Research Paper Summary

In 2021-22, the Supports for Student Learning Program (SSLP) within ESDC contracted seven research projects to better understand barriers and facilitators to educational attainment in Canada. Each project was led by an external researcher(s) and involved a literature review, a scan of provincial/territorial programs and services, and a discussion paper. The objective of this research series was three-fold:

1. *Build the knowledge and evidence base and refine the SSLP's understanding of the various groups of clients served (i.e., the barriers they face);*
2. *Improve the SSLP's capacity to engage in targeted outreach with groups and organizations that serve specific groups or underserved populations (e.g., Black and racialized students, Indigenous students, 2SLGBTQI+ students, youth in care, youth experiencing homelessness, students with disabilities, and youth facing a digital divide);*
3. *Inform future directions for the SSLP (e.g., to identify priority streams supporting specific populations or partners who have expertise in addressing specific barriers).*

Below is an overview of the research project examining barriers and facilitators experienced by youth in care. This project was completed in April 2022.

Investigating Barriers to Education Faced by Youth in Care

CONTEXT

Youth in care face significant barriers that contribute to poor educational outcomes, including lack of continuity of care/frequent placement and school changes, and multiple appointments. These barriers often lead to higher absenteeism rates, delays in credit transfers, lack of access to school and tutoring supports, and poor monitoring of educational progress. Frequent placement changes can make it difficult for youth in care to develop strong relationships with teachers and peers. In addition, challenges related to lack of continuity of care and separation from siblings result in increased rates of mental health disorders.

Indigenous youth account for approximately 50% of all youth in care in Canada. In Manitoba, approximately 90% of youth in care identify as Indigenous. Indigenous youth in care have poorer educational outcomes than non-Indigenous youth in care. This may be due to lower household incomes, lack of adequate housing, less educational and social services, intergenerational trauma, mental health and parental

substance use associated with residential school legacies, systemic racism, and lack of a culturally appropriate curriculum.

Using a variety of qualitative and quantitative sources, this project addressed the following research questions:

1. What are the barriers to education faced by youth in care?
    a. What factors may prevent youth in care students from fully engaging in their studies and how might these barriers affect completion of high school as well as transitions to and persistence in post-secondary education?
    b. Beyond barriers that may be experienced in the formal education system, what external factors may affect youth in care students' attachment to their learning and social networks, thereby contributing to their overall sense of belonging and academic motivation?
    c. What recent trends are emerging as challenges facing this underserved population? Particularly following and during the COVID-19 pandemic, what barriers have recently changed, been highlighted, or worsened or improved?
    d. How do varying identity factors (e.g., gender identity, Indigenous identity, mental or physical disability, living in a low-income household, newcomer status, visible minority, racialized youth, living in a rural or remote area, etc.) intersect to influence educational outcomes and experiences among youth in care?
2. What services are provided and/or investments have been made by provincial and territorial governments to reduce these barriers? What gaps or overlaps exist?
3. What recommended actions could Employment and Social Development Canada's SSLP take to reduce these barriers, enhance learning experiences, and overall improve educational outcomes for youth in care?

ABOUT THE RESEARCHER(S)

This document was co-authored by Dr. Jacqueline Gahagan, Catherine Armour, Dr. Melanie Doucet, Dr. Varda Mann-Feder, and Dr. Deborah Rutman in collaboration with Valentina Solkin.

Dr. Jacqueline Gahagan, Mount Saint Vincent University
- Dr. Gahagan holds a PhD in Medical Sociology, a Master of Arts in Sociology and Bachelor of Arts degrees in Sociology and Anthropology. They have served as the Head of the Health Promotion Division and Interim Director of Dalhousie's School of Health and Human Performance, as Co-Director of the Atlantic Interdisciplinary Research Network in the Social and Behavioral Aspects of HIV and HCV, as a Founding Fellow of the MacEachen Institute for Public Policy and Governance, and Director of Dalhousie's Gender and Health Promotion Studies (GAHPS) Unit,

which conducts multisectoral health promotion research and health policy analyses in relation to gender and sex as key determinants of health. Dr. Gahagan is a member of the LGBTQ community, as well as a former youth in care, and has witnessed social injustices in these contexts. They have has worked in public health and on a wide array of health inequities including in HIV and HCV prevention, care, treatment and support.

Catherine Armour, Dalhousie University

- Ms. Armour is a Master of Arts in Health Promotion candidate at Dalhousie. She holds a BSc in Health Promotion (Honours) and is the founder of the Ninety Percent Society (2020). Ms. Armour has experience in research, program planning, and communications. She is passionate about mental health, equity, and harm reduction.

