people may have taken re-sits of GCSEs and/or A-levels and so entered higher education with academic qualifications, just not via a traditional route.

In general, the vocational pathway provided a substantial route to higher education entry for all of these groups, particularly those with lower initial academic attainment and those with experience of children's social care.

Figure 9: Pathways to higher education entry by KS4 achievement and group



Percentages are rounded to the nearest 1.

4. Discussion

The findings summarised in the previous section have shown, first and foremost, that young people with experience of children's social care in the cohort of those born between 1 September 1998 and 31 August 1999 were substantially less likely, on average, to enter higher education by the age of 22 than those eligible for FSM; or to enter at age 18/19, to enter a top-tier higher education institution, or to complete their studies within the period to age 22. They were also slightly less likely than those eligible for FSM to be registered for a degree, rather than a sub-degree, and to experience continuity of study.

There were important differences within this general pattern: the higher education entry rates were in parallel to those of achievement at school, with care leavers and those ever in care having, on average, the lowest rates of entry, and those in the shorter-term CIN group the highest. This pattern also held across the other outcomes considered, including university ranking and the type of qualification initially pursued.

There was less variation between the groups with experience of children's social care in terms of entry to higher education at age 18/19, with around half of young people in these groups doing so at the earliest possible age, compared with over two-thirds of those in the general population. Interestingly, care leavers had the second highest entry rate at age 18/19 of all groups with experience of children's social care, possibly reflecting a higher level of support available for this group in the transition from post-16 settings to higher education. Across most outcomes considered, the shorter-term CIN group and FSM comparison population were the most similar.

This pattern also occurred in relation to withdrawal from higher education, with rates ranging from 18% for care leavers to 12% for the shorter-term CIN group, 12% for the FSM group and 7% for the general population.

These findings are consistent with other studies that have examined the same issues. Harrison et al. (2023) reported that 13.3% of care leavers studied at Level 4 or above.²⁰ The equivalent figure here is 14%, although in a different cohort and a slightly later age cut-off of 22 rather than 20. Harrison reported that the rate of higher education entry was 8.8% of young people classified as late care-experienced²¹ and 13.9% of other care-experienced,²² not a breakdown we have replicated. Harrison also reports a higher education entry rate of 18.1% of those formerly in need²³ and 46.2% of the general population. This study finds an equivalent 18% for children in need for more than six months after age 11, and 29% for children in need for less than six months. This study additionally reports a figure of 16% for those ever on a child protection plan and rates of 39% for those eligible for FSM. The rate of 48% for the remaining general population in this cohort is consistent.

There are various potential reasons for these findings, with past experiences and future expectations being prominent amongst them. A history of SEN, living in a low-income household, low attainment at GCSE and disengagement from schooling through, for example, absences or exclusions, are all known to reduce a young person's likelihood of progressing to higher education and attaining other outcomes should they reach there. These are all factors that are positively associated with young people with experience of children's social care, and so are risk factors that reduce their likelihood of acquiring higher levels of education. Early identification of issues around needs, engagement or attainment is therefore important, and support should be provided to specifically help with those issues, given that young people with experience of children's social care may have lower levels of family support to help with such issues.

²⁰ A Level 4 qualification is a certificate of higher education that is equivalent to the first year of a bachelor's degree and taken after completing A-levels or similar Level 3 courses. See: [What qualification levels mean: England, Wales and Northern Ireland – GOV.UK](#)

²¹ Late care-experienced comprised young people who were in care for significant periods after their 14th birthday but did not appear in the care leaver group.

²² Other care-experienced young people comprised those previously in care but not meeting the definitions of either care leaver or late care-experienced, including those in care prior to their 14th birthday but not after and those in care for less than 13 weeks after their 14th birthday.

²³ Young people formerly in need were designated as being in care from 2009/10 (when comprehensive records began) but were not in care at any point after the age of eight.

