

If What We Measure is What We Value, Are We Measuring the Right Things? Reassessing Outcomes for Young People in Care

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Metrics are all around us, all the time. And they influence us more than we might think. They're in our Duolingo streaks, Snapchat streaks, really any "streak." They're in our fitness trackers, music streaming apps, Goodreads and Letterbox'd accounts, social media platforms, and games. Anyone who has ever felt the pang of forgetting to log a workout on their fitness watch, as if that would mean the workout never happened and the health benefits are null, knows innately the influence of metrics on our lives. Metrics also rule our public systems and services, informing policy and practice decisions that directly affect provision. These monitoring and evaluation metrics help keep organisations, agencies, and governments accountable, create (perceived) transparency, standardise processes to encourage equity, and increase efficiency.

The care system is no exception. But what happens when we dilute the complexity of the caring ecosystem into care plans, assessments, reviews, and yearly "snapshot" analyses of how care-experienced young people are doing? What insight is lost, and who suffers as a result?

What metrics are used in the care system?

Care-experienced children and young people have more data recorded about them than their non-care-experienced counterparts. Some of this data is published for all to see, while some is kept internally at local authority or organisational levels. Nationally, we know that the Scottish Government tracks some statistics via the Children's Social Work Statistics for Looked After Children which is published annually. These primarily centre demographics of children in the care system: how many have started to be looked after, how many are continuing to be looked after, how many have ceased to be looked after; reasons for being in care, placement types, number of young people accessing continuing care; ethnicity, disability status, age. Regarding outcomes, these national statistics report the proportion of those eligible for aftercare services who are in employment, education, various types of accommodation, and/or experiencing homelessness. And this data is all captured on one day, every year. In other words, we see where care-experienced young people are across all these measures on the 31st of July. As you can imagine, these statistics provide a very narrow understanding of the Scottish care system and those within it. More on that later.

Other metrics may come from the Care Inspectorate, although these are mostly concerned with whether care providers are meeting certain regulatory requirements. Individual local authorities, corporate parenting boards, social services, health services, care providers, and other organisations will all have their own measurements and associated data that may or may not be triangulated with each other's. While it is hard to give a definitive list of what metrics are used across the care system, these can be expected to include number of incidents – including absconding, police involvement, self-harm, or those requiring restraint – placement breakdowns and moves, school attendance or exclusion, qualifications gained, CAMHS referrals, and young people's contact with aftercare services. Then of course each child or young person in care will have a care plan, a pathway plan, reviews, and so on where a team of professionals will assess whether that young person has met the targets that the professionals – and ideally the young person themselves – had set previously. This is documented, shared, saved, and reviewed to see if the young person is "succeeding" in and after care, and if the care system is adequately supporting them to do so.

The Promise acknowledges that this administrative data fails to capture all valuable information associated with outcomes, noting that while routinely collected data can "provide information on 'hard' outcomes, such as hospital admissions and mortality," it falls short in representing "many of the outcomes central to The Promise." The Promise suggests placing increased attention on measures such as:

- Mental health service access and wait times, including community-based care
- Subjective wellbeing, including reported happiness and sense of belonging
- Experiences of stigma and discrimination
- Identity and connection, including continuity of trusted relationships

While individual services or even local authority areas may be gathering some or all of the above metrics, and this no doubt will be strengthened by The Promise, the reality is that expectations of carers, professionals, and most importantly young people are still heavily influenced by those “hard” measures.

What are metrics do (and don’t) tell us

Simply put, a metric is a piece of data that points toward a goal. Metrics hold moral implications, telling us what is “right” and “wrong” or “good” and “bad.” Metrics are meant to be objective, but they can never be truly objective. What we or some institution set as either end of the spectrum carries in it a subjective value statement: if you meet this you are doing well, if you don’t, you are not. And at the risk of getting too philosophical, metrics – especially in politics and social provision, perhaps not so much maths and science – reflect societal assumptions. For example, trying to meet a target of less individuals on state benefits reflects the assumption of a capitalistic society that receiving financial support from one’s government should not be the norm, whereas this metric probably wouldn’t mean much in a socialist context. This doesn’t mean metrics are wrong and should never be used, it just means they should be continuously questioned, reassessed, and adapted.

