

Title: What does the international academic literature say about the interventions aimed at improving the educational outcomes for children in care? An umbrella review on what works for children and young people in care or transitioning from care.

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Synopsis: Children in care consistently experience poorer educational outcomes than their peers, reflecting the cumulative effects of social disadvantage, instability and structural inequalities embedded within the child welfare and educational systems. Although education is widely recognised as a key protective factor for these children, knowledge about which interventions are effective in improving their educational outcomes remains inconsistent. This article presents an umbrella review of international scientific evidence on interventions that report educational outcomes for children in care and care leavers. Following the PRISMA guidelines, 21 reviews published between 2006 and 2025 were included, synthesising evidence from 122 primary evaluations of more than 90 different interventions. Findings indicate that a wide range of interventions report positive or promising effects on educational attainment, cognitive development, engagement and attendance, with tutoring projects and other structured individualized support, the enhancement of the quality of care, including caregiver training, and multi-component programmes focused on enhancing life skills showing the strongest empirical support. However, the evidence base is characterised by methodological limitations, and over-representation of Anglophone countries (particularly the US) and a narrow focus on attainment-based outcomes. The article discusses the implications of these findings for social work practice, policy and research, highlighting the need for evidence-informed, context-sensitive and system-level interventions that address both educational and care-related determinants of school success.

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1. Introduction

International research has demonstrated that education can function as a catalyst for positive change in the lives of children and young people in care, ensuring a more favourable future by facilitating positive educational trajectories (Matheson, 2016; Berridge, 2017). However, although school failure and Early Leaving from Education and Training (ELET) are not exclusive to children and young people in care, they are affected

in a more generalized and distressing manner than the overall child population, showing comparatively worse numbers in academic attainment, attendance, and engagement. Indeed, according to data, their educational pathways are much the same everywhere and are characterized by a series of risk features including: (1) a great achievement gap that becomes of greater concern in secondary education (McDowall, 2009; Pecora, 2012; Montserrat and Casas, 2018; Tessier, O'Higgins and Flynn, 2018); (2) low rates of participation in higher education (Jackson and Cameron, 2014; Mendes *et al.*, 2014; Cameron, 2018; Pecora and O'Brien, 2019); (3) multiple school functioning risks such as grade retention, absences, suspensions, expulsions and changes of school (Miller, Flynn and Vandermeulen, 2008; Trout *et al.*, 2008; Wise *et al.*, 2010; Sebba *et al.*, 2015), and (4) and over-representation of this population in special education programmes and schools (Wise *et al.*, 2010; Sebba *et al.*, 2015; Montserrat and Casas, 2018; Pecora and O'Brien, 2019).

Although a growing body of research has been developed in recent decades, the education of children in care has historically been neglected and subordinated to other issues at academic, political and practical levels (Jackson and Cameron, 2014). Consequently, little is known about which measures are effective in improving the school experience of children in care. Indeed, there is a need for more in-depth and consistent knowledge about what is being done for children in care in terms of their education and what are the results of these interventions.

In order to contribute to the resolution of this issue and taking advantage of the recent interest on the topic, an umbrella review (i.e. review of reviews) has been conducted. The aim of the umbrella review was to ascertain the extent of the academic literature on this issue, to compare and contrast the existing research and to provide an overall examination of the body of available information. The concrete objectives of the study are as follows:

- 1) What interventions have been carried out to support the educational success of children in care?
- 2) What did the evaluation of these interventions reveal in terms of educational outcomes?
- 3) What recommendations for policy, practice and research can be derived from these findings?

2. Methods: How has this review been conducted?

The umbrella review was developed in accordance with the quality standards set out in the [Joanna Briggs Institute \(JBI\) Manual for Evidence Syntheses](#). The selection of studies for this review of reviews was based on the following criteria: i) any type of review (i.e. systematic review, scoping review, review of correlates, metaanalysis, ...); ii) focused on children in care or young people transitioning from care, without age restrictions; iii) that reported at least one of the following educational outcomes: attainment, attendance, engagement, school satisfaction, and school experience, as defined by the Encyclopaedia

of Quality of Life and Well-Being Research (Michalos, 2014). Reviews focusing primarily on other outcomes (e.g. mental health or transition outcomes) were included if educational outcomes were reported. In order to capture evidence relevant to early childhood, reviews focusing on developmental outcomes were also included.

Only peer-reviewed reviews with titles and abstracts available in English were included. Searches were conducted in February 2025 across 26 databases spanning education, psychology, social work and health. A total of 933 records were initially identified. After applying the review filters available within each database and removing duplicates, 415 unique reviews were screened by title and abstract. Twenty-seven reviews were retained and assessed at full text, of which 18 met the inclusion criteria. An updated search conducted in January 2026 identified three additional eligible reviews, resulting in a final sample of 21 reviews.

