

Review

Measuring Success for Care Leavers in England: Whose Definition Counts?

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Abstract

Information on care leaver outcomes in England is collected by local authorities to inform local services and national policy, but the focus of these measures reflects a narrow definition of ‘success’ imposed on care leavers by policy-makers and practitioners. Our article is a co-production by academics and care-experienced consultants, in which we conduct a rapid review of the journal articles, book chapters and Doctoral dissertations on definitions of ‘success’ for all young adults, drawing on Maslow’s hierarchy of needs. The analysis utilises expertise by experience to (a) compare these definitions against the measures currently collected for care leavers in England, and (b) centre the views of care leavers in considering how ‘success’ should be defined. We identify limitations of both depth and breadth in existing statutory outcome measures as indicators of success, and highlight how both quantitative and qualitative differences between care leavers and other young adults have implications for the types of outcomes that should be measured. We conclude that policy-makers and practitioners need a more comprehensive approach to understanding and measuring success using care leavers’ own definitions.

Keywords: care leavers; success; outcome measures; literature review; experts by experience



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1. Introduction

Care leavers are young adults who have spent time living away from their birth parents in the care of the state but have either aged out of care or have opted to leave the care system before this point. The statutory definition of a care leaver in England covers any young person aged 16–25 who has been ‘looked-after’ (in the care of the local authority) for at least 13 weeks from the age of 14, and who was also in care on or after their 16th birthday. Care leavers represent a subgroup of all young adults; although care leavers face a unique set of challenges (Palmer et al., 2022), they also share many experiences with their peers in the general population who are also negotiating independence, careers and relationships in the adult world. However, care leavers generally enter adulthood at a younger age: whereas 80% of all young adults live with their parents at age 18 and half still live with them at age 24 (ONS, 2024), the majority of care leavers have moved out of family homes by age 18, with just 11% living with parents or other relatives and 17% living with former foster carers (DfE, 2024). Care leavers experience sharper transitions to independence, what Stein (2008) describes as compressed and accelerated transitions, while having to manage

concurrent life events, as well as dealing with issues related to their pre-care and in-care experiences including persistent emotional trauma (Mendes & Moslehuddin, 2004).

Gathering information about how care leavers are faring in early adulthood can help inform policy and practice by showing how effectively services have met their needs, and how well they are doing in different areas of their life. Moreover, by measuring their 'success', services can tailor the support they offer to current care leavers as well as forward planning for future generations.

1.1. Measuring Success for Care Leavers in England

The Department for Education (DfE) requires all English local authorities to submit information annually about young people who have left local authority care. This information is required for all care leavers aged 17–21 (of whom there were 50,670 in 2024; DfE, 2024); and from 2023, all care leavers aged 22–25 who have requested and received support from their local authority (of whom there were 42,300 in 2024; DfE, 2024). Local authorities are first asked to report the proportion of their care leavers with whom they are still in touch: whether there has been contact between the local authority and the individual within the 3 months before and one month after their birthday for those aged 17–21, and whether the individual has contacted the local authority for support during the year for those aged 22–25. The statutory information that is collected about care leavers' outcomes covers two main topics:

- 'Main activity': What is the young person's main activity?
 - This is a hierarchical list: the order of priority runs from higher education, other education, apprenticeship, through to training or employment, and offers options for full time or part time activity. Only one option can be selected: if a care leaver is in education and has a part time job, their main activity is recorded as education.
 - Further options allow local authorities to record care leavers who are not occupied in any of these main activities, and whether this is due to illness/disability, pregnancy/parenting, or other reasons.
- Accommodation': What type of accommodation is the young person living in?
 - Options include supported lodgings, independent living, living with parents or other relatives, homelessness, or living with former foster carers under a 'Staying Put' arrangement.
 - Local authorities are also asked to judge whether this is 'suitable' accommodation for the individual. Guidance suggests that accommodation that is deemed safe, secure and affordable (including short-term accommodation that is designed to support care leavers to move onto stable long-term accommodation should be judged as 'suitable'. Whereas accommodation that has been used in a crisis such as 'emergency' and 'bed and breakfast', and those who have no fixed abode or who are residing in a hotel should be judged as 'unsuitable'.

This limited range of outcome measures represents a narrow set of assumptions about what a 'successful' adult is. This definition of success is imposed by national government, and does not necessarily reflect how care leavers themselves would define success. Instead, it reflects a set of factors on which hard data might be relatively easy for Personal Advisors (local authority professionals who work with care leavers) to collect.

Besides these statutory measures, local authorities are legally required under the Children (Leaving Care) Act (2000) to produce a Pathway Plan for care leavers, starting from age 16 at the latest and running up to at least age 21 (DfE, 2025). The Pathway Plan must be updated at least every 6 months and provides a thorough assessment of the

care leaver's needs in relation to specific dimensions: health and development; education, training and employment; emotional and behavioural development; identity; family and social relationships; practical and other independent living skills; financial arrangements; and (suitability of) accommodation. Pathway Plans therefore represent a broader definition of 'success' than do the national measures, but this is still a definition imposed on care leavers by government. Many local authorities collect additional information about how their care leavers are getting on in life, but practice differs widely in terms of who decides what is important.

At both national and local government levels, then, there is no systematic representation of care leavers' voices in determining how their success is defined. Imposing a particular definition of success from the top-down runs the risk of reinforcing inequalities, since these definitions do not necessarily reflect the lived experience and priorities of care leavers and other minorities such as young adults with a disability. A broader definition of 'success' that is (co-)created by care leavers themselves could enable services to support care leavers to thrive rather than just survive. Although the Department for Education recognises the need for more meaningful outcome indicators that better capture care leavers' successes and difficulties (DfE, 2023a, 2023b), as yet this has not resulted in any changes to the measures outlined above.

1.2. Theoretical and Empirical Approach in the Current Study

We decided to look at what might represent a more meaningful measure of success for care leavers than is represented by the current statutory outcomes framework. Given the many commonalities between care leavers and other young adults, we felt that the logical first step was to review the different areas of life that have been conceptualised as representing 'success' for all young adults, as well as considering the areas that might be particularly challenging or unique to care leavers. Knowing that care leavers often experience an 'accelerated adulthood' (Palmer et al., 2022), it was also important to consider how some indicators of success might be especially salient for care leavers at a younger age than for other young adults. As we were conducting a separate literature review focusing on research with care leavers as part of the larger project, for the current article we focused on literature with young adults in the general population.