Another function of metrics is to communicate information about often complex phenomena in a way that the majority can understand. Metrics are intended to be easily digested interpreted by different people and systems, including *non-experts*. This is how a student’s grade in biology can tell a university admissions officer how good that student is at biology, even if the admissions officer knows nothing about the subject itself or what receiving that A+ entailed. In the same vein, metrics rob information of much of their meaning and of course, nuance. With a grade, that only tells us how well that student scored on tests or assignments as measured by a predetermined grading structure, but it doesn’t necessarily capture how well the student understood the concepts, or how they might engage with the subject going forward.

Similarly, metrics about the care system exist, in part, so that even those who have never set foot in a residential house or the like can make a judgement as to the efficacy of the system. Theoretically, members of government with limited lived experience and knowledge about the care system can look at the numbers and decide where funding needs to be added or cut. The shortcomings of this are apparent, but ease of translation across expertise and sectors is also necessary. It can keep professionals, services, and local authorities accountable, pushing for certain outcomes (like preventing homelessness) and limiting harm to children in care. However, the commonly gathered data is less likely to carry the depth of understanding needed to know, really, how care-experienced young people are being supported and how they are moving through life. Number of young people in employment gives us a general idea of how well we, as a country, are helping care-experienced young people to participate in work, but it doesn’t tell us anything about the quality of that work, nor does it reflect alternative types of employment. Some of those employed young people will be subject to zero-hour contracts and unfit working conditions. Some accommodated young people will be in a house that is not fit for purpose, or in an area where they don’t feel safe. Unfortunately, surface-level, easily measured targets can create the illusion that we are doing “good enough” in supporting young people’s futures, even if we’re not.

Finally, metrics inadvertently tell us who is responsible. A strong example of this is the label of NEET (not in employment, education, or training). Young people who meet the criteria for NEET and are counted in this way are portrayed as the problem to be solved, the number to be reduced. This directs our attention away from critiquing the conditions in which policy makers are expecting the number of young people who are NEET to decrease. Returning to the Children’s Social Work Statistics, there is one statistic that attempts to provide context to education and employment data, but it is limited. Of those in continuing care who are NEET, approximately 75% are assigned to the cause “due to other circumstances.” One person could read this as “75%

of young people do not want to work” while another could read it as “75% of young people cannot find a job or face barriers to education.” Both might be true in different circumstances. But there is no metric included in this snapshot that tells us how many young people applied for jobs and were denied, how many applications were sent per available job, or how many have finished a qualification and now are unable to find work.

What metrics are used for

Many of us inherently know that these metrics are limited and fail to tell the whole story, yet we often rely on them because they seem to be the best we have, especially when trying to evaluate a system at a large scale. Statistics like the annual Children’s Social Work report remain central to policy decisions that tell practitioners, services, agencies, and local governments how to support care-experienced young people. Continuing with discussion of young people who are NEET, attempting to fix this with job skills development interventions is a key example of how data framing informs what policy priorities. If young people who are NEET are framed as the problem to be solved, the group of people who are unable to meet targets, then efforts to get them into work will focus chiefly on what decision makers think they lack. Once again, there is more to the story. [As of 2024, the average number of applications for a graduate role was 140](#), with this number being even higher for entry-level roles. Jobs that were typically held by young people in the past are now being occupied by those who are older and have more experience, because the competition is that high. More young people are completing higher education and gaining qualifications than in previous generations, and support to help care-experienced young people gain vocational skills is constantly growing. Yet, the number of unemployed young people continues to increase. This is an example of how a metric can guide very real policy and practice decisions, and how it can potentially lead to misguided efforts. If what we measure is what we value, then what if the metric was “number of entry level jobs available per 16–25-year-old” or “percentage of employers hiring recent graduates?” This provides a more well-rounded picture of the current situation, while also encouraging that more attention be placed on fixing the economic system in which young people are expected to reach a “positive destination.” Such metrics might motivate policy makers to focus a bit more on the job market itself, and to work to create an environment in which young people can bring their skills to various types of employment.

As mentioned, metrics also allow for greater transparency and accountability. In many ways, this has done wonders for making the care system a better and safer environment in which to grow up. And naturally, there are consequences when we expect social services to operate like businesses, as has been the trend in the UK since the 1970s. In addition to supporting regulation and improvement, metrics aim to capture what is working efficiently and help decision makers cut waste where it appears there is a lack of objective achievement. And I would posit that the danger with this is that it takes a system that aims to provide relational, familial care to children and turns it bureaucratic. How do you actually measure warmth from carers, happiness of children, a positive sense of self, or the quality of relationships in a way that preserves the target’s meaning while being able to inform large-scale policy?