Included reviews were appraised using the [JBI Critical Appraisal Checklist for Systematic Reviews and Research Syntheses](#). Quality ratings ranged from low to high (2 to 9), with a mean score of 6.2 out of 10. Data extraction focused on review characteristics, covered populations, type of the studies included, outcomes reported, objectives and key findings.

Finally, to enable a more detailed analysis of interventions, information was extracted on all primary studies included in the reviews. Of the 458 primary evaluations reported across the 21 reviews, 122 were identified as relevant to the objectives of this umbrella review after removing duplicates and excluding studies that did not report educational or cognitive outcomes.

3. Study characteristics: What are the characteristics of the retained reviews?

The overview of the 21 included reviews confirmed that there is currently a significant degree of interest in the topic of the education of children in care. All the retained studies were published between 2006 and 2025, with a marked increase in publications since 2020 and six reviews being conducted in the last two years. Most were systematic reviews with a narrative approach, while four included meta-analyses (i.e. statistical analysis of results). Moreover, the reviews retained comprised four scopus reviews (Forsman and Vinnerljung, 2012; Greeson *et al.*, 2020; Lorio, Carta and Stephens, 2023; Savi-Karayol *et al.*, 2025) and one rapid review (Männistö and Pirttimaa, 2018).

As posited by the covered population, two primary groups of reviews were identified: firstly, those centered on children in care, encompassing all categories or a specific group (foster or residential care) ($n = 11$); and secondly, youth transitioning from care or young adults formerly in care ($n = 9$). One review included both populations simultaneously (Evans *et al.*, 2017). Two of the retained reviews concentrated on a specific demographic with particular requirements: namely, children with disabilities (Alves *et al.*, 2024) and children with language or communication needs, difficulties or delays (Savi-Karayol *et*

al., 2025). Furthermore, the study by Bakermans-Kranenburg *et al.* (2008) included only orphaned children.

Consistently, the retained reviews covered a wide range of ages, from infants to adults. Specifically, in six reviews the age range was not restricted or specified, while five established a broad range encompassing 0 to 18 years or more. However, a total of ten studies concentrated on specific age ranges: infants and toddlers (Lorio, Carta and Stephens, 2023; Kirby *et al.*, 2024); school-aged children (i.e. those between the ages of 6 and 15 years old) (Forsman and Vinnerljung, 2012; Liabo, Gray and Mulcahy, 2013; Männistö and Pirttimaa, 2018; Goulet *et al.*, 2024); young people from 15 years old and over (Montgomery, Donkoh and Underhill, 2006; Randolph and Thompson, 2017; Heerde, Hemphill and Scholes-Balog, 2018; Taylor *et al.*, 2024).

Mainly, the reviews retained in this study followed a comprehensive search strategy in an attempt to identify “all” the available evidence. A total of 12 out of the 21 reviews had no restrictions or include both peer-reviewed and grey literature and 11 reviews had no restrictions in terms of time frame or it is not specified. Nevertheless, the inclusion criteria with regard to the study design were more limited. A mere 8 out of the 21 reviews incorporated qualitative and mixed-designs, or were not restricted in these terms. Furthermore, with regard to the cultural and linguistic range, 11 reviews restrict the search to English language publications. Of these, one included only studies conducted in the US (Randolph and Thompson, 2017), the US and Canada (Doucet, Greeson and Eldeeb, 2022), and members of the OECD (Goulet *et al.*, 2024).

Sixteen of the included reviews focused on the educational outcomes stated in the inclusion criteria (i.e. attainment, attendance, engagement, school satisfaction, and school experience). The remaining five reviews focused primarily on developmental outcomes, including general (Leve *et al.*, 2012; Hermenau *et al.*, 2017), cognitive (Bakermans-Kranenburg, Van Ijzendoorn and Juffer, 2008), and language development (Lorio, Carta and Stephens, 2023; Savi-Karayol *et al.*, 2025). Importantly, a significant proportion of the retained reviews examined other outcomes alongside the educational or developmental outcomes, such as socio-emotional and relational outcomes (attachment, mental health and well-being; $n = 11$), transition outcomes (housing and employment; $n = 9$) and others (placement disruptions, externalizing and internalizing behaviour, caregiving quality, barriers to learning, health, and quality of life; $n = 6$).