In the social sciences, definitions of 'success' for young adults (and related concepts such as 'flourishing', 'thriving', and 'attaining goals') have been explored both theoretically (e.g., Scales et al., 2016) and empirically, the latter through interviews and surveys exploring how adolescents and young adults themselves define these concepts (e.g., Joos, 2003; Tolonen, 2008). Some research also presents how definitions of success might differ by gender or ethnicity (e.g., Bradford & Hey, 2007; Kelly, 2017). Looking for common areas of success identified in this literature and comparing these against the statutory measures for care leavers would therefore provide an important first step in thinking about whose definition counts.

The theoretical framework that supported our thinking in defining and measuring success for care leavers is Maslow's Hierarchy of Needs. As originally defined (Maslow, 1943), this framework presents a set of five needs that motivate human behaviour. These needs are theorised to relate to each other in a hierarchical nature (often represented as a pyramid), with the fulfilment of needs at lower levels leading to the emergence of needs at higher levels. Needs at one level do not necessarily have to be fully met for the next level to emerge. Fundamental physiological needs for human survival (e.g., food, water, physical safety, and financial stability) are the first to be met, after which psychological needs can be met (e.g., emotional safety, love, esteem). The first four levels of Maslow's hierarchy represent 'deficiency needs', in that individuals are motivated to behave to rectify

a deficit in these needs. The final level of need is self-actualisation, where the motivation is to achieve growth towards one's full potential.

Criticisms of Maslow's theory include the observation that the hierarchical structure of and movement through the model is arbitrary and not supported by evidence (Wahba & Bridwell, 1976). We acknowledge this as a limitation; however, in our analysis of the literature and its implications for care leavers, we have focused more on the distinction between 'basic' (physiological and safety needs, which might be the minimum level of care leaver support expected from local authorities) and the higher levels of need. We will point out that what is most important at those higher levels of need will differ between individuals, and within individuals over time. The Children's Commissioner's Care Experienced Advisory Board have also used an updated version of Maslow's framework to produce a guide for professionals working with care-experienced young people (Children's Commissioner, 2024). It therefore made sense to consider care leavers' success both in terms of the different areas of their lives (such as education and employment), and the levels of need that should be met.

Given our focus on 'whose definition counts?', it was important to centre the voices of care leavers in our analysis. As well as having a care-experienced academic on the research team (Kelly), a crucial part of our methodology involved coproduction activities with care-experienced young adults (A.A., J.A., E.M., L.M., and C.W.-H.) who were members of the Project Design Group for the larger project of which this article forms a part. This represented the second important step in our thinking about whose definition counts: as 'experts by experience' (Preston-Shoot, 2007) their involvement in the analysis of themes in the literature and the comparison with statutory measures centres the views of care leavers in considering how 'success' should be defined. Section 2 outlines how this was achieved and sets out their contribution as co-authors of this article.

The aim of the current study was therefore to work with members of the Project Design Group to review research conducted with young adults in the general population (i.e., those who are not care leavers) to look at how success has been conceptualised for this age group. This was carried out both thematically, in terms of different areas of life, and in relation to Maslow's hierarchy of needs. We then compared these conceptualisations of success against the measures currently collected for care leavers in England to identify and analyse the main gaps and their implications for care leavers.

2. Methods

2.1. Literature Review

The two researchers from the University of Oxford (Luke and Kelly) conducted a rapid review of the literature on conceptualisations of 'success' for young adults. This was a time-constrained exercise and was not intended to be an exhaustive or systematic review of the topic: the key aim was to gather within the available time (January to March 2023) as broad a range as possible of theoretical and empirical work published in the English language on 'success' in young adulthood. The results would inform an exercise with the Project Design Group in which the domains of success identified in the review could first be sorted according to Maslow's Hierarchy of Needs and then compared against the outcome measures currently collected for care leavers in England.

The search terms used in the literature review were:

1. "Success*" OR "accomplishment" OR "achievement" OR "prosper*" OR "fruition" OR "Do* well" OR "progress" OR "benefit" OR "maturation" OR "ascendency" OR "fortune" OR "fruitful" OR "flourish*" OR "fortuitous" OR "thriv*" OR "blossom*" (must be included in the title)
AND

2. theory OR concept* OR defin* OR understanding (must appear in the abstract)
AND
3. “young adult*” OR “young people” OR “early adult*” (must appear in the abstract)

Given that we were conducting a separate review of the (limited) literature focused on care leavers’ definitions of success, the current search focused on how this has been defined for young adults in the general population. Our criteria included any journal articles, book chapters or Doctoral dissertations that gathered the views of adolescents or young adults (aged 16–25, in line with the ages for which care leaving services are provided in England) on what ‘success’ meant to them, taking the view that the synonyms listed above (accomplishment, etc.) might reasonably be assumed to also represent ‘success’. We also included any papers that reviewed empirical evidence of this type, or that presented a theoretical framework for understanding ‘success’ in this age group. We excluded any papers that focused solely on care leavers, since we were reviewing this separately. We also excluded papers that discussed outcomes for young adults more generally, without framing these in a discussion about success or any of its synonyms (for example, the large body of literature tracking the development of mental health symptoms in adolescence). Finally, we excluded empirical papers that focused on success where this had been defined by the authors, without eliciting the views of adolescents or young adults (for example, papers that measured educational attainment or a lack of criminal behaviour as a priori indicators of success).

The databases searched were Applied Social Sciences Index and Abstracts, International Bibliography of Social Sciences, Psycinfo, Scopus, and Web of Science. Following an initial search that yielded an unmanageable number of results, the decision was taken to restrict each search string to a particular field: the title (string 1) or abstract (strings 2 and 3). The total number of results (excluding duplicates) was 985, 609 of which were excluded as not relevant to our focus after reading the title. The remaining 376 abstracts were screened for relevance, and a further 339 papers were excluded at this stage. 37 full papers were read, of which 14 were excluded, for the following reasons:

- 7 focused only on care leavers
- 3 focused on outcomes without the context of success
- 4 were empirical papers which focused on the authors’ own definitions of success

Table 1 shows the 23 journal articles, book chapters and dissertations that were included in the final review; only 2 of these were from studies conducted in England. An Excel spreadsheet was used for data extraction and summarised the source’s methods and the domains of success that were identified. The included methods were (some studies used more than 1):

- Textual analysis of news media—1
- Textual analysis of students’ research project designs—1
- Interviews—10
- Review—5
- Survey—6
- Participant observation/ethnography—2
- Theoretical only—2

The domains of success across the 23 sources were collated (by Luke and Kelly) and grouped thematically under 11 topic areas (employment, finances, education, family, social relationships, citizenship, the self, way of life, goals and interests, external support, and health and leisure). Table 2 sets out these topic areas and domains and shows the number of sources from the review in which each domain was identified as part of the definition of ‘success’ for young adults.