Value Capture

One last complication with metrics – value capture. *Value capture*, as C. Thi Nguyen describes in his book *The Score*, is what happens when we internalise metrics and let them dictate what we value. It is when the metric itself becomes the goal, not what it is supposed to represent. Most people will take up Duolingo because they want to learn a new language to travel or just to work out their brain, but (speaking from personal experience) later find themselves rushing through a daily lesson just to watch the number of days increase on their widget. You might start logging all the books you read in a year to encourage yourself to read, because your goal is to expand your mind and worldview. However, if you then only read short, easy books just so that you can say you’ve read a greater number of books, you might not really be achieving the aim you initially valued.

You may already infer how this translates to care. Care professionals, social workers, and the like are under enormous pressure to help children and young people meet certain outcomes. Get them into independent accommodation, get them into a job or training programme, get them to engage with more professionals. When we quantify these outcomes, these indicators of

achievement, they start to lose their meaning. Is that young person really thriving by living alone? Is engaging with more services equating with increased quality of life and connection? If no, then ticking those boxes might still be necessary, but might also be the bare minimum. We should want more for young people, and we should have a higher threshold for success. In the coming articles to this series, we'll explore in more depth what that threshold might be.

Crucially, metrics kept about care-experienced young people can impact how they view themselves, for better or for worse. We already know that what we record about young people matters, and luckily there has been greater attention given to language used in children's plans and assessments. But culturally, there's still a long way to go. A look at headlines statistics frequently reported about care leavers will show higher rates of negative outcomes, and thus lower expectations of care-experienced young people. Statistics show care-leavers are more likely to be homeless, have mental health issues, be out of work or education, or be in conflict with the law. So, the assumption amongst professionals might be that if a young person is not represented in any of those statistics, then the job is done. We say we need to support care-experienced young people to not only survive but to thrive, yet on a macro-level, we're less often reflecting that value with our metrics.

Last thoughts

I am writing this as someone who spends much of their working day gathering and analysing data about communities for those with experience of the care system, to try to understand how to provide the best support possible. There are so many advancements in care and society at large that would not be possible without seeking to understand causes and patterns. This piece does not aim to advise against evidence-based practice. Evidence reflects what we know at any given time, to the best of our knowledge, and metrics help us to create and communicate that evidence. But we must hold that evidence in conjunction with what we know from experience, from relationships, and from listening. We also need monitoring and regulation, to the extent that it creates an environment in which growth and long-term wellbeing can be forged. Measuring outcomes is important, but they're not everything. In fact, the human experience, and the experience of growing up, is perhaps too complex to ever convert it into a metric or even hundreds of them.

All hope is not lost. Recognition of those outcomes that are harder to measure is growing and becoming more embedded into systems. Last year we worked with The Promise in developing their Story of Progress framework, looking at how to collate qualitative data capturing lived experience of care-experienced young people to understand if the aims of The Promise are being met. This reflects an interest in more comprehensive outcome measurement and a desire to genuinely understand inevitable complexity. Similarly, the SHANARRI framework has emerged in response to the need for a more holistic assessment of children's wellbeing. SHANARRI stands for the framework's pillars of wellbeing which include being Safe, Healthy, Achieving, Nurtured, Active, Respected, Responsible, and Included. While the Scottish Government backs this framework and individual services or local authorities may use this framework in their assessment and evaluation, there's still some catching up to do to ensure these metrics are valued just as much as the ones we're used to.

Finally, I would like to highlight a piece of work published last year from Become, Rees Centre, Department for Education, and University of Oxford entitled "Success – Whose Definition Counts?" (Kelly et al., 2025). This research involved reviewing what success measures are collected and used to assess *all* young people, and then working closely with a group of care-experienced young people to understand what more fitting measures of success would be, as they see it for themselves. We will look at this more in-depth in the coming article, but overall, young people reflected that conventional milestones don't align with how they conceptualise success. For them, rather than gaining certain big achievements, success might be quieter: experiencing stability for the first time, having meaningful relationships, feeling well enough to get through the day, and having a sense of purpose and belonging. These things might be harder to measure, but they also might be more important.

“The government should be proud of us and not just using us for statistics all the time. They're trying to measure success against the things they want to see. They only care about processes, not our success.”

- *Young Person*, Kelly et al. (2025), p. 10

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