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Passports out of poverty: Raising access to higher education for care leavers in Australia

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ABSTRACT

Access to education has long been associated with lifelong wellbeing and poverty prevention. Indeed, education is often described as a 'passport out of poverty'. For care leavers, higher education access can create powerful social and economic protection, but poverty often creates both material and cultural barriers to this access. The research described here explored the access and achievement of care leavers in Australian higher education. The study employed mixed methods, including a literature review; examination of national data sets; an online survey of public universities; and interviews with out-of-home care (OOHC) providers. Here we present qualitative findings from the online survey and interviews which captured the perspectives of senior representatives within both the higher education and community service sectors. These findings reveal the role that childhood poverty, trauma and disadvantage play in affecting education outcomes for many growing up in OOHC. Learning deficits and disabilities clearly affect academic preparedness for higher education. Poverty can also limit the ability to afford the costs of university study and reduce the capacity to visualise and construct an educational future. Educational disadvantage is often combined with limited institutional support for care leavers, exacerbating their marginalisation from higher education. Our findings highlight both a paucity of Australian research in this area and the disturbingly small number of care leavers who successfully transition to higher education. Raising university access requires specific measures to redress poverty, including financial support for care leavers beyond the age of 18, and study bursaries, fee remission and accommodation support. More broadly, cultural change is needed to address the consequences of poverty, which often include low educational expectations and horizons.

1. Introduction

Access to education, especially higher education, has long been associated with lifelong wellbeing and poverty prevention. Indeed, education is often described as a 'passport out of poverty' (Hope Foundation, 2015). In this paper, we review the qualitative findings of a national research project into the university access and achievement of care leavers. Our project captured the perspectives of senior representatives within both the higher education and community service sectors. We begin by describing how a background of poverty and placement in out-of-home care can manifest in cumulative educational disadvantage. We highlight the low rate of care leavers transitioning to university, which is problematic given the link between higher education and increased employment, earning potential and psycho-social benefits. We then describe the material and methods used for our survey of university policies and practices, and our interviews with key stakeholders in the community service sector. The survey and interview

findings are presented, along with some illustrative case studies. Finally, we discuss implications for the higher education and community service sectors, and provide recommendations for future national and cross-national research.

Poverty clearly affects parental capacity to care safely for children. Where families are faced with financial hardship they are more frequently challenged by mental health issues, alcohol and other drug misuse, violence, unemployment and housing insecurity (Australian Council of Social Services, 2014; McLachlan, Gilfillan, & Gordon, 2013). These stressors impact heavily on intra-familial relationships, including caregiving. Notwithstanding this, most families challenged by poverty manifest enormous resilience in maintaining good care of their children. However, environmental pressures on poorer families are associated with higher incidence of neglect and abuse (Australian Institute of Family Studies, 2015; Garbarino, 1977). Neglect and abuse increase the likelihood of children being removed from their biological families and placed in out-of-home care (OOHC) (Australian Institute of Family

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Studies, 2015).

Around 43,000 children live in out-of-home care in Australia and this number has risen every year over the past decade (Australian Institute of Health and Welfare, 2015a). Many children enter care as babies, toddlers or pre-schoolers. Approximately 44% of children admitted to out-of-home care are aged under 5 years (Australian Institute of Health and Welfare, 2015a). Already they have often experienced considerable trauma as a result of abuse, neglect and attachment disruption; this usually has long term impacts on formal and informal learning (Perry & Szalavitz, 2006; van der Kolk, 2005). For children who enter OOHC at school age, placement outside the family can result in cumulative educational disadvantage (Bromfield, Higgins, Osborn, Panozzo, & Richardson, 2005; Fernandez, 2008; Townsend, 2012). These children have commonly had disrupted and inadequate schooling prior to placement. Trauma and early attachment disruption frequently manifest in challenging classroom behaviour along with concentration and learning difficulties (Perry & Szalavitz, 2006; van der Kolk, 2005). Moves within the care system exacerbate existing learning deficits and difficulties and increase alienation from the educational process (Australian Institute of Health and Welfare, 2007, 2011). The trauma of past abuse and neglect; health and mental health issues; behavioural problems; involvement in the criminal justice system; absenteeism; bullying; lack of support from family; and lack of additional assistance from the school all contribute to educational problems for those in OOHC (CREATE Foundation, 2006; Fernandez. Frederick & Goddard, 2010; McFarlane, 2010; Townsend, 2012). Students from poverty who enter OOHC often also have limited aspirations for education and constrained expectations invested in them (Creed, Tilbury, Buys, & Crawford, 2011).

