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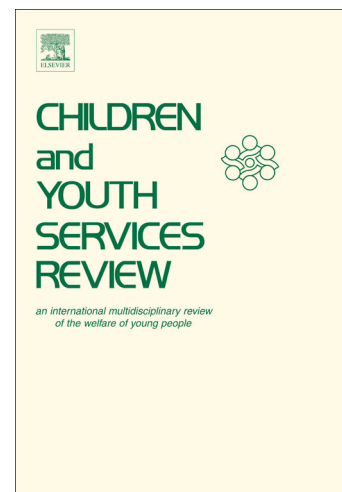
Supporting Transitions to Adulthood for Youth Leaving Care: Consensus Based Principles

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Supporting Transitions to Adulthood for Youth Leaving Care: Consensus Based Principles

Running head: Consensus based principles for supporting leaving care

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Abstract

The transition to adulthood for young people leaving care has become a significant subject of research over recent decades, especially given consistent findings that suggest that alumni of care are at high risk of adverse outcomes. However, there is no definitive consensus on how findings from research can best inform practice with youth in transition out of care. The aim of the present article is to provide principles that can support practice based on a project mounted by a group of international care leaving researchers. These principles include, among others, the importance of listening to the young people, to supporting their autonomy during and after care as well as their cultural identity and diversity, to ensuring their access to education after care, to ensure preparation for leaving care and ensure that care leavers rights are upheld so that they get the support they need. The discussion considers these principles in light of the micro-, meso- and macrosystem levels in Bronfenbrenner's social ecological model (1994) and the United Nations Convention on the Rights of the Child (1989) and reviews the challenges of generating these principles. In addition, implications for policy are highlighted in relation to rights, entitlements and access to services.

Keywords: transition into adulthood; care leavers; principles; good practice; knowledge transfer

1 Introduction

Over the past decade, much research has been conducted in relation to care leaving and the transition to adulthood (e.g. Jones, 2019; Mann-Feder & Goyette, 2019; Mendes & Snow, 2016). Studies of youth who leave substitute care in every form all over the world demonstrate that the majority of these young people must move out to live independently and do so much earlier than their peers, many of whom remain at home well into their 20s (Mendes & Snow, 2016; Stein, 2012). Studies also consistently demonstrate that young people leaving out-of-home care are at high risk of poor outcomes as compared with their peers, especially in relation to education, health, well-being and social exclusion (e.g. Courtney et al. 2011, Mendes & Snow, 2016; Stein & Munro, 2008; Van Breda, 2018).

Considering the risks and relatively poor outcomes for care leavers, several authors have attempted to summarize findings in specific areas to consider what works in leaving care. For example, a review by Stein (2005) on resilience-promoting factors for care leavers demonstrates that stable placements and good quality care are critically important. In addition, helping young people by promoting self-efficacy, positive experiences at school, and preparation for leaving care can serve as factors in promoting positive outcomes (Stein, 2005).

There have been previous efforts to develop principles for policy and practice concerning care leavers. Davis and Koyanagi (2005) developed six such basic principles. For example, they recommend that all programs for young people on the verge of leaving care should provide continuity of care between ages 14 to ages 25 or 30 as well as developmentally appropriate services that are appealing to young people and support for the development of specific expertise among professionals.

Despite the accumulation of literature on what can benefit youth leaving care, the impact on practice has been uneven at best. For example, reviews of research on young people leaving care across the world, including North America, Europe, South America, Africa and the Middle East demonstrate that the development of programs for preparing young people for leaving care is patchy across the countries (Strahl, Mann-Feder, Schröder & Van Breda, 2019; Stein & Munro, 2008).

Client experienced evidence with regard to care leaving was collected during the International Federation of Educative Communities (FICE) conference in Vienna, Austria, in 2016. During that conference, a group of 53 care leavers from around the globe, ages 17 to 25 presented a manifesto entitled “Be the change: 10 standards for care leavers” (FICE International, 2016). These ten standards constitute recommendations for practice. They include principles such as the rights of care leavers to be involved in their own care leaving plan, to have benefits and access to scholarships when applying for college and university. This manifesto has important implications for practice, and we believe it should be supplemented by the existing research.

The aim of the present article is to propose principles that can support practice and policy in promoting successful transitions to adulthood for young care leavers based on a project mounted by researchers from this field. We will report on the process by which members of INTRAC, the “International Network on Transitions to Adulthood from Care” endeavored to provide a position paper on key findings from research that could inform practice with youth leaving care in the transition to adulthood. We will outline the process of creating this position paper, and present the principles that were identified. Lastly, this article will discuss these principles in light of the micro-, meso- and macro-system levels in Bronfenbrenner’s social ecological model (1994) and the three P’s (i.e. Participation, Provision and Protection) in the United Nations Convention on the Rights

of the Child (1989) (UNCRC), with particular attention to policy implications. We will then outline the challenges and limitations faced when we as researchers summarize existing literature to make it accessible to practice. In addition, we will consider these principles in light of the literature of knowledge transfer.