The results also show, however, that even after accounting for many of the characteristics associated with young people who have experienced care, they were still significantly less likely to have progressed to higher education by the age of 22. For example, if two young people have the same SEN, the same FSM eligibility, the same level of school engagement and even the same level of GCSE attainment, the one without the experience of children's social care will, on average, be more likely to progress to higher education. There could be many reasons for this difference between two otherwise similar young people, including lower aspirations, a lack of suitable information, lower encouragement or an absence of role models for the one with care experience. This, in turn, suggests the sort of additional guidance, advice and support that a child in need would benefit from, in addition to specific educational support.

Patterns of higher education entry across SEN status, sex and GCSE attainment levels are very similar for each care group and comparison group, so there do not seem to be intersectionalities by which combinations of care status and some characteristics lead to particularly bad (or good) outcomes. Rates of higher education entry are lower, on average, for children with SEN, particularly those with an EHC plan, and this holds within each care group as well as in the general population, but it is also the case that lower entry is not explained by SEN status alone. For care leavers, for example, the rate of entry to higher education is 22% for those without SEN and 9% for those with an identified SEN. The equivalent figures for those eligible for FSM are 45% (without SEN) and 21% (with SEN).

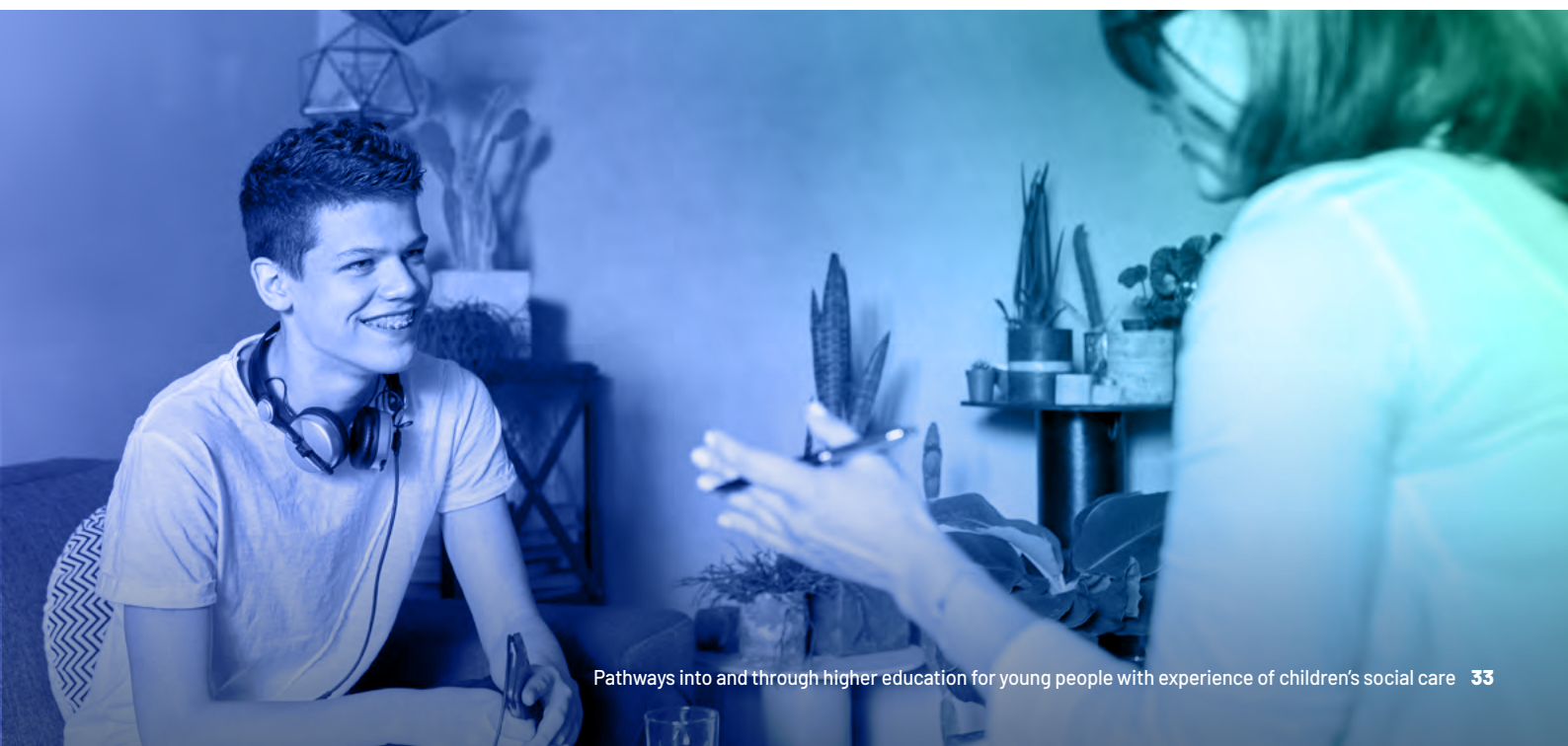
An important exception is that getting low or no GCSEs seems to have much more of an impact on higher education entry chances for the care groups and those eligible for FSM relative to the general population.