While poverty increases the likelihood of a child being placed in out-of-home care, a young person is also often exposed to poverty when they 'age out' of care. When adolescents in OOHC approach the care leaving age (usually 18 years of age in Australia) they are at high risk of material disadvantage (Stein & Munro, 2008). One reason for this reality is the substantial decrease in formal support for this group that occurs at 18 years of age, which often results in an accelerated transition to independence. This group experiences high rates of homelessness (Thoresen & Liddiard, 2011), unemployment and poor educational outcomes (Mendes, 2009a, 2009b; Mendes & Moslehuddin, 2006). Relatively few young people in care complete the full six years of secondary education and an even smaller number progress to any form of tertiary education (Cashmore, Paxman, & Townsend, 2007; Townsend, 2012).

The term 'care leaver' is somewhat contested. The Care Leavers' Association UK, for example, considers a care leaver to be any adult who spent time in care before the age of 18 (Care Leavers' Association, 2013). Similarly, in Australia, leaving care is formally defined as 'the cessation of legal responsibility by the state for young people living in out-of-home care under a child protection order from the Children's Court' (Mendes, Snow, & Baidawi, 2013, p. 6). For the purposes of the research described in this paper a 'care leaver' is defined as any adult who spent some time in care before the age of 18 (Australian Government, 2015).

The proportion of care leavers who transition to university is not accurately tracked in Australia. However, it has been estimated to be around 1%, compared with 26% of all young people in the general population who transition to higher education (Mendes, Michell, & Wilson, 2014). The percentage of Aboriginal and Torres Strait Islander care leavers who progress to higher education will almost certainly be even lower due to compound disadvantage (Harvey, Andrewartha, & McNamara, 2015; Harvey, McNamara, Andrewartha, & Luckman, 2015). Indigenous students overall are under-represented in higher education, constituting only 1.6% of domestic undergraduate enrolments (Koshy & Seymour, 2015) despite representing 3% of the general population (Australian Institute of Health and Welfare, 2015b). In addition to this general under-

representation, the rate of Indigenous children in out-of-home care nationally is around nine times the rate for non-Indigenous children. While Aboriginal and Torres Strait Islanders comprise only 5% of all children aged 0–17 years in Australia, they constitute 35% of all children in out-of-home care (Australian Institute of Health and Welfare, 2015a). These alarming statistics reflect the enduring poverty and socio-cultural marginalisation that remains the lived experience of many Australian Indigenous families.

The research described here explored access and achievement of care leavers in Australian higher education (Harvey, McNamara et al., 2015). The study employed mixed methods, including a literature review; examination of national data sets; an online survey of public universities; and interviews with OOHC service providers. Here we present qualitative findings from the online survey and interviews. This research project was conducted by La Trobe University in the state of Victoria and funded through an external research grant provided by the National Centre for Student Equity in Higher Education (NCSEHE) at Curtin University in Western Australia. The aims of the study were to map higher education for care leavers to increase the visibility of the out-of-home care cohort; and to provide a strong information base for future policy development and research.

Despite the paucity of data, available evidence suggests that Australian care leavers rarely transition to higher education. Factors that may increase the likelihood of care leavers pursing higher education include: staying in stable care, receiving social support after leaving care (Cashmore et al., 2007), having advocacy for the practical components of enrolling and applying for scholarships, and the high expectations of carers, workers and teachers (Jurczyszyn & Tilbury, 2012). Higher education access can clearly create powerful social and economic protection, but poverty often creates both material and cultural barriers to this access. Care leavers are thus largely excluded from the level of education that brings lifetime rewards, including vital protection from poverty in adulthood. The private benefits of higher education include lower rates of unemployment. In 2012, the unemployment rate for people aged 25 to 54 with a Bachelor degree was 2.7%, while the unemployment rate for those whose highest qualification was Year 11 or below was 6.6% (Australian Institute of Health and Welfare, 2013). Higher education graduates also benefit from increased in lifetime wages:

'Over the working lifetime of a university graduate the financial gain generated from income is more than \$1.5 million or 70% more than those whose highest qualification is Year 12, even after taking into account the foregone earnings of students while they study.' (Payne & Percival, 2008, p. 1)

However, being able to find a more fulfilling job, achieving better personal and family health, higher levels of education for one's children and improved overall life satisfaction are perhaps equally important for many who hold university degrees; these outcomes also buffer against poverty (Arnau-Sabatés & Gilligan, 2015; Lomax-Smith, Gibson, Watson, & Webster, 2011). Higher education should also be an enriching social and emotional experience; for care leavers whose life experiences have too often been impoverished and who are commonly marginalised as young adults, an undergraduate experience can result in important personal growth, enhanced identity formation and improved social capital (Noble-Carr, Barker, McArthur, & Woodman, 2014).

The potential of higher education to protect graduates, including care leavers, from poverty is well established. However, the extremely low university participation rates of Australian care leavers have not been coherently addressed, with no public national agenda for improvement. In the higher education system, care leavers do not constitute one of the six identified equity groups that the Australian Government monitors (Department of Education, Employment and Training, 1990). Consequently, institutional data is not collected to monitor their access, participation and retention rates. Research that

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