Table 1. Sources included in the review.

Authors (Year)	Title
Benson and Scales (2009)	The definition and preliminary measurement of thriving in adolescence.
Bradford and Hey (2007) *	Successful subjectivities? The successification of class, ethnic and gender positions.
Callina (2013)	Hope and thriving in adolescence and young adulthood: A relational developmental systems framework.
Carrescia (2012)	Defining success in young adults with emotional disabilities
Cho and Docherty (2020)	Beyond resilience: a concept of human flourishing in adolescents and young adults with cancer.
Doebler (1998)	Successful outcomes for rural young women: A longitudinal investigation of social capital and adolescent development.
Gill et al. (2021)	Systematic review of adolescent conceptions of success: Implications for well-being and positive education.
Joos (2003)	What does it mean to be a success? The future goals and values of American teenagers.
Josic (2011)	Critical understanding of U.S. youths citizenship: Community belonging and engagement of “successful citizens”.
Kelly (2017) *	Searching for ‘success’: Generation, gender and onward migration in the Iranian diaspora.
Killoren et al. (2017)	Mexican American college students’ perceptions of youth success.
Lerner et al. (2011)	Positive youth development: Research and applications for promoting thriving in adolescence.
Mitchell and Lennox (2020)	“You gotta be able to pay your own way”: Canadian news media discourse and young adults’ subjectivities of successful adulting.
Nelson et al. (2017)	“I think, therefore I do”: Cognitions related to flourishing in emerging adulthood.
Padilla-Walker and Nelson (2017)	Flourishing in emerging adulthood: An understudied approach to the third decade of life.
Pao (2017)	Defining success in the transition to adulthood.
Patel et al. (2020)	Evidence of non-indicators as markers of success for youth in youth employability programmes: Insights from a South African study.
Salmela-Aro (2010)	Personal goals and well-being: How do young people navigate their lives?
Scales et al. (2016)	The dimensions of successful young adult development: A conceptual and measurement framework.
Sichling and Karamehic-Muratovic (2020)	‘Makin’ it’ in the Heartland: Exploring perceptions of success among second-generation immigrant youth in St. Louis.
Tolonen (2008)	Success, coping and social exclusion in transitions of young Finns.
Trask-Kerr et al. (2019)	Positive education and the new prosperity: Exploring young people’s conceptions of prosperity and success
Volstad et al. (2020)	“You have to be okay with okay”: Experiences of flourishing among university students transitioning directly from high school.

* Research conducted in England.

Table 2. Topic areas and domains of success arising from the literature review.

Topic Area	Domain	Number of Sources
Employment	Being successful at work/business, professional success	6
	Being in employment, career, work	4
	Work/career satisfaction, in the job you want	3
	Preparation for careers, vocational competence	2
	Stable, reliable work	1
	Work–life balance	1
	Achieving a good job (at a young age)	1
	Job search resilience	1
	Taking on leadership roles	1
Finances	Achieving fame	1
	Financial/material stability/security	3
	Earning money	2
	Economic capital, asset building	2
	Making lots of money	1
	Being a ‘respected provider’ in the family	1
	Driving a luxury car	1
	Financial independence	1
	Financial shrewdness	1
Education	Academic success/competence	5
	Educational/school engagement	5
	Higher Education, university	4
	Educational attainment	4
	Post-secondary schooling	2
Family	Close, healthy relationships with family	5
	Having a good marriage/partnership	3
	Having a good family life	3
	Being a good parent/Giving children better opportunities	2
	Independence and equality in the family	1
	Delayed parenthood (after 18)	1
Social relationships	Close, healthy relationships with friends	6
	Social and cultural capital	2
	Projecting the right image	1
	Being popular	1
	Social skills	1
	Having a positive influence on others’ lives	1
	Connection to people and institutions	1
Citizenship	Helping/caring for others, prosocial orientation, philanthropy, ethical behaviour	6
	Active and engaged citizenship, productive, contributing to society, civic engagement	5
	Character (values, morality)	2
	Volunteering	1
	Political activism	1
	Intrinsic motivations	1
	Valuing diversity	1

Table 2. *Cont.*

Topic Area	Domain	Number of Sources
The self	Feeling good: happy, joy, positive affect, positive emotions	7
	Ability to overcome obstacles: surviving hardship, resilience, ability to cope, self-regulation, fortitude and determination	6
	Having a sense of control: self-efficacy, self-reliance, self-control, agency, confidence	6
	Feeling positive about the future: optimism, hope	5
	Self-fulfilment, self-realisation, self-discovery, personal growth	4
	Well-being: high levels of emotional, psychological and social functioning most of the time	3
	How you feel about yourself: self-worth, self-esteem	2
	Ability to ask for help/comfort	2
Way of life	Making full use of potential, finding your place, to grow	1
	Religiosity or spirituality	3
	Life skills, practical skills, standing on your own two feet	2
	Having responsibilities	1
	Independence and freedom, fewer social restrictions	1
Goals and interests	Living in age-appropriate accommodation	1
	Achievement and accomplishment, achieving personal goals, competence	5
	Sense of purpose, positive purpose	5
	Having/focusing on goals	3
	Avoiding procrastination	1
	Satisfaction with own performance/effort	1
External support	Identifying personal passion in life, opportunities to grow and develop interests/life interest, motivated to develop passions	1
	Receiving support and encouragement	3
	Having a role model	1
Health and leisure	Experiencing security, stability	1
	Maintaining good physical health	4
	Taking part in leisure activities	3
	Being successful in sport/athletic achievement	2
	Living a full life	1

2.2. Care-Experienced Co-Authors

Five care-experienced young adults who were members of the Future of Care Project Design Group co-authored this article. First, the domains set out in Table 2 were used in a sorting exercise with the care-experienced co-authors, described below. The co-authors were then each assigned a section of the Method or Results section of the article to produce. Some of the co-authors chose to write the section themselves and receive feedback from the first author. Others preferred to talk through what they wanted the section to include in a separate Zoom meeting with the first author; this conversation was then written up by the first author and reviewed by the co-author for any edits. The remainder of this Method section and the whole of the Results section have therefore been co-produced by academics and experts by experience. The co-authors have also given feedback on the proposed article framework and on an earlier draft version of the article.