As demonstrated by the 21 retained reviews of this study, interventions with a focus on the improvement of the education of children in care have yielded positive and promising results, achieved through a variety of different interventions: i) the enhancement of the quality of care, including caregiver training (Bakermans-Kranenburg, Van Ijzendoorn and Juffer, 2008; Leve *et al.*, 2012; Hermenau *et al.*, 2017; Lorio, Carta and Stephens, 2023; Kirby *et al.*, 2024); ii) multi-component programmes focused on enhancing life skills (Montgomery, Donkoh and Underhill, 2006; Geiger and Beltran, 2017; Randolph and Thompson, 2017; Heerde, Hemphill and Scholes-Balog, 2018); and iii) tutoring projects and other structured individualized support (Forsman and Vinnerljung, 2012;

Männistö and Pirttimaa, 2018; Goulet *et al.*, 2024). However, there is a consensus among authors that there is a need to enhance the quantity and quality of intervention research in this field, and to seek long-term results. The following recommendations are proposed in this regard:

- 1) New evaluations should learn from the former ones.
- 2) Researchers, professionals, policy-makers and children should work together in defining and developing intervention research.
- 3) More detailed and rigorous evaluations should be carried out; although there is no agreement on what this means. Some argued that only Randomized Control Trials (RCTs) provide strong evidence (Montgomery, Donkoh and Underhill, 2006; Evans *et al.*, 2017), while others had a broader concept of scientific evidence and advocated for more comprehensive studies (Liabo, Gray and Mulcahy, 2013; Starr *et al.*, 2024).

Table 1. Characteristics of the included reviews

Author, year	Type of review	Covered population	Cultural and linguistic range	Review time frame	Publication type	Type of included studies	Outcomes included in the review	IS (*relevant IS)	CA
Alves et al. (2024)	Systematic review	0 to 18+ Residential care Children with disabilities	English, Portuguese, French or Spanish	2006 onwards	peer reviewed literature	Q, QL, MM	Educational Transition Socio-emotional	31 (3)	+
Bakermans-Kranenburg et al. (2008)	Systematic review and Metanalysis	Residential care Orphaned children	not specified	1930 onwards	not specified	Q (controlled and uncontrolled)	Cognitive development	14 (13)	+
Doucet et al. (2022)	Systematic review	Youth transitioning from foster care	Studies conducted in the US and Canada	2000-2018	peer reviewed and grey literature	Q, QL, MM	Educational Transition	64 (17)	++
Evans et al. (2017)	Systematic review	0 to 18 In care or previously in care	English	1989-2015	no restrictions	RCTs	Educational	15 (13)	+
Everson-Hock et al. (2011)	Systematic review	Youth transitioning from care or adults who were previously looked-after	no restrictions	1990-2008	no restrictions	Q (controlled)	Educational Transition Socio-emotional	7 (6)	+++
Forsman & Vinnerljung (2012)	Scoping review	6 to 15 In care	English, Swedish, Danish or Norwegian	Before March 2011	peer reviewed and grey literature	Q (controlled and uncontrolled)	Educational	11 (10)	++
Geiger & Beltran (2017)	Systematic review	Youth transitioning from foster care	English	Before March 2016	peer reviewed and grey literature	no restrictions	Educational Transition Socio-emotional	22 (4)	++
Goulet et al. (2024)	Systematic review and Metanalysis	School-aged children In care	English or French High-income countries (members of the OECD)	2000-2023	peer reviewed articles, thesis, reports reviewed doctoral research	Q (controlled and uncontrolled)	Educational	26 (26)	++
Greeson et al. (2020)	Scoping review	0 to 21 Transitioning from foster care	English	not specified	peer reviewed and grey literature	Q and MM (controlled)	Educational Transition Socio-emotional	13 (5)	+
Heerde et al. (2018)	Systematic review and Metanalysis	15 to 24 Transitioning from care (not currently in care)	English	1990-2014	peer reviewed literature	Q	Educational Transition Socio-emotional	19 (8)	++

