

Childhood in care

We are failing those who spend their childhood in care. Here's how.

Slide deck accompanying notes.

Slide 1.

Through the research, our goal was to describe the scale of health inequalities for children cared for in different places and whether things have got better or worse over time.

Slide 2.

The ONS Longitudinal Study (ONS LS) contains linked census and life events data (such as births, deaths and marriages) for a 1% sample of the population of England and Wales. It contains records on over 500,000 people living in England and Wales on the day of each census. The ONS LS has linked census information since 1971 for people with a birthdate on one of four selected dates in the year. New ONS LS members are added to the study on 1981, 1991, 2001 and 2011 if they are born on one of the four birthdates.

Slide 3.

These very large sample sizes help us to get reliable estimates of the average health for people who have been in care.

Slide 4.

Falling rates of premature mortality in the general population have not been mirrored in the care experienced population. Rather, the opposite is true, with much higher rates of premature mortality for those who were in care in 2001 than in 1971. The main causes of death among people who had been in care were largely preventable.

Slide 5.

There was a stepwise increase in the probability of poor self-rated health, with those who had lived with their parent(s) having the best health and those cared for in a residential home having the worst health. But more than that, the differences widened as people aged.

Slide 6.

Family care (also known as kinship care) was associated with better adult health and wellbeing than foster care, which in turn was related to better outcomes than residential care. Promoting kinship care is a public health measure, but placement decisions need to also consider prior experiences and circumstances that might counter the potential benefit from kinship care.

As well as mental health MOTs, we recommend that adults who have been in care have priority access to mental health services.