Policy framework for a strengths-based approach for youth care leavers[1]

Core guidelines for organisations and after care workers

The purpose of the policy framework is to guide decisions and achieve effective and efficient outcomes for after care in European youth care. It outlines aims and purposes for local youth care providers, which can be used as a statement of intent.

The A Way Home project is calling for After care Policies at EU level. Authorities, service providers and youngsters in youth care all over Europe are struggling with aftercare strategies. Too many youngsters who have left care, face exclusion from sustainable housing, work, education and leisure activities. A more effective preparation of life after care is needed, based on a better understanding of the specific needs of the youngsters. In our search, we did not identify a European member state with a clear and working 'after care policy', that provides guidelines and tools to their service providers on how to prepare their care leavers.

The project is funded by the European Union's Rights, Equality and Citizenship Programme (2014 – 2020). It aims at supporting policy and practice in four ways: (1) by developing an inspiring policy framework, (2) by gathering methods for after care, (3) by training youth care workers and (4) by examining the application possibilities of the Canadian A Way Home model, a structural network approach to fight youth exclusion. Information on the methods and the A Way Home model is available on the project website: https://awayhome.eu/.

Please note: The policy framework is directed to all European organisations and professionals working with out of home care leavers. When developing the framework, it was important to find a "shared language that is generic enough to allow exchange about different experiences, but sufficiently detailed and nuanced to accurately capture the reality of the differences" (Pinkerton, 2011). Flanders and Carinthia are the first European regions to implement the framework. We advise the reader to take into account member state policy and practice and invite them to adjust the framework to local standards and needs.

CONTENT

1   Introduction

Youth in care faces serious challenges when leaving care. This has been the focus of research and policy for numerous years. Children's rights in youth care are high on the EU agenda[2]. Despite the awareness, young care leavers remain an invisible group in many statistics on employment, education and disadvantage. Even though they make up a relatively small population in most European countries, more needs to be done to counter their vulnerable situation[3].

Leaving *out of home care*[4] is widely being recognised as a child welfare issue, but there is little information available for policy and professionals on how to improve. Many institutions and authorities (on different levels) with a responsibility in youth care, experience a struggle with aftercare strategies. How can we prepare and support young care leavers in an efficient and effective way? The main answer in the field is creating 'aftercare housing' or 'in between housing' programs. Housing programs in themselves are of great importance to tackle the youngsters' vulnerability. But they do not focus on guidance towards advanced skills and the creation of a network or on how the transition can be facilitated when a housing program is impossible or unwanted. This guide or framework will provide inspiration for organisations and professionals to bridge the gap for out of home care leavers. After care needs to build bridges to many fields of care.

This guide starts with a brief situational outline of the troublesome character of leaving out-of-home care. The first section highlights youngsters' voices at the centre of the youth care process. We give a suggestion on how to involve youngsters and care workers, to put the guidelines into practice. Local actors are requested to clarify and concretise the policy framework into a protocol and procedure with roles, responsibilities and actions[5].

By starting from the voices of the young people and insights from children's right approaches, we emphasize a strenght-based approach for after care in the second chapter. In the third section, six guidelines are presented for a strenght-based after care policy. Each guideline is illustrated by quotes of youngsters and care workers in the project and by results from training activities with care workers. Finally, in the two last sections the Carinthian and Flanders regional policy on after care is explained.

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[2] See for instance:
https://ec.europa.eu/info/sites/info/files/10_principles_for_integrated_child_protection_systems_en.pdf
[3]   More information on the importance of children's rights in alternative care can be read in: https://www.unicef.org/protection/files/Moving_Forward_Implementing_the_Guidelines_English.pdf
[4] In this document we will try to consistently use the word "out of home care" meaning residential care and foster care. It seems not useful to differentiate between them on the level of policy guidelines, since the recommendations for both ways of working are very alike. However, different protocols and procedures might be required.