Hermenau et al. (2017)	Systematic review	0 to 17 Residential care Studies exclusively including disabled children excluded	no restrictions	Before July 2015	peer reviewed and grey literature	Q (controlled and uncontrolled)	Child development Socio-emotional caregiving quality, health	24 (17)	++
Kirby et al. (2024)	Systematic review	0 to 7 Foster care	English	Before June 2023	no restrictions	RCTs	Educational Social-emotional, developmental and relational outcomes	20 (10)	+++
Leve et al. (2012)	Systematic review	Foster care	not specified	Before March 2012	no restrictions	RCTs	Socio-emotional, developmental and relational outcomes; placement disruption	21 (2)	+
Liabo et al. (2013)	Systematic review	10 to 15 In care	no restrictions	Before June 2010	not specified	Q (controlled and uncontrolled)	Educational	11 (11)	++
Lorio et al. (2022)	Scoping review	Foster children under 5 years old and their parents	English	2000 onwards	peer reviewed literature	Q, QL, MM	Language development, internalizing and externalizing behaviour	24 (2)	++
Männistö & Pirttimaa (2018)	Rapid review	School-aged children in foster care	English or Finnish	not specified	peer reviewed literature	Q, QL, MM	Educational Cognitive development Socio-emotional quality of life, barriers to learning	19 (14)	+
Montgomery et al. (2006)	Systematic review	18+ Transitioning from care youth with special needs excluded	not specified	Before October 2005	not specified	Q (controlled)	Educational Transition	19 (12)	+
Randolph & Thompson (2017)	Systematic review	Transitioning from foster care	Studies conducted in the US. English language	2000 onwards	peer reviewed and grey literature	Q, QL, MM	Educational	6 (3)	++
Savi-Karayol et al. (2025)	Scoping review	0 to 18 in care (any type) Children with language or communication needs/difficulties/delays	English	1990 onwards	peer reviewed and grey literature	Q, QL, MM Includes reviews	Language development	38 (3)	++
Starr et al. (2024)	Systematic review	Youth transitioning from care	English	Before July 2023	peer reviewed literature	Longitudinal studies	Educational Transition Socio-emotional	27 (8)	++

Taylor et al. (2024)	Systematic review and Metanalysis	16 to 25 Transitioning from care	no restrictions	not specified	peer reviewed and grey literature	Q (controlled)	Educational Transition Socio-emotional	27 (11)	+++
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*Primary studies in reviews that are relevant to the objectives of this review of reviews. CA = Critical Appraisal of the studies (+ 0-5 points, ++ 6 to 8, +++ 9 to 10 points out of 10); IS = included studies; OECD = Organisation for Economic Co-operation and Development; RCT = randomised controlled trials; Q = quantitative studies, QL = qualitative studies, MM = mixed-methods studies

4. Analysis of the relevant evaluations: What can we learn from the evaluations included in the retained reviews?

A total of 122 studies were identified as relevant for the purposes of this review of reviews, which assessed 90 different interventions. Due to the unavailability of space within the article, it was not possible to incorporate the whole list of the included evaluations. The author can provide it upon request.

According to the results, the most frequently evaluated programmes were:

- TYCW (Teach Your Children Well), a Canada-based curricula tutoring programme, delivered in both one-to-one and small-group formats (n = 7 evaluations) (Flynn *et al.*, 2010, 2012; Harper and Schmidt, 2012, 2016; Harper, 2013; Marquis, 2013; Hickey and Flynn, 2020).
- The Letterbox Club programme (n = 5), a material distribution program from the UK that delivers individualised parcels with reading material, number games, and stationery (Dymoke and Griffiths, 2010; Griffiths, Comber and Dymoke, 2010; Winter *et al.*, 2011; Mooney, Winter and Connolly, 2016; Forsman, 2019).
- Catch Up (ABC and ABC-T) (n = 4), a caregiver training programme based on behavioural modification developed in the US (Lewis-Morrarty *et al.*, 2012; Bernard, Lee and Dozier, 2017; Lind *et al.*, 2017; Raby *et al.*, 2019).
- The Skolfam model (n = 4), a multicomponent tutoring programme from Sweden, including direct tuition for the child, as well as teacher and caregiver support and training from a multidisciplinary school team (Tideman *et al.*, 2011; Tordön, Vinnerljung and Axelsson, 2014; Durbreej and Hellner, 2017; Tordön *et al.*, 2020).

The retained evaluations were endorsed by 98 different authors and encompassed studies developed from 1937 to 2022. A notable overrepresentation of US studies is evident in the retained reviews: A total of 75 evaluations were conducted in the US, with the UK undertaking 15, Canada 11, and Sweden 6. The other countries represented by the relevant studies were: Romania (n = 4), the Russian Federation (n = 2), and Australia, El Salvador, Eritrea, India, Iran, Israel, Lebanon, Spain, and Turkey (each accounting for one evaluation).

With respect to the age and type of care of the targeted population, a significant proportion of the evaluations were targeted at school-aged children (n = 47), followed by those aged 16 and over (n = 26) (Figure 1). On the other hand, many evaluations assessed interventions that were open to the participation of children in any type of care (i.e. mixed care; n = 38), 40 were targeted at foster care children and 24 at residential care (Figure 2).