2.3. Sorting Exercise

The two researchers from the University of Oxford (Luke and Kelly) held a Zoom meeting with five members of the Project Design Group (A.A., J.A., E.M., L.M., and C.W.-H.). In a series of PowerPoint slides, we began by looking at Maslow's Hierarchy of Needs pyramid and talked about what the different levels meant. We then looked at the topics arising from the literature review, and discussed where we would place each one in the pyramid. This exercise produced a good discussion: there was a lot of overlap in opinion, but this also depended on individuals' personal and life experiences. All group members were involved in the discussion, even those who might otherwise be quieter, and as a group we were good at bringing people out of their shells.

Any disagreements on where to place topics on the pyramid were resolved through further discussion. Where two members disagreed, it was good to have a third person as the 'voice of reason'. All outcomes were collectively decided and as a result no-one was upset with any of the final decisions. It was clear that all members respected each other's views, and we each benefitted from seeing things from each other's point of view.

The whole process was enjoyable: the pyramid exercise was fun, and it was good to hear from others in the group. We learned to consider multiple perspectives, that things are multi-faceted and that you can play 'devil's advocate' in discussions. Researchers considering this method should note that scheduling a group meeting can be an issue: it is difficult to get everyone together with their work and other commitments, but an online meeting worked better than trying to do the exercise by email. Secondly, the use of whiteboard tools helped to break up the meeting and made it more interactive. Finally, after each group member had chosen a section of this resulting article to focus on, it was very helpful to have the option of a one-to-one call with one of the Oxford researchers to discuss the content of that section, rather than everyone trying to go off and write it on their own.

3. Results

Table 3 shows the results of the sorting exercise, with each domain having been assigned to one or more levels of need in Maslow's Hierarchy of Needs. Individual domains are organised into topic areas, as previously shown in Table 2.

The results of our analysis are divided into four sections. In each section we present the findings from the review, compare these conceptualisations of success against the measures currently collected for care leavers in England, and suggest why particular domains might be especially salient measures of success for care leavers. In each section, our analysis draws on the views and experiences of our care-experienced team (Kelly, A.A., J.A., E.M., L.M., and C.W.-H.). It includes both a summary of the review findings, and a reflection on their implications for care leavers, based on their own experiences. This 'analysis by experience' was part of the novel methodology for this study. The findings will be further examined in relation to existing literature in the Discussion.

First, we consider those definitions of success that relate to the meeting of 'basic needs', i.e., physiological and safety needs. We then look at the domains that appeared most commonly in the reviewed sources, exploring both the range of topics covered and the spread of levels of need that they represent. The final two sections focus on two topics that emerged in the review which are also topics represented in the current statutory outcome measures for care leavers in England: education and employment.

Table 3. Topic areas and domains of success sorted by levels of need.

Topic Area	Domain	Level of Need				
		Physiological	Safety	Love and Belongingness	Esteem	Self-Actualisation
Employment	Being successful at work/business, professional success					X
	Being in employment, career, work	X	X		X	
	Work/career satisfaction, in the job you want			X	X	X
	Preparation for careers, vocational competence		X			X
	Stable, reliable work	X	X			
	Work–life balance		X	X	X	
	Achieving a good job (at a young age)		X			X
	Job search resilience	X			X	X
	Taking on leadership roles					X
	Achieving fame			X	X	
Finances	Financial/material stability/security	X	X			
	Earning money	X	X			
	Economic capital, asset building				X	X
	Making lots of money				X	X
	Being a ‘respected provider’ in the family		X	X	X	
	Driving a luxury car				X	X
	Financial independence	X	X			
	Financial shrewdness		X	X		
Education	Academic success/competence				X	X
	Educational/school engagement	X	X	X		
	Higher Education, university			Possibly	X	X
	Educational attainment		X		X	X
	Post-secondary schooling		X		X	
Family	Close, healthy relationships with family	X	X	X	X	X
	Having a good marriage/partnership	X	X	X		
	Having a good family life	X	X	X		
	Being a good parent/Giving children better opportunities	X	X	X	X	X
	Independence and equality in the family	X	X	X	X	X
	Delayed parenthood (after 18)		X	X		
Social relationships	Close, healthy relationships with friends	X	X	X	X	X
	Social and cultural capital		X	X	X	X
	Projecting the right image			X	X	
	Being popular			X	X	
	Social skills		X	X	X	
	Having a positive influence on others’ lives			X	X	X
	Connection to people and institutions		X	X	X	X

Table 3. Cont.

Topic Area	Domain	Physiological	Safety	Level of Need		
				Love and Belongingness	Esteem	Self-Actualisation
Citizenship	Helping/caring for others, prosocial orientation, philanthropy, ethical behaviour			X	X	X
	Active and engaged citizenship, productive, contributing to society, civic engagement			X	X	
	Character (values, morality)			X	X	X
	Volunteering			X	X	X
	Political activism			X		X
	Intrinsic motivations					X
	Valuing diversity			X		
The self	Feeling good: happy, joy, positive affect, positive emotions			X	X	
	Ability to overcome obstacles: surviving hardship, resilience, ability to cope, self-regulation, fortitude and determination	X	X	X	X	X
	Having a sense of control: self-efficacy, self-reliance, self-control, agency, confidence	X	X		X	X
	Feeling positive about the future: optimism, hope				X	X
	Self-fulfilment, self-realisation, self-discovery, personal growth				X	X
	Well-being: high levels of emotional, psychological and social functioning most of the time	X	X	X	X	X
	How you feel about yourself: self-worth, self-esteem				X	
	Ability to ask for help/comfort		X	X		
	Making full use of potential, finding your place, to grow				X	X
	Religiosity or spirituality			X		X
Way of life	Life skills, practical skills, standing on your own two feet	X	X		X	X
	Having responsibilities	X	X	X	X	X
	Independence and freedom, fewer social restrictions		X		X	X
	Living in age-appropriate accommodation	X	X			