Dr. Melanie Doucet, Child Welfare League of Canada

- Dr. Doucet completed her Master in Interdisciplinary Studies at the University of New Brunswick (UNB) and her Bachelor in Applied Arts in Criminal Justice at St Thomas University. Prior to pursuing her graduate work, she worked as a Research Assistant at the Canadian Research Institute for Social Policy (CRISP) at UNB alongside Dr. Doug Willms, and most recently as a Project Officer for the Government of New Brunswick's Integrated Service Delivery for Children and Youth project until July 2014. Dr. Doucet has also been involved in various youth engagement initiatives during her time in New Brunswick, such as the N.B. Youth in Care Network (NBYICN), and is very passionate about providing youth currently and formerly in care with opportunities to voice their opinions, influence government policies and approaches to service delivery.

Dr. Varda Mann-Feder, Concordia University

- Dr. Mann-Feder has been a full-time faculty member in Applied Human Sciences at Concorida since 1992. She taught as a sessional instructor in Psychology at Concordia between 1984 and 1992, and has worked as a Consulting Psychologist in the child welfare system in Montreal since 1976. From 2004 until 2007, she served as Chair of Applied Human Sciences, and from 2000 until 2007, she was Editor of the Journal of Child and Youth Care Work. She also served as the founding Graduate Program Director for the Diploma in Youth Work.

Dr. Deborah Rutman, Prinicpal, Nota Bene Consulting Group; University of Victoria

- Dr. Rutman has considerable experience as a consultant and has been an Adjunct professor with the School of Social Work and the Faculty of Human and Social Development at the University of Victoria since 1991. She has extensive experience in conducting program evaluation, qualitative, quantitative and participatory research, and project management. Dr. Rutman's research and practice career initially focused on issues affecting seniors. In the past two decades, she has become known nationally for her work on the support needs of

women, youth, parents and families living with Fetal Alcohol Spectrum Disorder (FASD) and for her work on youth from foster care. Projects involve women and families who have experienced violence, trauma, homelessness, and substance use, and often address issues of cultural safety, trauma-informed practice, and child welfare.

KEY FINDINGS

Youth in care face a number of barriers to educational success, leading to poorer educational outcomes

- The existing North American literature indicates that individuals with experience in the child welfare system, including the foster care system, disproportionately face a variety of intersecting barriers to post-secondary education (PSE). These barriers are often related to:
    1. learning disabilities and complex trauma;
    2. mental illness, and perceived lack of preparation for PSE;
    3. poor support networks, and unstable foster care; and
    4. school placements, social stigma, and financial challenges.

- The researchers applied a social ecological framework and identified specific barriers at the institutional, societal, interpersonal, and intrapersonal levels.

Institutional barriers

- **Narrow and varying eligibility criteria for programs that support access to education:** For instance, care leavers often prioritize addressing their immediate needs (establishing economic and residential autonomy), prior to completing their education. In turn, strict age limits on programming can bar older care leavers from accessing the support they need to return to studies. In addition, some programs are restricted to youth from care who either self-identify as having a disability or mental health diagnosis or who are willing to commit that they require ongoing help from the child welfare system.

- **Document requirements**: care leavers often have difficulty retrieving documents needed to qualify for supports offered by post-secondary institutions, such as tuition waivers and scholarships. Many experience periods of homelessness and/or housing precarity and, as a result, do not have access to such documents.

- **The need for services to be better promoted and more accessible:** Programs to promote participation in PSE among care leavers cannot succeed if youth do not know how to access them. Both the international literature and the authors' review of government-sponsored programs in Canada indicate that even when targeted programs exist, awareness/accessibility remain key obstacles.

Societal barriers

- **Stigma:** Youth in care frequently develop an extreme sense of self-reliance. The internalized shame associated with being from care has been cited as an underlying cause of a reluctance to seek help at school, disengagement, dropout, and a tendency to isolate from their peer groups in the community. This not only reinforces societal stigmas, but reinforces the stigma among youth in care themselves.

- **Poverty:** Youth in care face enormous obstacles to financial well-being, with a high percentage experiencing unemployment and underemployment. In this context, care leavers may see PSE as an unaffordable luxury. Other poverty-related issues include housing instability, food insecurity, a lack of access to transportation and digital poverty. Without the income necessary for reliable internet and suitable equipment, youth from care may not be able to access information or apply for services online.

Interpersonal barriers
- **Caregivers and case workers may not support or promote PSE:** Young people have reported that, due to competing priorities, caregivers may not discuss continuing education as a goal for those in care. Even in the absence of "other issues" to focus on, caregivers may perceive the youth aging out of care to not have the ability to attend post-secondary, otherwise referred to as "the soft bigotry of low expectations".

Intrapersonal obstacles
- **Competing priorities:** Youth leaving care often lose support abruptly and struggle to survive. They are often left facing the need to cope with living on their own, managing their own finances, parental responsibilities, supporting younger siblings and/or coping with tasks of daily living. Even youth-in-care who strive for PSE may not have the time or energy to pursue this option.