2 Description of the project

INTRAC is a network of academic researchers from Europe, North America, South America, South Africa, the Middle East and Australia, who are concerned with the transition experienced by young people moving to adulthood from public care (INTRAC, n.d.). Every year, INTRAC members meet to discuss their current activities and share new research findings in relation to transitions from care. The group has produced a number of publications and books together (e.g. Mann-Feder & Goyette, 2019; Mendes & Snow, 2016; Stein & Munro, 2008; Stein, Ward & Courtney, 2011), and serves as a conduit through which researchers conceive and engage in cross-national research projects. In 2016, INTRAC members were inspired by the FICE manifesto produced by young people (FICE International, 2016). A subcommittee of INTRAC subsequently embarked on a process of nominated principles with strong research support to date in order to provide a position paper that could complement this work. It was also hoped that the INTRAC principles could form the basis for collaboration between researchers and practitioners and support the dissemination of actionable knowledge. The process spanned several steps, described below.

The initial “Research into Practice” group of INTRAC consisted of 15 academics from 14 countries, all of whom self-identified as care leaving researchers. All were engaged as professors, university researchers or doctoral candidates and studied the transition to adulthood from care from foster homes, group homes, children’s villages and residential treatment centers. Each member of

the group nominated a principle based on their knowledge and research interests. The major criterion for inclusion was that each principle would have significant implications for practice that promotes care leaving generally, and that it would be supported by a minimum of ten recent research studies published in English at that time (2016). Initially, each member of the group produced a summary of one principle. A smaller group of researchers continued reviewing and refining the principles in relation to existing and updated research up to 2019 and eliminated redundancies, with the eventual aim of producing an article. The principles together with relevant literature are presented below.

3 The principles

3.1 Listen to young people and safeguard their rights to participation

Children's rights to participate in the decisions made about them is one of the basic yet innovative requirements of the UNCRC (1989). Article 12 stresses the rights of all children and young people to express their opinions freely on all matters affecting them and also requires that their opinion be given due weight in accordance with the child's age and maturity. According to the principle of "evolving capacities" in the UNCRC, the right to participate should be adequate for the child's level of development (Varadan, 2019). Since the right to participation in the UNCRC is abstract, several models can be used to operationalize this right. A well-known one is the "Ladder of Participation" (Hart, 1992), which refers to children participation's in the public context, but some of the degrees of participation are relevant to children in care and care leavers. The lower levels in the ladder, which cannot be referred as participation, but are actually seen as 'manipulation' or 'tokenism', refers to situations when children are part of relevant meetings but are not given proper information or an opportunity to speak. While the highest and most

desirable levels are where: children are informed about the relevant discussion on their issues, are encouraged to express their views and they can even be involved in the decision-making processes. A more complex model is presented by Shier (2001), which provides questions for practitioners to use in examining their current position in terms of participation. These questions prompt practitioners to explore their *opening* to share power with children, the *opportunities* that enable the sharing of power and responsibilities with children, as well as the existence of *obligations* (such as policies) that demand shared power between adults and children in relation to decision making. From the literature below, it seems that high levels of participation for children and youth in care is not common and the degree of openings, opportunities and obligations are far from being ideal.

Most young people wish to be included in a meaningful manner by contributing to important decisions during every stage of their care trajectory, including the transition out-of-care phase (Furge, Schormans, & Rooke, 2008). Studies indicate that if we make sure to listen to young people during the process of leaving care, it leads to better outcomes and contributes to experiences of agency, wellbeing and satisfaction (e.g. Bakketeig & Backe-Hansen, 2018). On the other hand, research demonstrates that the failure to provide such opportunities for participation has negative outcomes such as feelings of hopelessness, low self-esteem, and low confidence, emotional and behavioral problems and passivity (e.g., Edwards, 2012; Leeson, 2007; Ten Brummelaar, Harder, Kalverboer, Post, & Knorth, 2018).