Table 3. *Cont.*

		Level of Need				
Topic Area	Domain	Physiological	Safety	Love and Belongingness	Esteem	Self-Actualisation
Goals and interests	Achievement and accomplishment, achieving personal goals, competence				X	X
	Sense of purpose, positive purpose			X	X	X
	Having/focusing on goals				X	X
	Avoiding procrastination		X			X
	Satisfaction with own performance/effort				X	X
	Identifying personal passion in life, opportunities to grow and develop interests/life interest, motivated to develop passions		X	X	X	X
External support	Receiving support and encouragement			X		
	Having a role model			X	X	
	Experiencing security, stability	X	X			
Health and leisure	Maintaining good physical health	X	X			
	Taking part in leisure activities			X	X	
	Being successful in sport/athletic achievement				X	X
	Living a full life				X	X

X = assigned to this area of need.

As a reminder, besides being ‘in touch’ with the local authority, only two metrics are systematically measured for care leavers in England: (1) whether they are in education, training, or employment, and (2) the type and suitability of their accommodation.

3.1. Basic Needs

The review showed that ‘basic’ (physiological and safety) needs for young adults, regardless of whether they are care leavers, include education/employment, and the type and suitability of accommodation. These might be especially important for both groups, but some care leavers might struggle with school engagement because their previous home life may have been disruptive, whilst non care leavers may take their supportive network for granted. Also, job opportunities may be limited for some care leavers because they may have had an interrupted education prior to living in care and not being able to catch up once in care, but non care leavers are more likely to have had a smooth transition between the school key stages.

The basic needs that are not measured for care leavers are family and social relationships and the self, as well as way of life and finances. Some domains in the topics of external support (experiencing security and stability) and health and leisure (maintaining good physical health) were also felt to meet basic needs. The self is an especially important topic area to measure because some care leavers might struggle with surviving hardship and having a sense of control that non care leavers might not have experienced because of their different upbringings. For many care leavers, survival is not a metaphor: it is a daily reality. Unlike their peers in the general population, who often transition into adulthood gradually and with family support, care leavers face a sudden ‘care cliff’. At 18, or sometimes younger, they are expected to live independently, manage finances, secure housing, and navigate complex services, often with limited support and little recognition of the ongoing impact of past trauma. While their peers may worry about coursework deadlines or social dynamics, care leavers are more likely to be deciding whether to buy food or pay for electricity. The local authority might need to support them with overcoming some of these obstacles by prioritising their mental health and introducing strategies that are best suited to their individual preferences, such as coping mechanisms and confidence boosts.

3.2. Most Common Domains

The analysis identified 18 domains of success that appeared in four or more sources, indicating their potential significance in assessing outcomes for young adults. Most of the domains we identified as significant indicators of success are not currently measured for care leavers. Of the 18 domains identified in Table 2, only ‘being in employment or work’ or in ‘Higher Education/university’ are directly measured for national statistics, as they fall under the existing metric of engagement in education, training, or employment. However, this existing measure does not capture the quality or stability of employment or educational success. Professional success and achievement and accomplishment are also not directly assessed, nor is whether young people feel a sense of progression in their careers or education. Even when compared to outcomes in the general population, the government’s outcome measures offer a limited view of success. They focus narrowly on education, employment, and accommodation, and fail to capture emotional well-being, stability, or the quality of support—factors that are critical to meaningful long-term outcomes.

The remaining domains—which incorporate close and healthy relationships with family and friends, active citizenship, prosocial orientation, self-efficacy, emotional well-being, sense of purpose, and physical health—are not currently measured at all in the national reporting system for care leavers. However, given the challenges faced by this group, several of these domains are fundamental in measuring and/or understanding care

leavers' success. Research suggests that care leavers are more likely to have an insufficient support network, struggle with self-efficacy and confidence, and experience higher levels of loneliness and poor mental health compared to their peers in the general population. These factors may significantly impact their long-term stability and success, yet they are not captured in current data collection or reporting. Mental health underpins a young person's ability to engage with education, sustain employment, build relationships, and maintain stability in housing, making it a critical—yet often overlooked—determinant of long-term success.

Two areas stand out as especially crucial for care leavers: 'relationships with family' and 'feeling good' (happiness, positive emotions, well-being). Many care leavers lack strong familial support, which can affect their emotional well-being and resilience. Measuring their social connections and mental health could help identify those in need of additional support. Family support plays a key role in fostering resilient outcomes by providing consistent emotional, practical, and financial backing through life's challenges. For many young people, families offer a reliable safety net—a place they can return to during periods of stress, failure, or uncertainty. These relationships help build a sense of security, identity, and belonging, which are all essential for healthy development and long-term success. Yet, care leavers often navigate adulthood without this buffer, making them more vulnerable to setbacks and isolation. Recognising the importance of sustained, trusted relationships is therefore vital when considering what meaningful and enduring success looks like.

Similarly, 'self-efficacy, confidence, and a sense of control' is another key area of development, as care leavers often face significant difficulties in navigating independence without the safety net of family guidance. Many have experienced trauma, instability, and disempowerment throughout their childhoods (through frequent placement changes, limited inclusion in key decisions, and abrupt transitions out of care) which can undermine their belief in their own agency. This lack of consistent support and validation can leave care leavers feeling ill-equipped to manage adult responsibilities or advocate for themselves in unfamiliar systems. Overcoming these challenges requires more than basic service provision: it involves building trusting relationships that affirm care leavers' abilities, offering consistent encouragement, and creating environments where they can practice decision-making safely. Empowerment in this context means not only helping young people to survive but equipping them with the tools, confidence, and emotional security to shape their own futures, on their own terms.

Expanding measurement beyond education and employment to include emotional well-being, self-efficacy, and social support would give a fuller picture of care leavers' lives, outcomes and needs. It would also enable local authorities to deliver more personalised, effective support during the critical transition to independence.

