

Pathways into and through higher education for unaccompanied asylum-seeking children in England

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Key findings:

- Overall, 14% of UASCs in this study participated in higher education
- Women, Black African and Southern Asian UASCs had higher participation rates, as did those who spent over four years in care
- UASCs tended to enter higher education somewhat older than other care-experienced young people
- The majority of UASCs entered higher education with vocational qualifications and/or through work-based learning routes
- Participation was concentrated in 'lower-status' universities in large cities – UASCs were particularly well represented in engineering and technology subjects
- UASCs had strong degree outcomes, to date, relative to other care-experienced young people

1. Introduction

Unaccompanied asylum-seeking children (UASCs) are defined as those young people who arrive in England without their parents or other adult family members and claim asylum. Considered to have 'absent parents', they are taken into the children's social care

system until the age of 18, being housed in supported accommodation, with foster parents or in residential care settings to ensure their safety¹.

For the purposes of this report, the pathways taken by UASCs are compared with those for other care-experienced young people as the closest comparator group for which data are readily available². As participation in higher education for care-experienced young people has been relatively well researched, this offers a useful, but imperfect, counterpoint.

UASCs are generally aged 16 or 17, although some arrive at younger ages (e.g. with older siblings); over 90% are young men and the most common countries of origin currently include Sudan, Iran, Afghanistan, Eritrea, Somalia and Iraq³. Their reasons for claiming asylum are diverse, but include fleeing war, violence, persecution or political oppression.

The term 'UASC' represents an official status that is formally recorded within the National Pupil Database (NPD). We recognise that some organisations prefer other framings, but we have retained the official terminology for definitional clarity.

This document is presented as a 'working paper' to allow for the rapid publication of interim findings without the delays associated with peer review. It is not intended to be authoritative and, as such, the findings reported herein may be amended or superseded by future documents.

2. Dataset

We secured access to data through the Department for Education and the Office for National Statistics (ONS)⁴. These data comprised all young people who attended school and were in care in England between 2011/12 to 2020/21, including UASCs⁵. These data were anonymously matched with data from the Higher Education Statistics Agency (HESA) for the academic years between 2012/13 and 2021/22. This enabled us to determine which young people participated in higher education in the UK at any point during this period and

¹ See <https://explore-education-statistics.service.gov.uk/find-statistics/children-looked-after-in-england-including-adoptions/2025>.

² For example, no national data are available for young refugees or other young people with a history of migration.

³ See <https://www.gov.uk/government/statistical-data-sets/immigration-system-statistics-data-tables>.

⁴ This work was undertaken in the ONS Secure Research Service using data from ONS and other owners and does not imply the endorsement of the ONS or other data owners.

⁵ An important caveat in this analysis is that many UASCs do not attend school and so are absent from this dataset. This includes those arriving close to their 18th birthday and/or those with limited English language skills who are typically directed to further education courses.

their subsequent outcomes⁶. We removed young people who were too young to have participated in higher education within the relevant time period and very small numbers with incomplete, duplicate or contradictory records.

In keeping with the disclosure policies required by the ONS, we have suppressed all counts less than 20, rounded all counts to the nearest 10, and rounded all percentages to the nearest whole number. These steps ensure that no information about individual young people can be inferred from our analysis. Due to rounding, values may not sum to the total or to 100%.

The total number of young people in the dataset is **117,710**, of which 64,790 were men and 52,920 were women. Of these, **5,380** were UASCs, comprising 4,830 men and 550 women; this is consistent with official data reporting that a large majority of UASCs are young men.

3. Variables used in analysis

Table 1 shows the variables extracted for use in the analysis, either from the Children Looked After element of the NPD or the HESA dataset. In the rare instances where there were conflicts between how a young person was recorded (e.g. their ethnicity), the data in the final year's record was used.

Table 1: Variables used in analysis

Variable	Source	Notes
Sex	NPD	Recorded as binary
Ethnicity	NPD	Recorded according to prevailing categories ⁷
Time spent in care	NPD	Recorded as a rolling tally of months
Age on entry to higher education	NPD/ HESA	Calculated from recorded age and passage of time before first entry
Disability status	HESA	Recorded as having a disability on entry to higher education
University	HESA	As recorded for the first entry into higher education

⁶ The data available do not include higher education delivered in further education colleges, by private providers or outside the UK. All the rates calculated herein should therefore be viewed as underestimates.