[5] The framework consists of guiding principles. Protocols and procedures can be a next step. These need to be developed on a more local level, since they are highly dependent on situational characteristics. A procedure is an established way of dealing with things, in a predescribed order (the steps to take when doing a task). A protocol holds decission making rules and precise instructions.

1.1 Young people's voices on after care

What do youngsters think about care leaving and suggest to improve?

The importance of a timely and adequate preparation for care leaving and for after care support have been stressed by youngsters several times (Cantwell et.al. 2012). Many research studies have gathered similar voices of youngsters who aged out of the youth care system. For example, a 2005 note summarizes as *"They speak of the frustration of being 'cut off' from the system once they reach their 18th (or 19th) birthday to fend for themselves, with limited life skills, financial support and support networks. The transition from care is alluded to as a process that may take many years, not an event triggered by a youth's 18th (or 19th) birthday. In most cases, the youth were not emotionally ready to live independently. Youth living with their families don't typically achieve independence until their mid- to late-twenties, whereas youth in care are "expelled" from the system at age 18, whether they are ready or not"* (Tweddle, 2005).

Similar results such as these, are found in a workshop organised in the A Way Home project (see also attachment 2). Voices of Carinthian and Flemish youngsters were collected. During the workshop, the youngsters reflected on what is important in the preparation of leaving. Questions were: What helped or impeded you? What are your dreams for an ideal leave of youth care? At what age do you think you would be ready to leave? Results of the workshop and insights in literature draw attention to more 'strengths-based client participation' of the youngsters in their care path and in the organisations.

Youngsters believe that there is no ideal age to start preparing youth care leaving. The preparation of care leaving should depend on the development of the youngster and its surroundings. Youngsters develop at a different pace. It is important to ask them, when they consider to be ready. However, a timely intervention still is necessary. Youngsters suggest the preparation needs to be part of the 'regular' care path. When the preparation starts too late, it is only focused on a few practical and administrative issues. Many things need to be learned or prepared for, so it should be part of a stepwise process.

Important to know is that many youngsters do not wish to be guided by 'one method'. They believe it is important that a care worker can choose between and be creative with methods. This is clearly a call for what is called 'an eclectic practice'. Combining methods and insights and not being afraid to switch, is what the youngsters ask of the care workers. A pathway adjusted to their needs is required, instead of one method that fits all. Choosing a method should start with the question what the youngster needs.

The results underline the need for a strengths-based approach. Transitions are often approached from a 'limitation' perspective. Even though there are many constraints in the process, youngsters clearly ask to be escorted to more independence, by starting from what is going well in their lives (look for opportunities together). Youth in care above all askes to be accepted as a participating member of society. They invite society to give them real chances of improvement and memberschip (Van Audenhove 2016).

Quotes

"When you live independently, you are expected to manage everything on your own from the start. Nothing much is left of the network that you have built in the institution. The assistance stops soon and abruptly, and you do not know who to turn to in the event of difficulties and problems." (Youth care leaver, in: Aldanas, 2016).

"I see the future in a positive way (…) I do not expect troubles, no, because I just graduated and with my diploma, things will go fine" (Youngster, in: Van Audenhove, 2016:77).

"Without a diploma, you're nothing. I want to be able to prove to everyone that I did it. They used to say I wasn't going to achieve anything in my life" (Youngster, in the A Way Home project)

1.2   Why is an after care policy framework needed?

The UN resolution on Alternative Care (2010) prescribes that there should be an aftercare trajectory planned for every young person leaving care. Too many youngsters who leave care become structurally homeless (sometimes after a first period of independent living) or feel left alone in their upcoming path to independence. There is a significant link between how people are prepared on the transition during care and how they cope after their care trajectory (Stein & Dixon, 2007; Wade & Dixon, 2006). Research shows that aftercare services are not sufficient to uphold a standard of living for youth leaving care. For many young people, it is the lack of guidance in the transition from youth care, and the lack of interaction between essential services and systems like employment, housing, social and health supports, that lead to young people falling through the cracks.