3.3. Education

Four of the papers in our literature review identified attending Higher Education (HE) as a marker of success. The group placed this topic as meeting the needs of esteem and self-actualisation and potentially love and belongingness. Attending HE is part of the current outcome measures for care leavers in England, captured in the item on 'main activity'. However, the group felt that experiences within HE (and not just whether a care leaver attends HE) were important. One gave the example of being at university and becoming more aware of all the things they did not have and that their friends did have. This was talked about in terms of a 'compounding of deficits'—an awareness that the things care leavers are lacking are both additive over time so that they become more obvious in young adulthood, and that they apply across different types of 'lacking' such as material things (such as whether you have the 'good' hair straighteners) and social/emotional things

(such as parents turning up at university to take their child out for a meal). This increased awareness can make the differences feel insurmountable. Care leavers in HE can also be in constant fear of something bad happening, such as becoming homeless if they do not make the grades on a course and then lose their funding.

Other success markers relating to education from the review that might be useful to measure for care leavers were educational attainment (meeting self-actualisation, esteem and safety needs), academic competence (self-actualisation, esteem) and educational engagement (love and belongingness, safety, physiological). A discussion with the group revealed the importance of considering what these markers might actually mean for those with care experience. For example, care-experienced young people are over-represented in both early poverty and special educational needs and disabilities, putting them at risk of poorer attainment. [Sebba et al. \(2015\)](#) argue that progress might be a better measure than attainment for this reason.

A lack of ‘engagement’—whether recorded in an educator’s judgement or via proxy measures such as unauthorised absences—could also be a problematic addition to national measures. The group discussed how disengagement with particular lessons can occur where educators fail to adjust their teaching strategy to allow for the effects of traumatic experiences on young people’s mental health and ability to learn. This can include singling out students to answer questions, strict adherence to behaviour policies, or ignoring how years of non-attendance can leave care-experienced young people lacking the necessary earlier building blocks of theoretical knowledge and practical skills. Disengagement can also relate to specific topics—such as discussions about substance misuse in PHSE lessons, which can be triggering for those with direct experience of its consequences on families. A measure of educational engagement might therefore more accurately be said to measure whether care leavers are being supported to engage with education.

3.4. Employment

Employment is a key indicator of success for care leavers, often representing financial stability, security, and independence. Four of the papers in our literature review identified being in employment as a marker of success. The group placed this topic as meeting basic physiological and safety needs, as well as esteem. As noted above, employment status as a binary (yes or no) measure is currently collected for care leavers in England. Being in employment in consecutive years of data collection might also be taken as a measure of stability, which came up in one paper. The group felt that this measure represented the very basic that is needed, because without a job you cannot have financial or accommodation stability. The group agreed that employment represents the very foundation of stability, as financial security and accommodation depend on having a job.

Other topics from the review in relation to employment (job satisfaction, work/life balance, being successful at work, preparation for careers and resilience when job-searching) are not currently part of the national reporting system for care leavers, though professional success appeared in more papers than employment status. The group noted that some of these factors might represent ‘wants’ from employment rather than ‘needs’: for example, it is only once you have a stable job that you can think about work/life balance. This is not to say that these more ‘desirable’ employment factors should not also be measured for care leavers, just that there might be a hierarchy on what to add to current measures if there is insufficient budget to measure everything.

Work satisfaction might be a particularly important outcome to capture for care leavers and could be measured by asking whether someone is in the job they want or just one that pays the bills. More care leavers must pay their own bills than other young adults, for example, when finishing university and seeing peers go home to live with parents until

they can find more stable work: the group noted that “for us that’s not possible”, and you might take any job you can to pay the rent till later in life.

Preparation for careers is also important for care leavers, but the group noted that this is “massively lacking”. Lots of careers need young people to start preparing while still in school: the example given was medicine, where there are lots of exams and preparation courses which costs lots of money, meaning these are not always open to care leavers. Many professional pathways require preparation from an early stage, such as medicine, which involves costly exams, courses, and work experience. Without financial support or guidance, these careers can feel inaccessible. Sometimes good career preparation is about who you know rather than how good you are, for example, having a parent who can arrange an internship or advise someone on a career pathway. This kind of support is not always available for care leavers, and a useful question to ask might be around who will guide them in what opportunities are available. Personal Advisors often lack the specialist knowledge needed to support young people with specific goals, such as understanding university application requirements or what is needed for a competitive university course. More could be carried out to match care leavers with PAs who are best suited to support their individual aspirations.

Finally, the timing of employment measures related to employment is also important. Recording whether a care leaver has a job or not, offers only a basic snapshot of stability. To truly understand long-term success, we also need to ask whether they are progressing: gaining new skills, advancing in their careers, reaching their potential, and achieving professional growth. Without these deeper insights, current national employment data remains surface-level, missing the fuller picture of ambition, development, and opportunity that defines meaningful success.

4. Discussion

In this study we have reviewed the literature on how ‘success’ has been defined for young adults, comparing these definitions with the statutory outcome measures collected for care leavers in England. In this way, we have questioned whose definition of care leaver success counts, by drawing on our (Kelly, A.A., J.A., E.M., L.M., and C.W.-H.) expertise by experience in the analytical process to centre the views of care leavers. This analysis has revealed the need for definitions of success that consider how the needs of care leavers can differ from those of other young adults in ways that are both *quantitative* (i.e., where care leavers face the same challenges but at a higher rate or a greater level) and *qualitative* (i.e., facing distinct challenges relating to their atypical experiences and circumstances). We consider this now in relation to our four key themes: basic needs, common domains of success, education, and employment.

4.1. Basic Needs

Taking Maslow’s hierarchy of needs as our theoretical framework, we were able to identify the ‘basic’ (physiological and safety) needs that have to be met before we can expect other types of success. The review showed that young adults identified a number of areas of success that would meet basic needs; these included topics covered in the statutory outcome measures for care leavers in England (education, employment and accommodation), albeit in a limited manner; as well as topics that are not (way of life, finances, family and social relationships, the self, and some aspects of external support and health and leisure). It is understandable that national reporting systems might prioritise and focus on basic needs, but we might expect them to take a more holistic approach to the basic needs that are fundamental to care leavers’ success in adulthood.

Statutory outcome measures for care leavers in England cover the topics of education, employment and accommodation in a binary manner (e.g., ‘in education’ vs. ‘not in education’) but do not capture whether education and employment are actually meeting care leavers’ basic needs in terms of keeping them accommodated, warm, fed and safe. While these basic needs are crucial for all young adults, they are especially salient for care leavers, whose experience before, during and after time in care is often characterised by instability in accommodation and unpredictable access to food and other resources. For example, one third of care leavers experience homelessness in the first two years of leaving care ([APPG for Ending Homelessness, 2017](#)).