For those who did go into higher education by age 22, vocational pathways were more common amongst all five groups with experience of children's social care than for the general population or FSM comparison groups. Intersectionalities for the pathways to higher education show a consistent pattern of results that the vocational pathway is a more common entry route to higher education for those with lower KS4 achievement, with SEN, and for males, for every care group and comparison group.

Our results provide *prima facie* evidence that vocational pathways offer good early progression to higher education for many care leavers, in particular, but also more broadly for others with experience of children's social care.

This finding is consistent with the higher proportions of young people with experience of social care observed attending further education colleges and may also reflect higher proportions attending newer universities, which may be more likely to accept those who follow vocational routes. We have found in preliminary analysis (Appendix E, Table E3) that vocational pathways to higher education were most viable where they included attaining a Level 3 NVQ by the end of further education.

One piece of guidance that could be provided, that is suggested by the results above, is that the young people in question could be encouraged to consider a Level 3 vocational post-16 route as an option into higher education, if they do not have the attainment, interest or aptitude in academic study, as such vocational routes have been shown to lead to a successful higher education outcome for many young people in our dataset, including and especially for those with experience of care.





References

Boliver, V. (2015). Are there distinctive clusters of higher and lower status universities in the UK? *Oxford Review of Education*, 41(5), 608–627.

<https://doi.org/10.1080/03054985.2015.1082905>

Courtney, M. E., Charles, P., Okpych, N. J., Napolitano, L., and Halsted, K. (2014). *Findings from the California Youth Transitions to Adulthood Study (CaYOUTH): Conditions of foster youth at age 17*. Chicago, IL: Chapin Hall at the University of Chicago.

Department for Education. (2024a). *Outcomes for Children in Need, including Children Looked After by local authorities in England (reporting year 2023)*. Retrieved from <https://explore-education-statistics.service.gov.uk/find-statistics/outcomes-for-children-in-need-including-children-looked-after-by-local-authorities-in-england> [Accessed 24 September 2024]

Department for Education (2014). *Children and Families Act*. London: DfE.

Harrison, N., Dixon, J., Saunders-Ellis, D., Ward, J. and Asker, P. (2023). *Care leavers' transition into the labour market in England*. Rees Centre. Retrieved from https://hubble-live-assets.s3.eu-west-1.amazonaws.com/nnecl/file_asset/file/808/CareLeaversLabourMarket.pdf [Accessed 24 September 2024]

Sebba, J., Berridge, D., Luke, N., Fletcher, J., Bell, K., Strand, S., Thomas, S., Sinclair, I. and O'Higgins, A. (2015). *The educational progress of Looked After Children in England: Linking care and educational data*. Rees Centre & University of Bristol. Retrieved from <https://www.education.ox.ac.uk/wp-content/uploads/2019/05/Linking-Care-and-Educational-Data-Overview-Report-Nov-2015.pdf> [Accessed 24 September 2024]

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58 Victoria Embankment
Temple
London
EC4Y 0DS

info@taso.org.uk
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