Studies further indicate that young people in care are often not satisfied with their level of participation in the important decisions that are relevant to them (Burke, 2010; Gaskell, 2010; McLeod, 2010; Munro, 2001; Southwell & Fraser, 2010; Van Bijleveld, Dedding, & Bunders-Aelen, 2013). A recent review concerning youth participation in decision-making during

residential care suggests that young people usually experience only very limited opportunities to participate in the decisions that affect them. This includes, among others, decisions related to their transition out of care or discharge planning (Ten Brummelaar, Harder, Kalverboer, Post, & Knorth, 2018). Young people who receive housing services after care also report a low level of participation (Simon, 2007). These findings shed some light on the degree to which young people are part of broader decisions concerning policies and the design of services. According to a study by Gaskell (2010, p. 141) “the failure to listen can be interpreted as a failure to ‘care’”. The establishment of a positive relationship and good communication between a young person and the professionals working with them is a key aspect in promoting the young person's participation (Ten Brummelaar et al., 2018). This principle is consistent with the first standard proposed by former youth in care as part of the FICE youth manifesto (FICE International, 2016). Their first standard reads “Every care leaver should be involved in their own care leaving plan and have a say into what has to be done”. Maximizing the participation of young people in care and care leavers can both enhance relationships, which in turn leads to better policies and practices.

3.2 Support the autonomy of young people during and after care

During late adolescence, young people have an increased need for autonomy (Digiuseppe, Linscott & Jilton, 1996), which includes the need to experience a sense of choice or psychological freedom (Miller & Gramzow, 2016; Vansteenkiste, Williams, & Resnicow, 2012) and to exert their independence and make decisions for themselves (Barnett, Sussman, Smith, Rohrbach, & Spruijt-Metz, 2012). These needs are in line with the progressive capacity that young people acquire to make decisions and express their opinions about their own lives.

However, there is a paradoxical relationship between providing protection for youth in care and promoting autonomy. Professionals may want to provide autonomy to the young person, but they also want to assert boundaries that provide safety (Ten Brummelaar, Knorth, Post, Harder, & Kalverboer, 2018). Research in secure residential youth care suggests that the autonomy of adolescents is often too limited during their stay, which can lead to a loss of independence and privacy, and lead to negative feelings such as frustration, anger and boredom (Ashkar & Kenny, 2008; De Valk, 2019). Conversations between youth and professionals in residential care suggests that professionals actually engage in very few autonomy-supportive actions in their contact with young people (Eenshuistra, Harder, Van Zonneveld, & Knorth, 2016). An autonomy-supportive approach during and after care is crucial in achieving lasting positive outcomes with young people in transition to adulthood.

3.3 Ensure access of care leavers to education

Higher education is a significant element of the potential for upward social mobility (Lee, Hill, & Hawkins, 2012), improved earnings and economic status (Baum, Kurose, & Ma, 2013; Lee et al., 2012). However, only a small percentage of care leavers acquire higher education (Courtney et al., 2011; Pecora, 2012; Zeira, Arzev, Benbenishty, & Portnoy, 2013). While vocational training can provide an alternative, especially in countries where this type of education is more developed, care leavers experience difficulties integrating into these programs and need substantial support in order to engage with their program of study (Thomas, Ehlke, Koch, & Schröer, 2019). The difficulties experienced by care leavers in transitioning to higher education and vocational training are often linked with other problems they had even before leaving care and which already resulted in low educational achievements at earlier stages. Many care leavers

finish their term in public care with significant educational gaps and without a high-school diploma (Courtney, Dworsky, Lee, & Raap 2010; Pecora, 2012).

While their poor level of educational attainment might be the result of gaps in schooling prior to the transition into foster or residential care (Berridge, 2007), a literature review indicates that little is actually done to improve educational prospects during a placement in care (Forsman & Vinnerljung, 2012). As a result, care leavers start early adulthood with poor educational attainment that lags behind that of the general population (Casas & Montserrat, 2010; Courtney et al., 2011). Another obstacle for care leavers is they are under pressure to enter the world of work as soon as they leave care, since they cannot rely on family support and need to provide for themselves at an earlier age than other young people (Casas & Montserrat, 2010). Overall, care leavers have a particularly acute and significant need to improve their educational level of achievement. In this regard, studies from several countries indicate that young people who continue to live with their foster parents or in residential homes after the age of 18 have a higher chance of completing high school and continue their studies afterwards (Courtney & Hook, 2017; Courtney, Okpych & Park, 2018; Munro, 2012; Valset, 2018).

This principle is consistent with standard three of the FICE youth manifesto, which reads: “When applying for college or university, every care leaver should have benefits and access to scholarships sponsored either by government or private organizations” (FICE International, 2016). Our principle is broader and advocates for support for different aspects of acquiring education. Young people need additional educational support while in out-of-home care and extended support after leaving care to help them integrate into post-secondary and specifically into higher education.