Their situation requires a separate approach.

1.2.1   Vulnerability before, during and after care

Youth that has grown up in care are more subject to a series of risks in later life, in comparison to the general population. They show poorer educational outcomes, have a higher risk for unemployment and homelessness, have more problems with mental health, and tend to become parents on a younger age (Barn, 2010; Stein, 2006). Before getting into care, young people have had poor experiences that are not always recognised the way they should during their stay in care, which does not contribute to a positive care experience. Also, the transition from care often happens in a troublesome way. In short, there are troubles before, during and after care, all contributing to the aforementioned problems (Barn, 2010).

1.2.2   Two transitions piling up

The whole transitioning process has a particular background. Youngsters in residential care are often 'forced' to transition to adulthood on the age of 16-18, whereas youth not in care must make this transition only at the age of 20, on average (Stein, 2006). Besides, youth leaving care often lack support from the family and surroundings and seldom have a secure option to return to the care (Munro, n.d.; Naccarato & DeLorenzo, 2008; Höjer & Sjöblom, 2014; Stein, 2006). Acknowledging that there is a

difference in policy in countries and between different systems of care, one has to recognise that there is only little proper support in any situation.

People leaving out of home care go through two different transitions that impact their journey. On the one hand they obviously leave the out of home care that has been their reality for the past months or years, and on the other hand, they go through a whole range of different life events, that every young person goes through (a transition from child- to adulthood). The youngsters must combine these two changing processes in their lives and these processes influence each other on a day to day basis (Harder et al., 2011a). The transition can also be split in a different way. A practical one: separating from the care, protection and supervision of the child welfare system to a position of autonomy and responsibility. And an emotional one: becoming emotionally independent of care givers.

1.2.3   Leaving care has an impact on many life domains

These transitions entail different hazards for the youth, which range from mental health problems to difficulties at school, or problems to find or maintain employment. Youth coming from out of home care find themselves often in an economically weak position that impacts their access to the labour market (Höjer & Sjöblom, 2014, Stein, 2006) or in finding housing in their adult lives. These issues and searches influence each other, what makes it hard to work on just one of them (Broad, n.d.). Therefore a recommendation is to work on different life domains at once when preparing youngsters for transitioning. If professionals focus only on the practical transitioning to independent living, the youth tends to slip out of their hands, since they do not feel listened to and feel left alone with their questions (Clé, 2015).

1.2.4   The risk on homelessness is alarming

In Europe the most homeless people are young and middle aged, respectively between 18-29 and 30-49. The group between 18-29 makes up 30% of homeless people. The highest proportions are found in countries in northern and western Europe (this is partly because in these countries people tend to leave home earlier than in eastern Europe) (The Foundation Abbé Pierre – Feantsa, 2015). Youngsters leaving care are part of this risk group.

> **"Youth Rights Right Now"**
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> According to FEANTSA, youth transitioning from out of home care are in particular risk to become homeless and this is the group that has very little access to their human rights (FEANTSA, 2016). We refer professionals to this guide (Youth Rights, Right Now, FEANTSA, 2016) to inform themselves about the relevant human rights and how to work with them regarding the risk of homelessness for youth in independent living.

1.2.5   A strong urge to become independent and a lack of social safety net

It is key to mention that young care leavers often feel a 'desire for autonomy' at a young age and do not necessarily wish to make use of social services once they have left care (Van Audenhove, 2016). The option exists in several countries to extend the care until 21, but research shows that most youth (want to) leave at 18 (Van Audenhove, 2016; Van Audenhove & Vander Laenen, 2010). This period in

life is characterised by the fact that people's options are open and that they think about their possible future. People generally explore, and want to experience different things in this stage of life (Arnett, 2000). Consequently, staying in care is not always a priority for youth. Leaving care at 18, however, often makes them vulnerable in a society where most youngsters leave their families at a much later age. Young people need a safety net, regardless of how they see their future. People are interdependent and cannot go through life on their own (Rapp & Goscha, 2006; Aldanas, 2016). A safety net provides young people leaving out of home care with the resources they need to go live independently. This is often absent in their lives.