The suitability of accommodation did not appear in the review, but is measured for care leavers in England; however, this is in the opinion of personal advisors rather than care leavers themselves. Statutory measures also do not capture whether accommodation is affordable, which is a key consideration for care leavers. Those in the private rental market, for example, often lack any family members or others to approach as guarantors, leaving them having to pay thousands of pounds of rent up-front ([Baker, 2024a](#)).

Financial stability more generally is often an issue for care leavers, and can arise from their unique combination of experiences in terms of lack of preparation and support from the financial ‘safety net’ that is often provided by families. Research by [Centrepoin \(2017\)](#) has shown that many care leavers feel unprepared for independent life and the financial management this entails, and often lack the support needed to negotiate this crucial skill in young adulthood. As part of the ‘Your life beyond care’ survey ([Briheim-Crookall et al., 2020](#)), care leavers were asked about their sense of financial security; the question was the same as that which the Office for National Statistics asks of 16 to 24 year olds in the general population and therefore comparisons can be made. They found that, compared to young people in the general population, care leavers were twice as likely to report finding it ‘quite’ or ‘very difficult’ to cope financially. Given the much higher rates of unemployment for those with a disability or long-term health problem, it was unsurprising to find that over a quarter (29%) of these young people were struggling to manage compared with 18% of other young people.

Falling into debt is common for care leavers. The [Centre for Social Justice \(2014\)](#) found that 57% of young people find it difficult managing their money and avoiding debt when leaving care. This is further reinforced by research from the Joseph Rowntree Foundation that outlines how ‘accumulation of debt, threats to their tenancies and their inability to avoid this through careful budgeting’ were issues of continuing concern for care leavers. Unfortunately, very few local authorities monitor levels of debt amongst care leavers, so it is impossible to truly understand the scale of the problem. Care leavers subject to immigration control can face additional debts because of their attempts to resolve their immigration status. Since cuts to legal aid were introduced in April 2013, children and care leavers who have a non-asylum immigration claim now have to pay for their own legal cost ([NCB, 2022](#)). This has left many being forced to resolve their immigration issues on their own or left avoiding the issues altogether. Issues around finance and the life skills falling under what we have termed ‘way of life’ are therefore important basic needs to measure for care leavers.

Supportive relationships are important for all young adults, but care leavers’ experiences can produce a qualitatively distinct need in this area, and it is notable that our group identified family and social relationships as meeting all five levels of need in Maslow’s hierarchy. Entry to care can disrupt relationships with birth family members, especially where siblings are placed apart. Moreover, young people whose care placement is in a new neighbourhood can experience a loss of community ties and sometimes friendships. Added to this, on leaving care, relationships with former carers are often lost. In one

study, about one third of young people in residential care and just over two-fifths of young people in foster care were in monthly contact with their former carer two or three months after leaving care, dwindling to 14% for foster carers roughly nine months later (Wade, 2008). Leaving care can be characterised as a period of instability, and one key factor raised in the literature is the negative consequence of the lack of stable social networks. Stein (2006) highlights the development of appropriate networks—defined as personal (family, friends), professional (support and key workers, health and educational professionals) and pseudo professionals (such as mentors)—as important for fostering protective personal and identity development. Empirical evidence shows that care leavers' well-being is linked to having supportive people in their lives (Briheim-Crookall et al., 2020), and reviews of the care system in England (The Care Inquiry, 2013; The Independent Review of Children's Social Care, 2022) have emphasised that care-experienced young people need the 'golden thread' offered by stable relationships. Indeed, the first of five missions stated in the Independent Review is that "No young person should leave care without at least two loving relationships, by 2027"; yet current statutory measures do not include anything on care leavers' relationships.

The topic of the self, and, in particular, issues of well-being, is also a basic need that is not reflected in the national measures. In a report for the charity Barnardo's, Smith (2017) highlighted concerns about unidentified and unmet mental health needs among care leavers, which can be more prevalent than in the general population. Their case audit of 274 care leavers showed that a mental health need was identified in 46% of cases, and 1 in 4 had experienced a mental health crisis since leaving care. There are also qualitatively different issues with mental health services which are specific to care leavers, including a lack of suitable accommodation for care leavers with mental health difficulties and a lack of knowledge on the part of leaving care teams, both of mental health issues themselves and of services they could refer young people to (Lamont et al., 2009). The effect of poor mental health services for care leavers can be seen across all outcomes from failing to manage independently, to lack of success in education and employment, and to addiction and offending.

Besides diagnosable (and sub-threshold for diagnosis) mental health issues, care leavers are also at risk of poor subjective well-being. A recent survey (McGrane et al., 2024) has shown a greater risk of low life satisfaction in care leavers (26% vs. 3% in the general population). Care leavers with disabilities or long-term health conditions were especially at risk of poor well-being, and this was linked to feelings of loneliness, financial instability and not feeling safe and settled in accommodation.

There are a range of outcomes, then, that might be measured to assess whether care leavers are successful in terms of meeting basic needs. But the review also revealed topic areas where domains of success were largely meeting higher levels of need, including citizenship, goals and interests, and health and leisure. If we are to remain aspirational for care leavers, it is important to capture successes in areas like this that can show individuals are thriving, not just surviving.

4.2. Common Domains of Success

Statutory measures for care leavers also fail to capture some of the most common areas of success identified in the review, indicating a mismatch between definitions of success for young adults and the outcomes the Government has prioritised for care leavers. This includes more meaningful indicators of education and employment, such as suitability and stability (covered further below). Crucially, a broad range of topics connected to social relationships, and the self, emerged in the review but are wholly missing from the measures for care leavers; these are covered above as all were also felt to represent basic needs.

4.3. Education

Being in Higher Education (HE) is captured in the statutory outcomes for care leavers, but other aspects of education that emerged from the review (including academic attainment and engagement with education) are not. We have argued that some of these markers might be insufficiently informative measures of success for care leavers given that they often enter HE from a point of disadvantage: instead, measures that capture care leavers' experiences in education, including how well they are supported, would be more appropriate. Despite HE being considered a 'success' it can come with significant debt, and financial pressures both during and following time in HE, compounding inequalities for care leavers. For many young people, full-time higher education is not the right option, or it can be a step too far from what they are used to. Education is not for everyone so being in education can only be considered a 'success' if that is what fits the individual's goals and needs.