3.4 Honor diversity including cultural identity

Research illustrates that there is significant diversity in the needs, circumstances and outcomes for care leavers. There is a range of individual differences and the young people themselves emphasize challenges, such as access to services, gaps between child and adult services and lack of social support (Marion & Paulsen, 2019) and the need for flexibility in the type and extent of supports available (Bakketeig & Backe-Hansen, 2018; Magnuson, Jansson, & Benoit, 2019). For example, as indicated above educational outcomes for care leavers are poorer in comparison with their peers overall. Still, some young people leaving care are successful in relation to higher education, while others struggle and need extra support and time for education and training (Höjer & Johansson, 2013; Jackson & Cameron, 2012). Some young people from care do have support from their family of origin while others are isolated and cannot rely on any kind of support (Collins, Spencer & Ward, 2010; Rutman & Hubberstey, 2016). In addition to a set of unique strengths and challenges, each care leaver comes from a diverse cultural background and should be helped to retain their cultural identity both during their time in care and throughout any interventions thereafter (UNCRC, 1989). They need to be assisted to preserve their unique cultural heritage, and given the right to practice their own religion. Both are part of the critical identity capital required for successful development, which in turn promotes a personal sense of continuity (Mann-Feder, 2019). The support offered to youth leaving care needs to be flexible, taking into account the unique needs, abilities and cultural identity of each young person in care and after.

3.5 Support care leavers to connect and maintain contact with their biological families

Since relationships with family constitute a major challenge for care leavers, it is an important focus for intervention, whether or not the family can actually provide a consistent and long lasting

relationship. Studies indicate that maintaining family relationships during care contributes to better adjustment both in care and after leaving care (Courtney & Iwaniec, 2009; Hair, 2005; Hart et al, 2015; Knorth, Harder, Zandberg & Kendrick, 2008).

Realistically, we know that for some youth in care any relationship with parents may not be possible. For some young people parents can be supportive, but for others relationships with parents can become a burden (Collins, Paris & Ward, 2008; Höjer & Sjöblom, 2010). However, in practice, there are not enough efforts to maintain and improve relationships with families when children and youth are in care (Jackson & Cameron, 2010). This can lead to many difficulties after care, since many care leavers return to live with their parents whether the child welfare systems sanctions a return home or not (Courtney et al., 2007; Hiles et al., 2013; Van Breda, 2018; Wade, 2008).

There are treatment programs designed for biological parents that help improve parenting skills and promote involvement in their children's life while in care (Holden et al., 2010; Knorth et al., 2008). However, if parents remain unavailable, the work with young people in care should assist them to process and mourn the absence of their birth parents (Mann-Feder, 2018; Refaeli, Mangold, Zeira, & Köngeter, 2017). Members of extended family, such as siblings, grandparents, uncles and aunts, can become other sources of support, and every attempt should be made to locate them and reconnect them with young people in care, especially when relationships with parents are not possible (Hiles et al., 2013; Wade, 2008). There should be consistent efforts to help care leavers connect and maintain contact with biological parents and/or extended family members, even if they can never return to live with them. Many levels of contact, from regular visits, to time spent during holidays, to phone contact can be meaningful and satisfying both to youth who have

left care and their families. Young people can never hope to have contact with their families in any form need support to mourn, and to develop other meaningful relationships.

3.6 Ensure relationship continuity by providing long-term supports and safety nets

Social support is important to help young people negotiate changes in their lives and to cope with adversity. Research demonstrates that a good relationship between youth and the professionals who work with them during placement is associated with better adjustment after leaving care (Cashmore & Paxman, 2006). A warm and secure relationship with at least one parent or parent-like person is also associated with resilience (Newman & Blackburn, 2002; Rutter, Giller, & Hagell, 1998; Stein, 2005). A stable relationship can be seen as providing a secure base for care leavers in their transition to independence (Höjer & Sjöblom, 2010) and relationships are also important for practical, emotional, informational and affirmational reasons (Marion & Paulsen 2019). However, separation, loss and change can create gaps in a young person's networks of support.

Moves in the course of a child's placement history are common and can cause damage to the young person's ability to develop safe relationships (Baker, Sinclair, Lee & Gibbs, 2007; Refaeli et al., 2017). Stability in care, on the other hand, is associated with positive outcomes after leaving care (Cashmore & Paxman, 2006; Martin & Jackson, 2002; Pecora, Williams, et al., 2006; Stein, 2008). If a young person can remain in the same place for a long time, it is easier to provide long-term intervention and support (Cashmore & Paxman, 2006; Pecora, Kessler, et al., 2006; Schofield & Beek, 2005). Even when stability is not possible, efforts can be made to offer stability via other supportive relationships, such as school and leisure activities (Refaeli et al., 2017). Similarly, standard 6 of "Be the change" states "To life his/her life, every care leaver needs to be connected to some people they can rely on" (FICE International, 2016). Professionals should be

proactive to help young people develop and maintain formal and informal networks of support during and after their time in care.