Subject	HESA	Categorised from code number of first course
Entry qualifications	HESA	Simplified from the recorded qualifications used to secure place
Degree outcomes	HESA	Calculated from qualification received and degree classification (where appropriate)

4. Participation in higher education

For the purposes of this analysis, a young person was considered to have participated in higher education if they were recorded as attending in at least one academic year during the time period; we will later address issues of completion and withdrawal.

Overall, 740 UASCs accessed higher education, representing a participation rate of **14%**. The majority of these (690 UASCs) started on undergraduate degree programmes, with the remainder mainly pursuing sub-degree programmes (e.g. Foundation Degrees or Higher National Diplomas). In total, 12,520 other care-experienced young people participated in higher education, representing a participation rate of 11%.

Among UASCs, the participation rate was notably higher for women (36%) than for men (11%); the total numbers were 200 and 540, respectively. These participation rates compared with figures of 16% for women and 7% for men among other care-experienced young people.

In analysing patterns by ethnicity, we found it was necessary to combine categories to ensure adequate numbers for comparison. In Table 2 below, the first figure denotes the total number of people and the figure in brackets is the participation rate. Among UASCs, participation rates are highest among Black African (24%) and Southern Asian (20%) young people. At 6%, they are lowest among White UASCs.

UASCs have lower participation rates across all the ethnic groupings used; their higher overall rate reflects the relative preponderance of groups with higher rates. For example, people of Black African ethnicity made up 18% of UASCs, but only 4% of other care-

⁷ See <https://www.ethnicity-facts-figures.service.gov.uk/style-guide/ethnic-groups>.

experienced young people. Conversely, only 12% of UASCs were White, compared to 76% of other care-experienced young people.

Table 2: Participation rates by ethnicity⁸

Ethnicity	UASCs	Other CEYP
Black African	990 (24%)	4,580 (31%)
Other Black ethnicities	110 (12%)	10,200 (16%)
Southern Asian	150 (20%)	4,180 (26%)
Other Asian ethnicities	1,780 (12%)	3,010 (22%)
Other/not known	1,730 (11%)	4,890 (18%)
White ethnicities	630 (6%)	85,480 (8%)
TOTAL	5,390 (14%)	112,340 (11%)

We analysed the relationship between total time spent in care and participation in higher education; this is shown in Table 3 below.

Table 3: Participation rates by time spent in care

Total time in care	UASCs	Other CEYP
Less than 12 months	280 (14%)	35,990 (10%)
12 to 23 months	710 (11%)	14,150 (11%)
24 to 35 months	1,770 (11%)	10,750 (11%)
36 to 47 months	1,370 (11%)	8,340 (11%)
48 months or more	1,260 (22%)	43,100 (12%)
TOTAL	5,390 (14%)	112,340 (11%)

⁸ The 'Southern Asian' group includes young people recorded as having Indian, Pakistani and Bangladeshi ethnicity. The 'Other Asian' group includes young people recorded as having other Asian ethnicities (including mixed heritage) – importantly for UASCs, this group includes those from Central and Western Asia (e.g. Afghanistan, Iran and Iraq). The 'Other/not known' group is likely to

In general, there was little relationship between the total time spent in care and participation in higher education. Among UASCs, those who had spent four or more years in care did have substantially higher participation rates, perhaps reflecting the accumulated benefit of greater stability and more time to improve English language skills and adjust to the English education system.

5. Entry to higher education

Drawing on the data collected on initial entry⁹ to higher education, we are able to build a profile of UASC entrants relative to other care-experienced entrants. The first comparison is by age, as shown in Table 4. As can be seen, UASCs accessing higher education tended to do so at a later age than other care-experienced learners. It should be remembered that, with a pooled dataset, some of the young people contained therein will not yet have reached the older age ranges and so the figures given in Table 4 are necessarily biased towards the younger ages.