Figure 1. Age of the population covered by the relevant evaluations

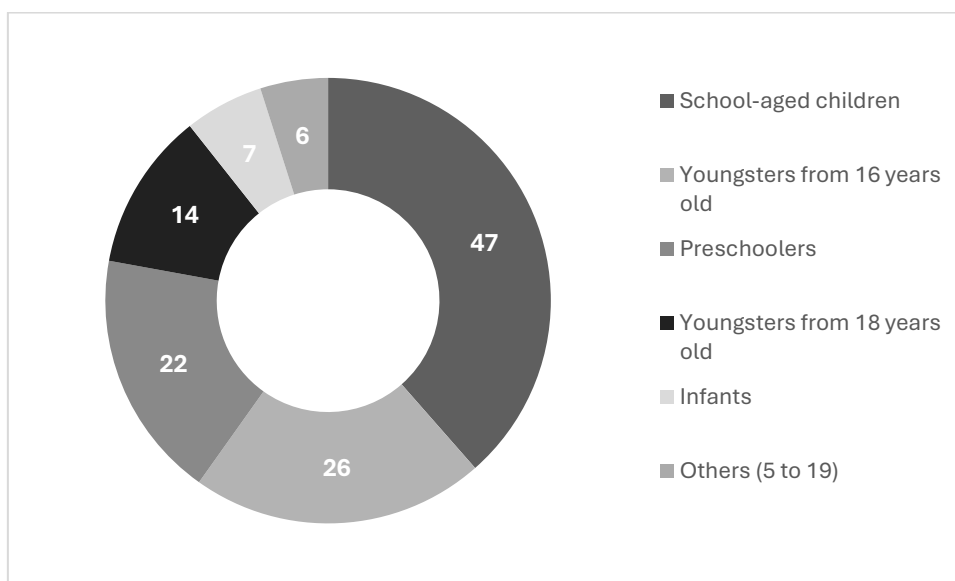
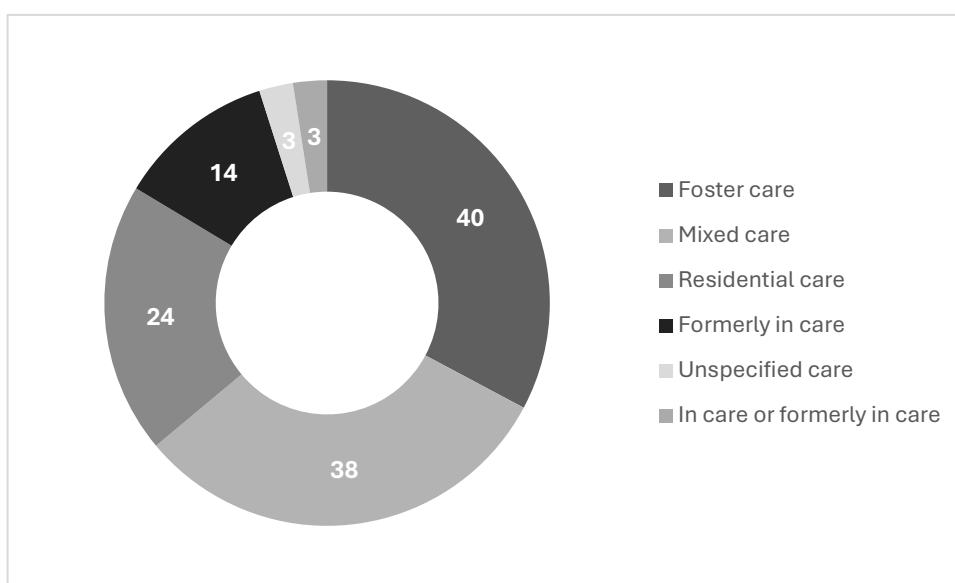