- **Social isolation and challenges with substance abuse and mental health:** It has been widely documented that youth with care experience face higher rates of personal challenges than their peers. Youth from care may experience high rates of substance abuse, PTSD and mental illness and may have had little access to treatment both before leaving care and when on their own. These challenges may preclude educational aspirations and interfere with a young person's capacity to learn.

- **Learning disabilities and underachievement:** Youth-in-care have higher than average rates of learning disabilities. Without support for different learning styles or other ways of measuring educational success, this can result in lower grade performance and reduced access to PSE.

- **Problems with self-efficacy and confidence:** Due to the many obstacles listed above, youth from care may have low self-confidence, in particular due to

childhood trauma. Not having proper supports throughout their schooling, moving schools frequently or having repeated problems in school can compound with low self-esteem leading youth to doubt their potential or to hate the education system.

Multi-faceted and intersecting challenges lead to poorer educational outcomes among care leavers
- In comparison to their non-fostered peers these individuals are less likely to:
    1. Graduate from high school,
    2. Attend post-secondary institutions, and;
    3. Complete post-secondary degrees.

Some sub-populations of youth in care are at greater risk of experiencing barriers and negative outcomes
- First Nations, Inuit, and Métis youth, Black and racialized youth, youth with disabilities and 2SLGBTQI+ youth 'aging out' of care are at an even higher risk of experiencing these systemically-produced negative outcomes due to their overrepresentation in the child welfare system. Thus, it is important for programs and supports targeted to youth 'aging out' of care to adopt intersectional and anti-oppressive approaches in terms of access implementation and accountability.

Youth in care in Canada face specific challenges
- Key challenges in the Canadian context include the need for: improved data collection and data comparability; ongoing evaluations of existing interventions; and increased accountability and transparency of efforts at the provincial/territorial and national levels to better understand the ways in which existing programs, policies, and approaches are supporting the educational outcomes of individuals with experience in the child welfare system.

- Moreover, there is currently a lack of holistic, wraparound supports provided in Canada, and the types of supports available widely differ between jurisdictions. In addition, Canada does not have a nation-wide accountability framework that guarantees the provision of post-care supports.

Wraparound services are essential to youth in care and care leavers' success in PSE:
- The multiplicity of barriers to education experienced by individuals with experience in the child welfare system underscores the necessity for a unique and equitable approach in addressing their needs.

- The literature overwhelmingly indicates that, in order to access, stay enrolled in, and successfully complete PSE programs, students from care require a range of holistic or 'wraparound' supports beyond tuition-related financial assistance. These include:

1. *Service/support coordination (i.e., a Single Point of Contact (SPOC) approach)*
   - A SPOC position/role is one of the most widely recommended components of wraparound services for care leavers. The SPOC serves as the "go-to person" for care leavers, providing direct assistance and/or coordination with financial aid, housing, health, mental health, academic support, or linkages with other organizations. This person would be informed on and employ a relationship-based, trauma-informed and culturally safe approach tailored to individual needs.

2. *Priority, year-round, on-campus housing*
   - Housing is a key determinant of health and is foundational to the retention and success of care leavers attending PSE, especially in the case of individuals who may not have a home to return to when classes are not in session.

3. *Supplementary financial support (e.g., bursaries, cost-of-living scholarships, etc.)*
   - Providing low-barrier emergency financial aid that includes funds for personal emergencies is a key element in providing wraparound support to care leavers. Youth may already be hesitant to reach out for financial assistance, and may already be experiencing financial hardships; providing cost-of-living and emergency assistance is crucial.

4. *Responsive health and mental health resources*
   - Investment in trauma-informed mental health services is needed. Ideally, there should not be caps on counseling sessions for care leavers and flexibilities should be in place to accommodate complex needs. Both mental and physical health resources should also be accessible, trauma-informed and not reliant on previous knowledge of these systems.

5. *Childcare*
   - Care leavers with dependants would benefit greatly from priority access to low- or no-cost, on-campus quality childcare.

6. *Proactive academic supports, including advising, coaching and/or tutoring*
   - To prevent academic issues possible withdrawal from PSE, tailored academic advising and support should be available to care leavers at the onset of their studies.

7. *Opportunities for peer connections and peer mentoring*

- Opportunities for peer-to-peer engagement both on and off-campus can promote students' sense of connection to PSE and their feelings of belonging. Examples of peer-related opportunities include: having the SPOC role be filled by someone with experience living in care; having a Care Leavers Advisory Committee to guide development and implementation of supports/services/resources; coaching or tutoring younger students; and assisting with care leaver student recruitment.

8. *Opportunities for culturally-grounded learning and community connections*
    - Some youth are not able to engage in their own cultures or lack knowledge of them. Cultural learning opportunities are therefore an important element of education-related supports for young people in care, as they create a sense of community and involvement for those involved.