Table 4: Entry profile by age

Age on first entry	UASCs	Other CEYP
18 or under	27%	45%
19	32%	23%
20	20%	13%
21	9%	7%
22	4%	5%
23	3%	4%
24 to 28	4%	4%
TOTAL	100%	100%

Of the UASC entrants, 8% were recorded as having a disability, including 4% with specific learning difficulties and 3% with mental health issues. This compares with 26% of other care-experienced entrants, including 6% with specific learning difficulties and 10% with mental health issues. There was therefore a markedly different profile of disability. Only 1% of UASC entrants were recorded as having a disability other than specific

include young people with North African heritage and those whose ethnicity is not recorded; this may also include some young people from Central and Western Asia.

⁹ Some young people had multiple entries (e.g. restarting at another institution or progression to new course), but the first instance was used for analysis.

learning difficulties or mental health issues (mainly comprising physical/sensory impairments and long-term health conditions), compared to 10% of other care-experienced entrants.

UASC entrants were slightly more likely to attend a 'high status' institution¹⁰ than other care-experienced young people (19%, compared to 15%). There was no difference in the status of institution attended between men and women. UASC tended to be concentrated in large teaching-intensive institutions in major cities; unlike other care-experienced learners, few were studying through the Open University.

Table 5 shows the subject areas pursued. Social science subjects predominated for both UASCs and other care-experienced learners. Compared to other care-experienced young people, UASCs were substantially more likely to be studying engineering and technology subjects (27% and 10% respectively) and less likely to be pursuing humanities and communications subjects (8% and 20%, respectively).

Table 5: Entry profile by subject area

Subject area	UASCs	Other CEYP
Social Sciences	41%	46%
Engineering/Technology	27%	10%
Science/Medicine/Health	24%	25%
Humanities/Communications	8%	20%
TOTAL	100%	100%

Finally, we turn to the qualifications used to secure a higher education place; these are shown in Table 6.

Table 6: Entry profile by entry qualifications

Qualification type	UASCs	Other CEYP
A Levels	28%	28%
Access to HE course	5%	6%
Other L3 qualifications	57%	51%
L2 or lower qualifications	7%	13%
Previous HE qualification	4%	3%
TOTAL	100%	100%

The qualification profiles between the two groups were broadly similar. In both instances, the most common

route was through Level 3 qualifications that were neither A Levels, nor Access to HE courses; predominantly BTECs and other vocational qualifications. Slightly more UASCs used this route (57%, compared to 51%), while somewhat more care-experienced young people used Level 2 or lower qualifications (13%, compared to 7%), usually representing work-based learning pathways. Small numbers of both groups had previous higher education qualifications, most likely acquired in further education settings. There were no discernible differences in entry qualification profiles by sex or ethnicity.

6. Higher education outcomes

Finally, we turn to analyse the outcomes from the young people's higher education experiences. To ensure comparability, we focus solely on those whose first engagement with higher education in the pooled dataset was an undergraduate degree. These numbered 690 UASCs and 11,380 other care-experienced young people – i.e. over 90% of the overall higher education entrants in both groups.

For each individual, we determined whether they had completed their degree, left higher education or were still studying. Among those who had left higher education without completing a degree, we separately identified those who had received a lower qualification (e.g. Certificate or Diploma). Among those who had completed their degree, we identified the degree classification that they had received. This enabled us to create the summary found in Table 7.

Table 7: Degree outcomes to date

Outcome to date	UASCs	Other CEYP
Completed degree		
- First class	10%	6%
- Upper second class	20%	15%
- Lower second class	13%	9%
- Third class or pass	4%	2%
Received lower qualification	7%	8%
Left without qualification	12%	17%
Still studying	33%	43%
TOTAL	100%	100%

¹⁰ Using Clusters 1 and 2 from <https://doi.org/10.1080/03054985.2015.1082905>.

Overall, 48% of the UASCs in the dataset who started an undergraduate degree had completed it, including 30% at first or upper second class. A further 33% were still studying as of the 2021/22 academic year. The remainder had left their studies, with 7% receiving a lower qualification and 12% not being awarded any qualification. It is important to remember that those leaving during the period covered by the dataset may re-enter higher education later. We conducted subgroup analyses, but there were no notable relationships between outcomes and either sex or ethnicity.

These outcomes are somewhat stronger than for other care-experienced students in the dataset. Among the latter group, fewer had completed (32%), but more had left early (25%) or were still studying (43%). Of those completing, a lower proportion had received a first or upper second class degree.