Figure 2. Type of care of the population covered by the relevant evaluations

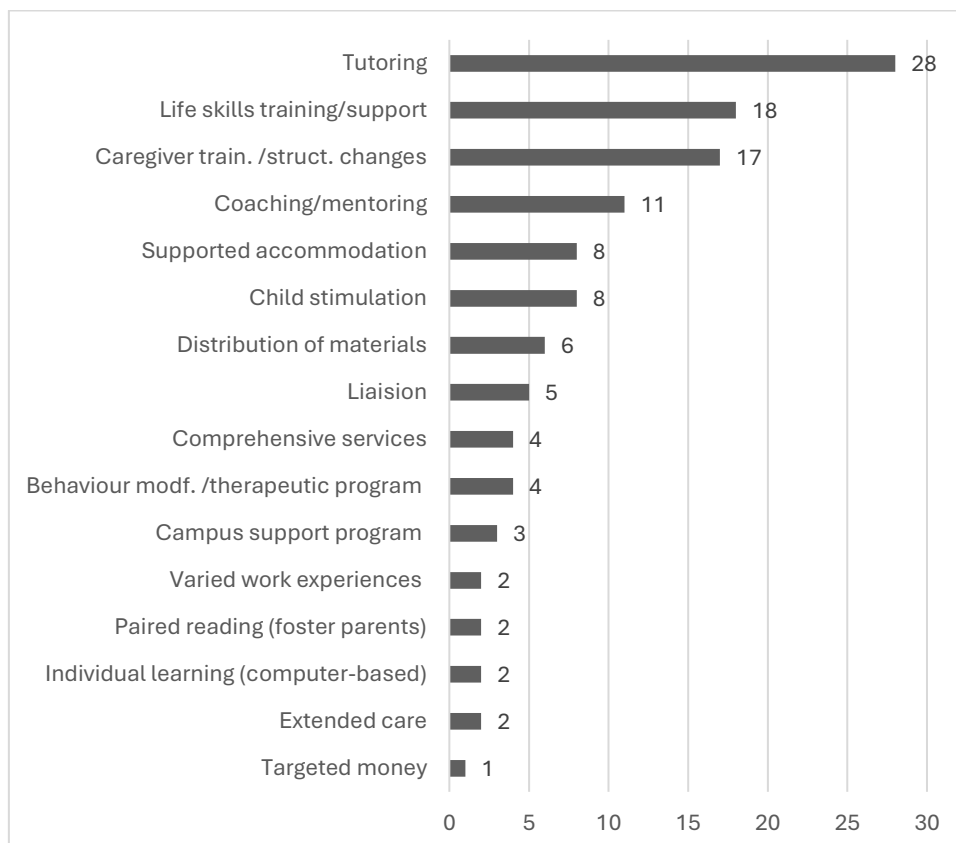


Despite the fact that all of the interventions retained for the analysis reported educational outcomes (as indicated by the inclusion criteria of this study), their primary objective was not necessarily to enhance the education of children in care. Consequently, a significant proportion of the studies retained focused on enhancing curricula or transversal competences, such as encouraging reading or promoting effective communication. However, a significant proportion of the studies ($n = 56$) were not concerned with the enhancement of educational outcomes, but rather focused on other domains, including the facilitation of the transition to adulthood ($n = 37$), the enhancement of care quality (n

= 13), the prevention of placement disruption (n = 4), the promotion of work ethics (n = 1), and the prevention of delinquency (n = 1).

In terms of the nature of the intervention or programme under consideration, each of the 122 interventions was assigned a code according to its primary component. This process enabled the grouping and identification of different categories, thereby providing a comprehensive overview of the core content of the interventions evaluated (Figure 3). However, it should be noted that this is a simplification as: i) a considerable number of interventions are comprised of a multifarious array of components; ii) there are significant discrepancies and subtleties in the manner in which each evaluation delineates each component. The categories with greater amounts of evidence provided were tutoring, understood as direct academic support to the child (n = 28), life skills training or support (n = 18), caregiver training or structural changes in the care provision (n = 17), and coaching or mentoring (n = 11).

Figure 3. Main component of the relevant evaluations

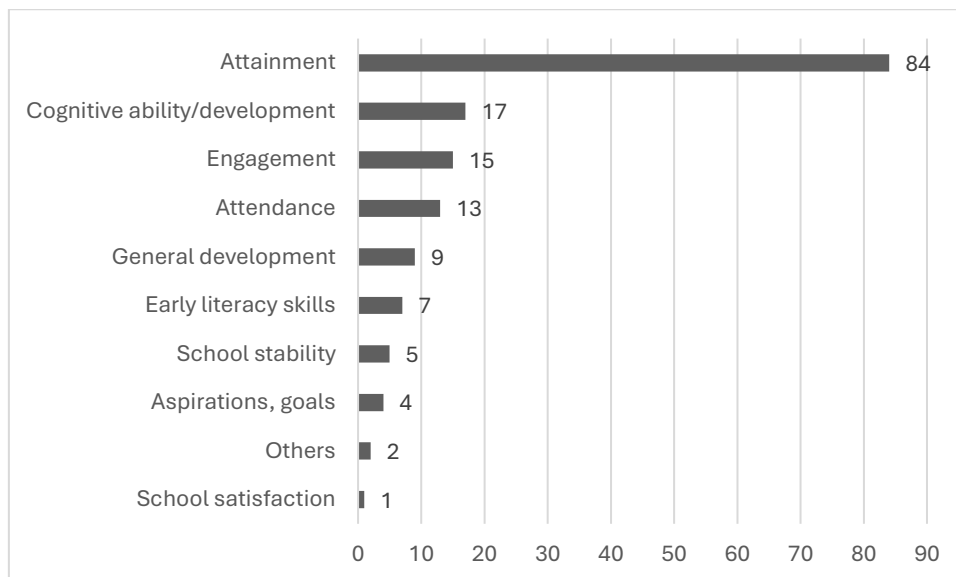


The interventions were mostly delivered directly to the child and/or their caregivers. However, eight evaluations assessed an intervention based on indirect support.