Recent analysis ([Feinstein et al., 2025](#)) shows that by age 22, 14% of care leavers in England have entered HE, compared to 48% of all 22-year-olds; they were also less likely to enter by traditional routes (favouring vocational rather than academic route). Care leavers who attended HE were less likely to have started at the earliest possible age (18–19 years), showing the importance of measuring outcomes over time. However, entering HE does not guarantee completion of study goals: by the same age, 33% of care leavers (compared to 60% overall) had completed a degree; in contrast, 18% of care leavers (compared to 7% overall) had withdrawn from HE without receiving a qualification.

The paucity of care leavers attending university and analysis of the causes is well covered in the literature, and shows that this population faces a distinct set of challenges to accessing HE. For example, the [CDSG \(2020\)](#) highlighted the consistently recurring theme of the lack of out of term-time accommodation. Unless they are given guaranteed 52-week accommodation, at an affordable rate, many care leavers are not able to complete higher education. Interviews with care leavers have shown that a drop in support and instability in housing arrangements when turning 18 could have a detrimental impact on education ([Ellis & Johnston, 2019](#)).

The distinct educational challenges faced by care leavers persist beyond undergraduate level: the Care-Experienced Graduates Project ([Baker, 2024a, 2024b](#)) found that the majority of care leavers who had intended to enter taught postgraduate study decided against this due to the absence of financial support, and for the small number that did progress, half of these withdrew from their programme of study due to financial constraints: "Not having a family home to return to after graduation, the additional expenses incurred to access housing without a family network, and the need to invest time and energy into self-advocacy to receive local authority support were found to be key features of the transition out of higher education for care-experienced graduates." ([Baker, 2024a](#)).

4.4. Employment

Care leavers face greater risk of employment instability than their peers. Recent analysis by [Harrison et al. \(2023\)](#) has shown that by age 20, although similar proportions of care leavers (20.8%) and the general population (19.2%) were in precarious employment, fewer care leavers were in stable employment than their peers (8.7% vs. 20.9%) and many more were economically inactive (38.8% vs. 3.4%). This disparity underscores the need for policies that not only promote employment but also enhance job quality and career development for care leavers.

[Harrison et al. \(2023\)](#) analysis also showed that care leavers were more likely to be receiving out-of-work benefits, even after controlling for demographic and educational factors. The authors concluded that this suggests care leavers face a range of additional barriers to employment; yet the current binary measurement of employment status for care

leavers in England offers a limited perspective on their post-care outcomes. Expanding data collection to include metrics such as job satisfaction, employment stability, income sufficiency, career progression, and access to career preparation resources would provide a more comprehensive understanding of their employment experiences. This enhancement could inform targeted policies and support services, addressing the unique challenges faced by care leavers in the workforce. By broadening the scope of employment metrics and implementing supportive policies, we can better address the specific needs of care leavers, facilitating their transition into stable and fulfilling employment.

As with education, instability can be a barrier to employment for care leavers, making it harder for care leavers to develop the confidence and resilience that are important for a positive career experience. Modern careers often require more complex or 'soft' skills (such as cooperation and flexibility) that cannot be developed simply by extra financial support or work experience placements.

5. Conclusions

5.1. Limitations

Our literature review was not intended to be exhaustive and would not reach the standards of a 'systematic review': we searched a limited number of online databases, only in the English language. However, we included unpublished dissertations and did not place any restrictions on the type of method used in studies. Our focus here was on definitions of success for young adults in general, and the comparisons that could be made against statutory measures, drawing on the expertise of our care-experienced co-authors. As such, we deliberately chose not to search for studies that focused solely on the views of care leavers; it would be an interesting exercise to see how these compared to our analysis. In particular, some groups of young adults who are over-represented among care leavers (e.g., those seeking asylum and those with disabilities and long-term health conditions) might not have had their views captured in the sources we reviewed.

Another group of care-experienced authors might have sorted the topics differently in our initial activity, or come to different conclusions in the analysis; however, our group included a variety of experiences in care and represented a range of demographics.

5.2. Implications

We set out to investigate the issue of who gets to define what success is for care leavers. In terms of statutory measures, at least, this study has shown that at present care leavers' success in England is defined by government—and that the definition is very narrow. We acknowledge that existing measures might be so limited because these are the things that are 'easy' to collect, and because it is necessary to summarise complex information; but we need to be more ambitious for our care leavers. Indeed, recent work has shown that there is an appetite for more meaningful measures from policy-makers and practitioners ([Rees Centre, 2024](#)). This might mean a review of how national measures are complemented by a consistent approach to how local authorities collect, analyse and use information to improve services.

We need a more comprehensive approach to understanding and measuring success using care leavers' own definitions, so that services can support care leavers to thrive, not just survive. This understanding needs to capture both how care leavers' needs might be quantitatively different to other young adults in terms of prevalence or magnitude, but also qualitatively different because of some atypical experiences and circumstances. The current statutory measures are not exploring what care leavers are experiencing on a deeper level, such as how they are actually feeling and what worries they may have.

A broader definition would also allow us to acknowledge that rather than adopting a homogeneous view of success, care leavers—like other young adults—differ in terms of what is important to them in life, their hopes and expectations, and the challenges and support that can influence whether they meet their goals (Häggman-Laitila et al., 2018). This is especially pertinent for care leavers experiencing an intersectionality of challenges, such as those with a disability or those seeking asylum.

Our definition should also acknowledge that ‘success’ for care leavers can change over time, and that this can be tied to ages (e.g., the drop in support at age 18) and stages (e.g., the completion of an undergraduate degree). Care leavers’ success is challenged by a series of ‘care cliffs’ when support is withdrawn, but as ‘corporate parents’, local authorities should not stop being parents when care leavers turn 18 or 21: being a parent is a lifelong commitment.

This important acknowledgement that individual success can be enabled or denied by the support received from others brings us to a final point about defining success for care leavers. Ellis and Johnston (2024) argue that while individual successes should be celebrated, a greater focus is needed on the structural and systemic barriers to success that care leavers can face. In moving towards a definition of success that centres the voice of care leavers, we need to consider (and, if possible, measure) the contextual factors that often make care leavers’ success so hard-fought.

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