

Out-of-Home Care and Educational Outcomes

Prevalence, Patterns and Consequences

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Abstract

The aim of this thesis is to examine educational stratification in the context of out-of-home care (OHC; foster family care, residential care) and to place one of society's most vulnerable groups in the fields of social stratification and family complexity research. About 5% of the Swedish population experience OHC during childhood or adolescence. OHC is not only a matter of protecting children and youth; it is also intended to improve future opportunities and compensate for adverse childhood factors. However, a vast body of international research, including Swedish studies, shows that a substantial proportion of young people from OHC have poor school performance and low educational attainment as adults. Furthermore, this is strongly associated with their high risk of other adverse outcomes in life. To date there are no signs of improvement in this regard, and the disadvantage of having a low education is increasing in today's knowledge-based society.

Many previous OHC studies have relied on small, local samples, and longitudinal data are often lacking. In this respect, Swedish researchers are well positioned to contribute to the field through research based on our high-quality population registers. The main data source in this thesis – the Child Welfare Intervention Register – covers half a century of OHC data. Based on these data, an overview of OHC prevalence in Sweden and patterns of educational outcomes are presented in the introductory chapter. The thesis further consists of five individual studies investigating different aspects of the transition through the educational system to adult life among children and youth from OHC. Two of the five studies focus on children who spent most of their childhood in OHC and for whom society has assumed a long-term commitment of parental responsibilities.

The descriptive data show that patterns of poor educational outcomes in the OHC population have remained stable as long as they can be followed in the registers. Study I shows that youth who exited long-term care were disadvantaged as compared to youth without OHC experience, both in terms of educational attainment and regarding the strong association between poor school performance and other adverse outcomes in young adulthood. Up to 55% of their excess risks of later psychosocial problems were statistically attributable to dismal school performance. Study II shows that 54% of clients in substance-misuse treatment in the 1980s had been in OHC, half before their teen years and half as teenagers. In this group, OHC was associated with excess mortality during the 30-year follow-up from exit from treatment, with statistical significance mainly for females who had entered OHC before their teens. School failure was more common in the OHC population than for misuse clients without OHC experience, and was strongly associated with the excess mortality of females. Two Nordic comparative studies (Studies III and IV) show that the OHC population had a substantially higher risk of not completing upper-secondary education across countries, and that poor performance in primary school inflicted a greater risk in OHC youth of being NEET in young adulthood than for their peers without OHC experience. Study V shows that the intergenerational transmission of education was weak and inconsistent in the foster care setting, and that living in a highly educated foster family did not have a robust positive effect on foster children's educational outcomes.

Keywords: *out-of-home care, foster care, foster parents, school performance, educational outcomes, intergenerational transmission, Sweden, Nordic countries.*

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