Furthermore, the interventions could be delivered either in community settings, including schools or university campuses ($n = 62$) or the home or institution where the child lives ($n = 51$).

As shown in Figure 4, regarding the outcomes reported in each of the relevant evaluations, attainment emerged as the most prevalent outcome ($n = 84$), followed by far of cognitive ability or development ($n = 17$), school engagement ($n = 15$), and attendance ($n = 13$). These results showed that although attainment was the most frequently reported outcome, given its status as the primary indicator of school success, other more comprehensive outcomes have also been considered in research. These include socio-emotional, attitudinal, and experiential learning issues, such as school engagement, aspirations/goals, and school satisfaction.

Figure 4. Outcomes reported by the relevant evaluations

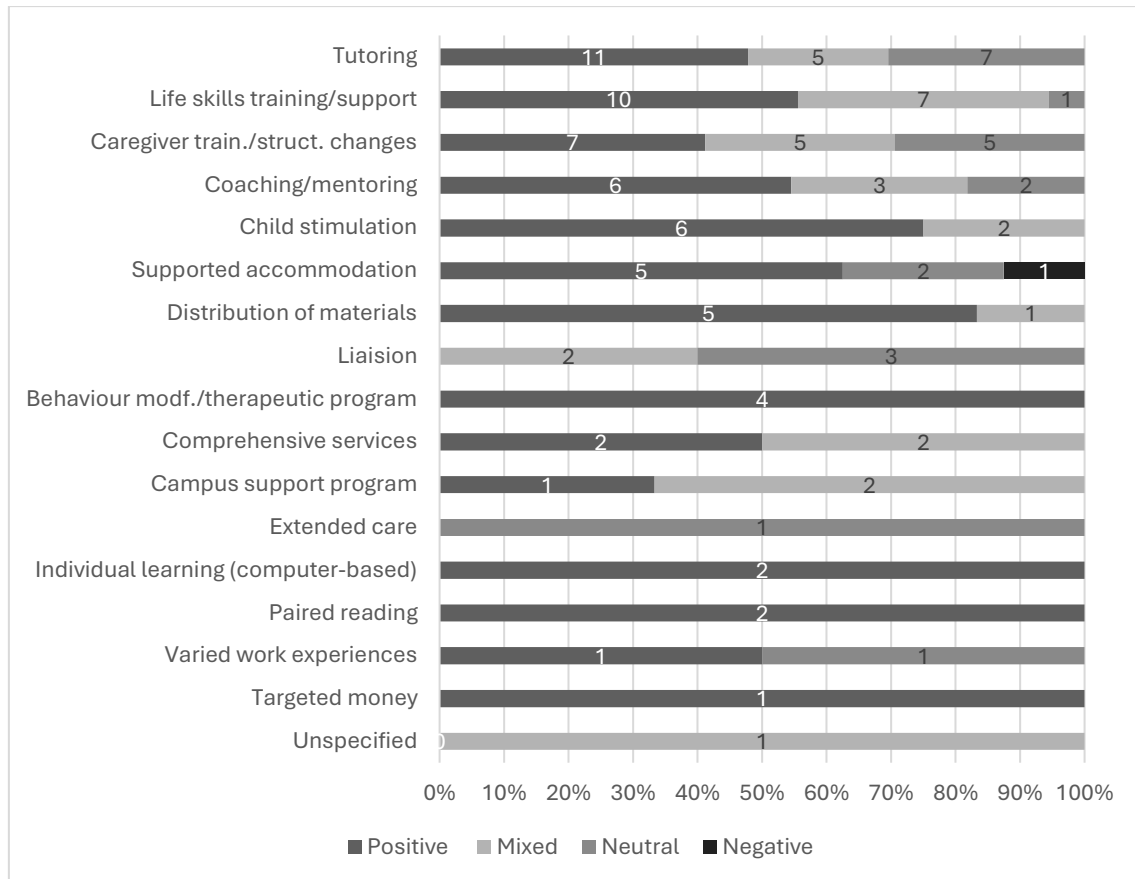


The final step in the analysis entailed the classification of the primary outcomes reported by each evaluation into the following mutually exclusive categories: positive ($n = 63$), negative ($n = 1$), neutral ($n = 22$), or mixed results ($n = 30$). The latter category comprises studies that reported positive, negative and/or neutral results simultaneously for different outcomes.