1.2.6   Gender matters

Gender has seldom been researched on the subject of out of home care, though it has an influence on the whole context of out-of-home care (O'Neill, 2007). Boys and girls are sometimes admitted in out of home care for different reasons. A larger group of boys in care originates from criminal behaviour, whereas for girls they are rooted more in family problems (e.g. abusive or unhealthy family patterns), sometimes even making girls to apply for out of home care themselves (O'Neill, 2007; Handwerk et al., 2006). Boys are more described as aggressive, antisocial and delinquent. Furthermore, boys are more often directed to out of home care by their family than girls, a reason might be that boys' aggressive behaviour is noticed more quickly (Handwerk et al., 2006). All this asks for a different approach from the staff towards them, especially while preparing for the transition to after care, professionals must have a focus on different expectations and the (family) situation they might return to.

Research shows that the outcomes of boys or girls exiting out of home care are also different. To name a few: girls are more vulnerable after leaving care; they are more likely to become a teenage mother, they are more subjected to sexual violence, their educational outcomes and job opportunities are lower, and they have higher risk to self-harm (O'Neill, 2007; Hill, 2009; O'Higgins, Sebba & Luke, 2015; Van Audenhove, 2016). Therefore, it is vital to spend time on skills to develop relationships and figuring out their identity (Abela et al., n.d.); and make sure that education on, for example, domestic tasks is equally given to boys and girls (Stein & Dixon, 2007). While in residential care, there are contradicting outcomes on whether singe or mixed gender places have an influence on the lives of the youth living in residential care. It is not the placement per se, but the relationship towards the care takers that is the main measure for wellbeing while in care (Copley & Johnson, 2016).

1.2.7   Ethnicity matters

Young people with a different ethnicity than the dominant, sometimes experience troubles with defining their "racial and ethnic identity" (Barn, 2010: 834). Youngsters identifying with another ethnicity than the general population might be at risk to internalize racism, or have difficulties developing a positive stance towards their identity (Barn, 2010). In research on out of home care, race is something that has not had much attention, even though the largest amount of people in out of home care in American and UK settings is not white (Jewell, Brow, Smith & Thompson, 2010; Bywaters et al., 2017; Owen & Statham, 2009).

When people do not have the ability to define their identity in a good and stable way, young people might feel detached, disconnected and lack a sense of location in society. Providing a stable environment and making sure ethnicity and culture can be expressed in a positive way, will make youngsters feel accepted and give them a safe basis to start living independent life, start education

and build resilience (Barn, 2010; Jewell et al., 2010). Educating professionals and foster families in cultural competences might be a solution in the direction of better care (Jewell et al., 2010).

Presently, unaccompanied minors are a relatively 'new' group of youngsters in out of home care. Caregivers should take their history into consideration when taking care of youth that were/are unaccompanied minors (Schippers et al., 2016).