3.7 Provide intervention for working through trauma

Many of the emotional and behavioral problems manifested by children and youth in care are well recognized to be the result of early trauma (Ward, 2011). Depending on the type, severity and age at which young people are exposed to trauma, there can even be a significant impact on brain functioning (Furnivall & Grant, 2014). Placement itself and experiences during care can also contribute to re-traumatization (Smith, 2011; Zelechoski et al., 2013). The right to receive psychological recovery interventions for children who experienced abuse and neglect included in the UNCRC (1989), article 39. However, trauma informed care is not provided to the extent that it is needed (Anglin, 2002), and often, youth age out of care without having had appropriate help. This magnifies the upheaval that can be experienced at care's end and can lead to significant mental health problems in adulthood (Dye, 2018).

Placement settings that are trauma-informed provide both evidence-based individual therapies and living environments where “coercive interventions and interactions are recognized to be re-traumatizing... and staff are attuned to the phenomenon of triggers and traumatic reenactments” (p.1, American Association of Children’s Residential Centers, 2010). These settings adopt policies, procedures and practices that provide a “containing holding space” (Colbridge, Hassett, & Sisley, 2017).

Trauma-informed interventions are associated with improvements in self-regulation, self-reflection, information processing and relational engagement (Zelechoski et al., 2013), all of which are crucial for adjustment in adulthood. However, specialized training is required for professionals

and foster parents so that they can deliver these interventions (Zelechowski et al., 2013). Furthermore, changes are required at the organizational level, as staff who work with young people in care often experience vicarious traumatization (American Association of Children's Residential Centers, 2010). Care systems need to provide safe environments where foster carers and residential care workers are trained, and supported through regular supervision to provide trauma informed interventions.

3.8 Ensure adequate preparation for leaving care

Studies have demonstrated that many care leavers are ill prepared to deal with many of the tasks of living independently, including the ability to continue their education or pay for their housing (Benbenishty & Schiff, 2009; Van Breda, 2018). The "Be the Change" standards include reference concerning the preparation for leaving care as: "To take care of one's own, care leavers need knowledge of life skills and how to organize their daily routine, like in peer to peer training" (FICE International, 2016). More preparation for leaving care is associated with positive outcomes for care leavers (Refaeli, Benbenishty, & Zeira, 2019; Stein & Dixon, 2006; Sulimani-Aidan, Benbenishty, Dinisman, & Zeira, 2013). Adequate preparation for leaving care includes acquiring a range of skills such as finding and handling accommodation and employment, financial planning, and identifying supportive resources in the community (Mendes, Johnson, & Moslehuddin, 2011; Refaeli, Benbenishty, & Eliel-Gev, 2013; Tanur, 2012). Some research has suggested that in addition to a focus on the development of instrumental skills (Lee & Berrick, 2014), such programs also need to incorporate grief work and the development of coherent and meaningful identity narratives (Mann-Feder, 2019) to help care leavers consolidate a strong sense of post-care identity.

Stein and Dixon (2006) highlight the following five main areas for preparation: self-care skills, practical skills, interpersonal skills, education, and identity development. In a scoping review of 68 studies, Woodgate, Morakinyo and Martin (2017) discuss the evidence on interventions available to youth who are aging out of the child welfare system. Most studies focused on independent living programs that strive to improve education, housing, and employment. These programs generally report positive outcomes in relation to the ability of participants to complete their education and attain part- or full-time employment.

Preparation can be provided through several means. There are some countries, such as the UK, US, and Germany, that have developed services and transitions houses that provide intensive preparation for independence (Ainsworth & Thoburn, 2014; Kroner & Mares, 2011; Trede, 2008). Some countries have even promoted legislation and policies that make preparation for care leavers mandatory, such as Argentina, England, Romania and some states in the U.S. (Reid, 2007; van Breda et al, 2020; Watson & West, 2001). In some cases, extended care enables young people stay in care up to 21 or to get services, which simulate the same level of support that is provided in care.

In order to provide appropriate preparation for leaving care, professionals involved need to have access to high quality training, guidance and information. They are the most important figures in relation to preparation of young people before leaving care (Knorth, Harder, Huyghen, Kalverboer, & Zandberg, 2010). Care leavers themselves acknowledged this in “Be the Change”. They state, “The workers supporting care leavers should be motivated, qualified, supportive and supervised” (FICE International, 2016). Services must be developed and provided by well-trained care workers and foster carers to ensure that each care leaver receives adequate preparation before leaving care.