As seen in Figure 5, the interventions focused on life skills training and support, tutoring, and caregiver training or structural changes of care had the strongest and most consistent evidence of positive outcomes, although they also included some neutral and mixed results. Coaching or mentoring, child stimulation, and material distribution (e.g. books) generally showed positive effects but were supported by fewer studies. Other approaches, such as comprehensive services, supported accommodation, campus support programmes, and liaison interventions, presented more mixed or limited evidence. Of all

the evaluation studies, only one reported negative outcomes for a supported accommodation programme (Jones & Lansdverk, 2006).

Figure 5. Findings according to the main component of the intervention



Note: The types of intervention are arranged along the vertical axis according to the total number of evaluations identified for each type, with those supported by the most evidence placed at the top.

Specifically, all the evaluations found for the tutoring programme Teach Your Children Well (TYCW) assessed children's attainment. Three evaluations reported positive findings, one provided neutral results and one mixed results. Two of the evaluations did not provide data that was sufficient to reach conclusions (Harper and Schmidt, 2016; Hickey and Flynn, 2020). The Letterbox Club programme was assessed by five of the retained studies: Four of them reported positive results on children's attainment and engagement, and one reported mixed results (no results found in school satisfaction). The Catch Up (ABC and ABC-T) caregiver training programme yielded positive and neutral results on early literacy skills and cognitive development of the children, according to the four evaluations retained. Finally, the Skolfam model (Sweden) evaluations assessed children's attainment and cognitive development. Two of the four evaluations reported

positive results, while the remaining two did not furnish sufficient data to draw definitive conclusions (Durbeej and Hellner, 2017; Tordön *et al.*, 2020).

5. Implications for policy, practice and research

The findings of the study suggest that policymakers should allocate resources to the education of children in care and those transitioning out of care, as such investment is deemed both necessary and worthwhile. It is imperative to address the issue of these particularly vulnerable children, who are facing significant life challenges, for whom education can represent a critical opportunity to improve their life prospects and to break cycles of poverty and family conflict. The responsibility for effecting change should not be shouldered exclusively by these children and caregivers; rather, they require sustained support and equitable access to opportunities to fully develop their potential from the systems and institutions that are responsible for their protection.

For practitioners, these findings suggested that (1) tutoring and other individualised and personalised support such as coaching or mentoring; (2) multi-component programmes based on life skills training or support; and (3) the enhancement of the quality of care, including caregiver training, tended to be the most effective. This encompasses educational activities (e.g. material distribution, paired reading, computer-based individual learning) as well as programmes targeting indirect learning conditions (i.e. accommodation support, behavioural modification or therapeutic programmes, comprehensive services). The efficacy of these measures in enhancing the educational attainment, engagement, and cognitive development of these children has been well-documented. Accordingly, programmes designed to enhance the educational outcomes of children and young people in care or transitioning from care should adopt a comprehensive approach that addresses factors at the level of the child, care setting, welfare and education systems, as well as the broader life context of these children, including their material living conditions.

The present study has enabled the identification of four main research gaps. Firstly, there is a lack of evaluations from many countries, which introduces bias into the conclusions researchers can draw upon this issue. Secondly, there is a shortage of data on unaccompanied migrant children, as well as on other specific groups, such as children with special educational needs or disabilities, who represent highly vulnerable profiles with distinct educational needs. Thirdly, there is a lack of research focusing on educational outcomes beyond attainment, which narrows the analysis of the impacts of the interventions assessed and fails to capture the full complexity of the issue. Finally, there is an absence of evaluations of interventions whose main components include leisure-time or extracurricular activities, access to culture, home schooling, or trauma-informed programmes implemented in schools; although these interventions are common and widely applied to vulnerable children, their implications for the specific group of children in care remain largely unassessed.

6. Conclusion

This umbrella review demonstrates that educational interventions for children in care and young people transitioning from care can make a meaningful difference, while also revealing substantial gaps and limitations in the current evidence base. For policymakers, practitioners and researchers, the challenge lies not only in identifying what works, but in embedding educational support within relational, rights-based and system-aware approaches to child welfare. Strengthening the alignment between research, practice and policy is essential if education is to fulfil its potential as a pathway to social inclusion for children in care.

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