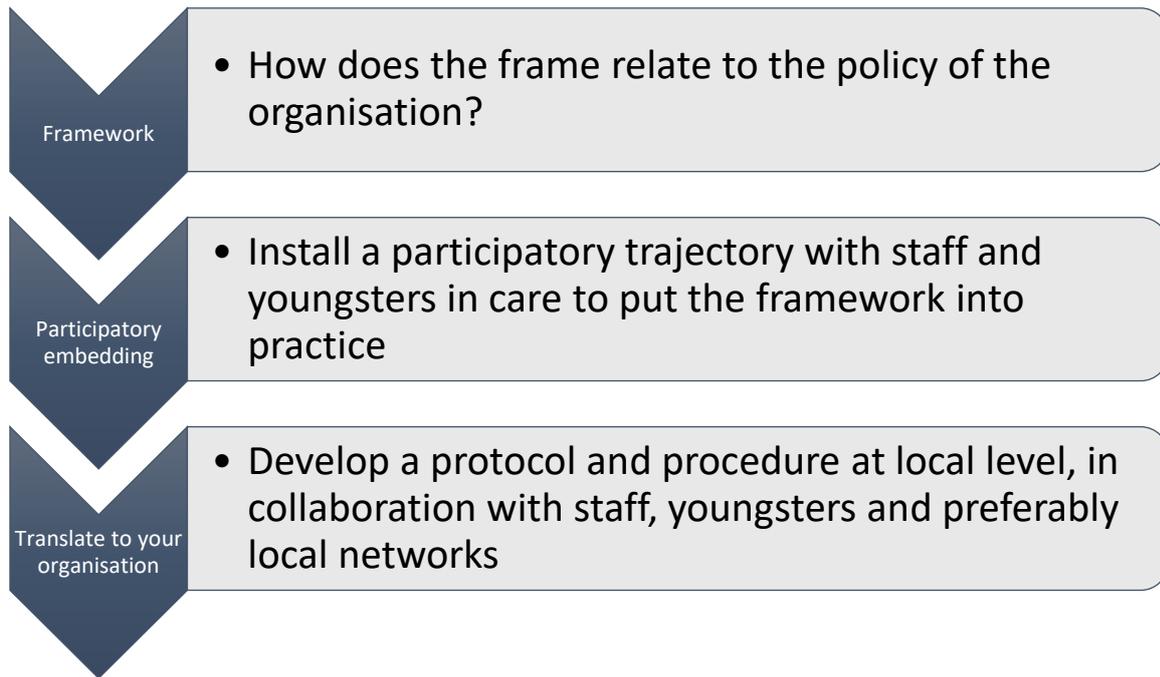### 1.2.8   Disabilities matter

Young people with a physical or learning impairment are over-represented in the numbers of not participation in education, training or employment (NEET) and in care. This makes them more vulnerable than their peers and requires a different approach on how they should be guided towards managing their life after care (Dixon, 2008, Stein, 2005). Furthermore, their needs for housing and guidance are sometimes more specific than for other people. Research shows that people with a disability leaving out of home care do not experience a significantly better or have a worse quality of life than other people (Dixon, 2008). Though, they are at particularly higher risk of poorer outcomes in their adult life; this includes inter alia: their potential future experiences with access to health care, employment, inclusion and independent living (Kelly, Dowling, & Winter, 2012).

1.3   How to use the framework?

The framework outlines guidelines that can be used as a statement of intent for organisations. The theoretical background for the framework is based on the strengths approach of Rapp and Goscha (2006) (see paragraph 2).

Youth care providers can endorse the guidelines as quality recommendations, and have the freedom to develop a protocol and procedure for after care, based on the uniqueness of the local operation. Inspiration for the implementation of aftercare strategies is available at the A Way Home website.

We recommend organisations to use the framework in a participatory trajectory with staff and youngsters, in order to achieve sustainable results. A suggestion on how to work participatory on the framework in the organisation is attached (see attachment1).

Framework

- How does the frame relate to the policy of the organisation?

Participatory embedding

- Install a participatory trajectory with staff and youngsters in care to put the framework into practice

Translate to your organisation

- Develop a protocol and procedure at local level, in collaboration with staff, youngsters and preferably local networks

2 A strengths-based approach

The framework is developed from a strengths-based approach. Strengths-based approaches "concentrate on the inherent strengths of individuals, families, groups and organisations, deploying personal strengths to aid recovery and empowerment. In essence, to focus on health and well-being is to embrace an asset-based approach where the goal is to promote the positive." (Pattoni, 2012). A strengths-based approach corresponds best with the voices of youngsters. Their call for a focus in after care strategies on possibilities and solutions, instead of on problems and risks, is central to this choice. Moreover, evidence is growing that supporting people through a strengths-based approach has an impact on social networks and well-being (Pattoni, 2012).