Table 8 presents a slightly different analysis by excluding those young people who started their degree in 2020/21 or 2021/22 – i.e. those who could not have completed within the period covered by the dataset. These numbered 490 UASCs and 7,410 other care-experienced young people.

This analysis shows similar patterning. UASCs were more likely to have completed than other care-experienced young people and with higher degree classifications. Conversely, they were less likely to have left higher education or to still be studying. The relatively small number of individuals precluded any subgroup analysis by sex or ethnicity.

Table 8: Degree outcomes to date for earlier entrants

Outcome to date	UASCs	Other CEYP
Completed degree		
- First class	14%	9%
- Upper second class	29%	23%
- Lower second class	18%	13%
- Third class or pass	6%	3%
Received lower qualification	8%	11%
Left without qualification	12%	18%
Still studying	12%	22%
TOTAL	100%	100%

If one examines only those young people who completed, 63% of UASCs received a first or upper second class degree. This compares to 66% of other care-experienced students.

7. Discussion

Pooling data from multiple years has enabled us to explore the higher education pathways of UASCs; we believe for the first time. The focus of this analysis is to identify relationships, but it cannot reveal the basis for these relationships. In this section, we offer some speculative discussion to guide future enquiry.

Relatively few UASCs entered higher education during the period covered by the dataset, but their participation rate was slightly higher than for other care-experienced young people, despite the profound challenges that this group generally faces.

While women only make up 10% of the overall UASC group, they were substantially more likely to participate than men. As a result, they comprised 27% of UASCs who had accessed higher education during the period covered by the dataset. This likely reflects, at least in part, differences in country of origin, age of arrival and prior schooling. Participation rates were also notably higher among Black African and Southern Asian UASCs, perhaps reflecting stronger English language traditions in these regions.

UASCs tended to enter higher education later than other care-experienced young people; we know from previous work that the latter group itself tends to enter later than the general population¹¹. This suggests that it may take longer for them to accumulate the qualifications needed for entry to higher education, possibly due to educational interruptions, variable support and legal uncertainties; ultimately, the profile of entry qualifications drawn upon was similar between the two group, with more emphasis on vocational qualifications and/or work-based learning.

As with other care-experienced students, UASCs mainly participated through 'lower status' universities, with 81% doing so, predominantly in large cities. UASCs were disproportionately likely to study Engineering and Technology subjects, perhaps reflecting the predominantly male profile of the group and the

¹¹ For example, <https://doi.org/10.1080/03075079.2019.1582014>.

traditionally gendered nature of these disciplines. This subject mix may also explain their slightly higher propensity to attend 'high status' universities where these subjects tend to be concentrated.

On entry to higher education, UASCs were three times less likely to be recorded as being disabled than other care-experienced young people. This may point to an under-diagnosis and/or under-recording of disabilities among UASCs, although it might be that physical and sensory impairments are less common among a group that has migrated.

UASCs who entered undergraduate degrees had somewhat stronger outcomes than other care-experienced students within the dataset. They were more likely to have completed their studies and less likely to have left early. Of those completing, similar numbers from both groups received a first or upper second class degree.

As with all studies based on secondary data analysis, there are significant limitations to this study, including an absence of data about educational pathways prior to migration, changes in immigration status, the role of English language proficiency and timely access to schooling. We aim to address these in future strands of this project, especially in the qualitative elements focusing on current UASCs, former UASCs and practitioners.

8. Conclusion

UASCs are at risk of marginalisation from higher education due to their history of forced migration and educational disruption, potentially exacerbated by mental health and English language issues. However, we have identified 740 UASCs who participated in higher education between 2012/13 and 2021/22. A substantial majority of these have successfully completed their studies, often achieving highly.

These findings therefore challenge deficit discourses about UASCs while recognising that (a) the participation rate of 14% is well below the average for the general population of young people, (b) UASCs often took longer-than-average to access higher education, and (c) around one-in-five left higher education without completing their studies. These findings should help to guide future research and support developments in policy and practice.

9. Acknowledgements

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<https://education.exeter.ac.uk/research/projects/educationpathwaysforunaccompaniedasylum-seekingchildren>

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10. Publication details

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