3.9 Create legal frameworks to ensure the rights and needs of care leavers

While legislation is developed in some countries, others do not have any requirement for after care services (Mendes & Snow, 2016). A recent study of 38 countries across the world confirmed that only 17 countries in all had such national legislation, and of these countries, only eight had legislation that was judged by expert informants to be well developed: Australia, Denmark, England, Finland, India, Romania, Scotland and the U.S.A. (Strahl et al., 2019). In the same study, 24 out of 36 countries reported that they had some form of specialized provisions for youth who had left care, although services ranged in scope and availability. In those countries where after care is limited or there is an absence of dedicated program, generic adult services may offer a lower level of support than is often needed for care leavers and does not include any consideration of their unique child welfare background (Höjer & Sjöblom, 2011; Oterholm & Paulsen, 2018). Legal frameworks that support entitlements to remain in care beyond the age of majority and promote enhanced supports, are related to positive outcomes. For example, studies from the US, England and Norway, countries that offer some possibility of extended care, indicate that young people who stay in care past their 18th birthday are more likely to finish secondary school and continue their studies afterwards (Courtney, Okpych & Park, 2018; Dworsky & Courtney, 2010; Munro et al., 2012; Valset, 2018).

A legal framework should also ensure that young people are given the information they need to be in control of their own transition and be involved in the decisions that are made (see also principle two). Furthermore, young people need to have the possibility of returning to care or getting after care services even if they had initially refused services (Rogers, 2011).

Legislation should clarify the role of the state as a corporate parent and provide a framework for practice to ensure that care leavers have the same opportunities as their peers. In addition, legal

monitoring devices are needed in order to evaluate how policy to support care leavers is actually implemented.

3.10 Ensure access to services

Studies indicate that care leavers exhibit low level of service utilization and low levels of satisfaction with the services provided (Courtney, Charles, Okpych & Halsted, 2014; Courtney, Lee, & Perez, 2011; Petr, 2008; Rogers, 2014). The reasons for this can range from low awareness of the existence of services, to the absence of a perceived need for support after out-of-home care, and may also be a function of stigmatizing processes for accessing services. Legal frameworks provide a foundation to support care leavers, but high quality and accessible services are also needed. Specialized services for care leavers are necessary as well, to make sure that this group is prioritized.

Young people leaving care often struggle with mental health problems and the risks for suicide are much higher than that in the general population. This points to a need for improved access to a range of services (Hamilton, Taylor, Killick, & Bickerstaff, 2015; Vinnerljung, Hjern, & Lindblad, 2006) including health, education, employment and housing without special conditions (Boddy, Lausten, Backe-Hansen, & Gundersen, 2019, Stein & Munro, 2008). Care leavers should get the support they need by having guaranteed access to relevant services.

4 Discussion

The aim of the present paper was to provide principles that could support practice and policy in promoting successful transitions to adulthood for young care leavers, based on existing literature. The importance of this paper is that for the first time, an international group of care leaving scholars

from around the globe collected and shared the implications of research to make this material more explicit for policy makers and practitioners. In this way, we hoped to enable new and better services and policies (Graham et al., 2006). We were inspired by “Be the change”, an initiative by a group of care leavers who participated in an international conference to provide standards for practice (FICE International, 2016). In fact, our principles derived from current research aligned with six of their ten standards. The areas in which our principles did not align with “be the change” document, reflect the concerns of young people in relation to equal access to specific entitlements, such as health insurance, assistance with job searches, housing, and social benefits, which to our view included in our 9th and 10th broader principles. In this way, we provide scientific support to the care leavers initiative, as well as one document including practical recommendations on the field of leaving care based on existing literature to researchers and practitioners.

During our review of the principles, we identified that there were three categories of practice principles that were situated at the micro-, meso- and macro-system levels in Bronfenbrenner’s social ecological model (1994). The microsystem refers to the relationships of the developing humans with their immediate surroundings. The mesosystem refers to the correlation between close external environments that effect the individual and the microsystem refers to the broader aspect of society, which effecting the life of people, including policies and legislation (Bronfenbrenner, 1977). The ecological theory indicated that people had reciprocal connections with several systems which surround them, and these systems can have different effect on human development (Bronfenbrenner, 1979). The current paper refers to the effects of several systems on care leavers. Bronfenbrenner’s framework helps to display how the research findings have implications on different levels of the social ecology. To create meaningful change for care

leavers, we need to go beyond the consideration of individual profiles to query systemic issues as targets of reform.