Efforts are underway to promote standardized supports for youth in care and care leavers in Canada

- In October 2021, the Child Welfare League of Canada published the [Equitable Standards for Transitions to Adulthood for Youth in Care](#) report. It outlines key actions that need to be implemented by federal and provincial/territorial governments, as well as other stakeholders, to support more equitable transitions for youth in care across the country. The Equitable Standards are presented across eight transition pillars, which define the areas in which youth in care need support to ensure a successful transition to adulthood. The 8 pillars are as follows:

    1. Financial
    2. Educational & Professional Development
        - This involves tailoring supports and programs to the diverse and particular needs of youth in care, while recognizing the inherent trauma they carry as survivors of abuse, neglect and displacement. Key supports under this pillar must be provided **before, during and after** a young person pursues post-secondary education and/or professional development opportunities, with mentorship and supports provided in secondary school to foster successful completion of high school. In addition, all key supports should be easily accessible at any time, at any level, and without restrictive eligibility criteria.
    3. Housing
    4. Relationships
    5. Culture & Spirituality
    6. Health & Wellbeing
    7. Advocacy & Rights
    8. Emerging Adulthood Development

- A full list of the 19 supports associated with the Education & Professional Development pillar can be found on page 15 of the Equitable Standards report.

KEY RECOMMENDATIONS

The report included numerous recommendations, the majority of which were geared towards the post-secondary and child welfare sectors. Key recommendations are summarized below.

Recommendation for the SSLP

- Create a joint federal-provincial/territorial action plan, with concrete timelines, to remove barriers to access and promote successful engagement/completion of PSE for care leavers.

Recommendations for post-secondary institutions

PSE aspirations

- Encourage collaboration between PSIs and placement agencies to plan on-campus visits and activities that demystify higher education for youth in care of all ages.

- Create targeted outreach initiatives where PSIs hold activities designed to increase aspirations for school-aged youth in care, high students in care, and their workers.

Affordability

- Broaden eligibility criteria for tuition waivers and scholarships so that opportunities are framed as entitlements that are flexible, open-ended, and for care leavers of any age.

Application process

- Ensure automatic entitlements to support for all care leavers regardless of their health needs and challenges, and with no requirement that they initiate a request based on their need for help.

- Reduce application requirements for documentation and create user-friendly application forms and processes.

- Assign a person or position at all PSIs to be available to youth in/from care to provide assistance or guidance to them in the application process and during the course selection/registration process.

- Hire care-experienced recruitment officers in PSIs who engage in active outreach and mentorship with both youth in care and former youth in care in collaboration with the Canadian network of care leavers' associations.

On-campus wraparound services
- Create and implement a suite of 'wraparound' services and resources for care leavers, including: housing; supplementary financial support; health and mental health resources; low cost/no-cost childcare; academic supports; opportunities for peer connection; and opportunities for culturally-grounded learning.

- Fund and put in place a "Single Point of Contact" service/support coordination position at all PSIs, as a foundational element of the wraparound services. This person would be available to support care-experienced students to navigate administrative processes and to access academic and non-academic resources.

Housing and health policies
- Ensure that housing policies prioritize care-experienced students to be able to access year-long, on-campus housing.

- Encourage PSIs to opt-in to full-year health coverage so that students can access health services even during the periods in the year when they aren't enrolled in courses.

Professional development
- Develop and provide annual professional development for PSI faculty and staff regarding the experiences and lived realities of students in/from care; encourage all staff employed in Student Services, Housing Services, and Health Services to participate. Engage care-experienced students to co-develop and co-facilitate workshops.

Cross-cutting recommendations
- Equip every young person from care with appropriate computer equipment so that they can continue to access opportunities and entitlements, as well as participate in digital culture and maintain social connections.

- Equip every young person from care with free or low-cost internet access.

- Maintain up-to-date databases that are easily accessible to foster parents, workers and young people with concrete and clear information about programs to promote access to PS.

- Showcase leadership and initiative by endorsing and committing to meeting the Equitable Standards for Transitions to Adulthood for Youth in Care. Participate in the piloting of the Equitable Standards Evaluation Model as a first step, once the evaluation model has been released (Fall 2022).

- Develop post-secondary and professional development programs and supports that are created to fill gaps in resources, fulfill the equitable standards and meet

the needs of youth in care. Youth in and from care should be involved at all stages (i.e., development, implementation and evaluation) as key stakeholders and experts on their own lives and compensated for their time and valuable expertise.

- Ensure that federal, provincial and territorial jurisdictions undertake a compilation of existing resources available to youth in care (similar to what has been done in BC with https://agedout.com/), in collaboration with local youth in care networks (or youth-in-care centred community-based organizations in jurisdictions where youth in care networks do not yet exist).

CONTACT

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