First, several of the principles relate to direct intervention with care leavers operated at the micro level, for example, the need to provide intervention for working through trauma, and the importance of autonomy supportive interventions that maximize choice and promote independence. Secondly, there are principles at the meso level that have implications at the organizational and operational level of care and after care services, and include ideas about adult and professional roles with care leavers, for example the need to provide accessible services. However, we want to highlight here the principles that operate at the macro level, in relation to policy. Namely, several principles have implications for policy, and address the importance of legislating rights, entitlements and access to appropriate services. Rights include the right to participation, and to long-term supports and safety nets. Entitlements include access to financial and other supports for education, appropriate preparatory programs for leaving care, and easy access to extended care through processes that are non-stigmatizing and continue to be available even when not accessed immediately after a discharge from care. Appropriate services must be developmentally relevant, autonomy promoting and easily available.

To improve current outcomes for care leavers, changes are needed on all three levels: policy, organizational/operational, and on the level of direct practice. Namely, following Bronfenbrenner's framework (1977), providing young care leavers with protective resources in different levels/systems can help them overcome their adversities. Accordingly, we offer a recommendation for anyone wishing to apply research findings to practice and policy: to create meaningful change for care-leavers, there is a need to go beyond the consideration of individual profiles to query systemic issues as targets of reform.

Our principles are also consistent with some of the articles of the UNCRC (1989). The convention is based on a paradigm that views children and adolescents as not merely on their journey towards entering society as an adult, but as individuals with citizenship rights. They are not “human-becoming” but “human-beings” (see James, 2009; Woodhead, 2009) and should be treated as such. This perspective of seeing children and young people as actors in their own lives is strongly supported by the Convention and as well as the new paradigm of childhood sociology. Since previous studies indicated the contribution of children rights, and especially the participation rights for several positive outcomes for children in child protection process and while leaving care (Bakketeig & Backe-Hansen, 2018; Van Bijleveld, Dedding, & Bunders-Aelen, 2015), we believe that a rights based approach can change outcomes for care leavers, and individuals and systems need to acknowledge the rights and entitlements of young people.

At the same time, our principles refer mainly to two of the P’s in the convention, namely to provision (of services and intervention) and participation of youth (in services and intervention). These two rights are especially relevant to young people at the edge of care, while the third right, that of protection, is strongly emphasized for all youth in care. It comes out to a lesser degree in our principles because of the importance of promoting autonomy and lessening protection as young people approach their departure from care, as we stressed in principle 3.2. Article 7, 8, 9 and 30 of the Convention safeguard the identity capital of youth in and from care, by stressing the right for the protection of their family and cultural connections when at all possible (UNCRC, 1989), as outlined in principles 4 and 5 here. Additionally, since youth leaving care have little parental support, the state, as “corporate parent”, should provide them with the variety of protective services and intervention that are needed for their transition to adulthood and independence. Some groups of care leavers, including homeless youth, unaccompanied minors and youth in prison, can be

particularly vulnerable to exploitation and need special protections. The rights of all care leavers should not only be respected in practice, but need to be enshrined in child welfare legislation and in agency policy.

Rights for care leavers also need to be extended beyond the age of 18, the age of majority identified by the UNCRC and maintained by many countries around the world. A major thrust of most recent research is to advocate for the right to care and maintenance well beyond age 18, especially given recent data that the average age of home leaving in the global North is well beyond the teenage years, closer to 30 than to 20. The theory of Emerging Adulthood (Arnett, 2000), based on this observed delay in the attainment of milestones previously associated with the age of majority, had a definitive impact in the way politicians all over the world view the transition to adulthood. This theory also sensitized researchers and practitioners “to the general importance of providing dedicated programs and services for individuals throughout their 20s” (Mann-Feder, 2019a, p. 1), and the principles identified in this article assume that services will extend beyond the age limit defined by the UNCRC.

4.1 Challenges of knowledge transfer into practice

When we initially embarked on this project, we had hoped to create a list of distinct, well supported principles for policy and practice. After developing our initial list, we soon discovered that there was considerable overlap on the one hand, and some significant contradictions on the other hand. For example, there is link between participation right and autonomy, for example in a way that one of them can lead to another. Namely, when care leavers get more options to participate, they can experience and thus eventually achieve more autonomy. In addition, one possible way to solve the complex relationships between autonomy needs and protection needs is to involve young

people in planning their protection (Lansdown, 2005), namely, provide them with the right to participate. In addition, both rights, of participation and for autonomy, should be given in accordance with the principle of “evolving capacities” in the UNCRC (Varadan, 2019), namely children in care and care leavers should be supported in exercised their rights in ways that follow their growing maturity. These capacities are assumed to be more evolved when youth leave care than at younger ages. Two principles that could be seen as contradicting each other were the emphasis on cultivating relationship continuity through stable social support networks for children and youth in care, with the need for specialized workers to assist with preparation for the transition from care. How can continuity of care be reconciled with the need for specialist knowledge for professionals engaging with youth in the transition to adulthood? Stein (2005) argues that after care, specialist schemes should not take over but supplement care. Regarding other types of connections between principles, the creation of legal frameworks to ensure the rights and needs of care leavers is a general principle, and it could be argued that it can encompass some of the other principles (such as ensure access to services or ensure adequate preparation for leaving care). However, in the process of formulating these principles, our group of scholars agreed that each of the 10 principles has important implications for practice and therefore should be presented separately.

Having identified the interrelationship between some principles, we began to understand that it is virtually impossible to delineate a series of discrete and congruent principles from the current knowledge base. This mirrors the complexities encountered in practice and policy in substitute care, and especially the competing demands and paradoxes that are inherent to promoting the transition to adulthood from care. Several questions could be raised, such as: How can aftercare compensate for early deprivations that brought young people into care in the first

place? How can the transition to adulthood ever be optimal when there have been serious problems, and in some cases, ruptures with biological family? How can one promote autonomy in care while at the same time protecting vulnerable youth? Experiences and results during care (such as abuse, low high school achievements, etc.) shape the challenges of leaving care. In our view, the principles can be used to illustrate dilemmas in practice, and provide a starting point for dialogue and discussion both with care leavers and practitioners about the ambiguities and tensions they must face in the transition to adulthood from care.

This project endeavored to make research knowledge available to relevant stakeholders so that the results could be actualized. However, general principles also do not consider context, and in knowledge transfer, it is particularly important to adapt knowledge to the local context (Graham et al., 2006). This is especially relevant to the creation of supports for care leavers, since services must be based on local legislation, local child welfare practice and local culture and traditions, so that these young people can be helped to integrate into their respective communities. General welfare legislation, policies and practices differ from place to place and constitute the major contexts for implementing aftercare services. For example, how the education system, support for the unemployed, and housing policies work in each country has a dramatic impact on both the situation of care leavers and aftercare services that are necessary in each location (Boddy et al., 2019, Stein & Munro, 2008).

The principles included in this paper do not refer to the specific context in which leaving care occurs, which in turn lead to differences in the needs of care leavers in different countries. The following are just a few examples. The proportion of adopted young people is higher in England than in Norway and Denmark (Boddy et al., 2019), such that there are many more young people with permanent substitute families, who are therefore not part of the care system. In

Norway, extended foster care is one of the most common aftercare measures (Oterholm & Paulsen, 2018), while, in England it is a relatively new possibility to stay in a current foster placement, involving only a small minority of those leaving care (Boddy et al., 2019).

4.2 Limitations and implications

Research regarding the implementation of evidence-based practice suggests that the transfer of research findings into practice is a complex task (Kitson, Harbey & McCormack, 1998; Greenhalgh, Robert, Macfarlane, Bate & Kyriakidou, 2004). Implementation is more likely to be successful when there is a consensus about research based, clinical experienced and client experienced evidence and when this evidence is drawn from research that is well conceived, designed and executed (Rycroft-Malone, Kitson, Harvey, McCormack, Seers, Kitchen & Westbrook, 2002). In formulating our principles, we took the research results in the peer-reviewed literature at face value, without questioning either the soundness of the methodology or the availability of both practitioner and client-based evidence. We limited our searches to English language publications up to and including 2019. Furthermore, some principles are also better supported by theory than others.

Future research should involve young people in care, care leavers and direct service practitioners in not only validating these principles, but also elaborating on them so that they can be operationalized and evaluated in real life settings. Furthermore, we recommend conducting a systematic review of the current state of the evidence regarding practice and policy in promoting successful transitions to adulthood for young care leavers to better understand the weight of the evidence for each principle. The research on transitions to adulthood from care has been

multiplying at a significant rate (Marion & Paulson, 2019), and every year there are more and more peer reviewed publications on this topic.

4.3 Conclusion

This project drew on a consensus among fifteen international care leaving scholars to identify core principles based on current research about what best promotes the transition to adulthood from government care. These principles operate at all levels of the social ecology, suggesting that optimal conditions for care leavers requires special considerations at policy, organizational and operational levels, as well as at the level of direct intervention with individuals. The principles also align with the call for participation and provision of appropriate services outlined in the UNCRC (1989), as well as with the conditions outlined in the FICE manifesto regarding ten standards for care leavers (FICE International, 2016). While principles for practice can never be divorced from context, they highlight important directions for improving the prospects of care leavers all over the world.

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Appendix A: Researchers who contributed to the Research into Practice Project

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Highlights

- Research on care leaving has increased rapidly over the last two decades.
- This article summarizes principles based on research that can guide practice.
- E.g. the importance of supporting the autonomy of care leavers is underscored.
- Ensuring preparation for leaving care is critical, and must include education.
- The principles align with the United Nations Convention on the Rights of the Child.