Too often there is a cut in the guidance when young people leave care. They feel left alone, even though they have possibilities. The transition sometimes is too abrupt for them to cope with the changed situation. When there is an emphasis on the context of the youngster, in preparation of leaving out-of-home care, young people can feel more supported, as they are more aware of their possibilities and surroundings.

We opted for the approach of Rapp and Goscha (2006). This approach holds the idea that supporting people starts from a partnership.

The idea is to, in this partnership, "identify, secure and sustain" resources that are external and internal (e.g. social relations, as well as competencies). The caregiver's task is to assist the person as a "whole human being". Focussing on both the internal and the external resources of the person creates a safe environment for the young person to achieve life-satisfaction. The model has gotten the critique that it shows a too positive view on life, but this is countered by the fact that it makes room for setbacks and that the strengths of a person can be put in place to deal with those (Ramon, 2013).

Furthermore, the strengths approach uses the concept of *interdependence*. At present, there is a dichotomous view in care on dependence and independence, and the attempt is to make people independent. Yet, this dichotomous view and the idea of making people independent, can be very

> **The strengths-based approach of Rapp and Goscha (2006).** This approach was developed for case management with people with psychiatric disabilities. This target group is different from young people transitioning from out of home care, but the holistic and interdependent approach on a person's life can be applied to more situations. Because of its positive and comprehensive approach towards people, it is a useful view on transitioning (Rapp & Goscha, 2006). Since its development, it has been used in different contexts, with different target groups (Rapp & Sullivan, 2014).

harmful. A state of independence is not possible to reach, every person relies on people and services around them, making them *interdependent*. This state of being should be acknowledged by professionals. The goal that Rapp and Goscha put forward is to work towards a "*mutually satisfying interdependence*" (Rapp & Goscha, 2006). Meaning, a state of being in which the youngster feels supported and strong enough to live on their own in relation to other people. This interdependence is simultaneously a state of being and a goal to reach. Working on this can by using the methods in the toolbox and keeping in mind the principles laid out in this framework (see chapter 3) (Rapp & Goscha, 2006).

When applying strengths-based care in adolescents, it is key to be aware of when the youth does not believe in their own capacities and the goals they set for themselves. Since lives of adolescents are influenced by their surroundings more than in adults' lives, this can alter the direction and attention points in the guidance more often than expected (Mayfield, Arnold, Walsh, Oldham & Rapp, 2007).

Interdependent: as Rapp and Goscha write, it is impossible for people to be completely independent. Human beings are not made to live a life away from social contact. Therefore, they talk about being *interdependent*, meaning that everyone is connected with their social surrounding and that we rely upon it. A state of being in which the youngster feels supported and strong enough to live on its own in relation to other people.

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3   Six strengths-based guidelines for after care

We present six guidelines that are based on the approach of Rapp and Goscha. Not all of them are literally taken from the work of Rapp & Goscha (2006), some are adapted to make them fit even more in the specific situation of guiding young people leaving care. One guideline we added, since policy advocacy was not addressed in Rapp and Goscha's approach.

3.1   Guideline 1: Believe that young people in care can recover, reclaim and transform their lives.

Before getting into care, young people often had poor experiences that are not always recognised during their stay in care. This does not contribute to a positive care experience. By focussing on the attributes of the client, keeping in mind hopes and expectancies, issues concerning their future life can be countered. At least to a certain extent. Choosing the method for preparing on independent living together with the youngster, helps them to feel ownership over their process and enhances the belief in their capabilities.

Youngsters in A Way Home

 "I need someone who can make me believe in myself, that i will make it, and to show me my potential"

"Motivate us to do better, to reach higher, to study and make us believe in a better live."

"Well, I actually wanted to become an educator, that was my original goal. But I didn't do that. And now I comfort myself with the fact that I want to become a parent some day and raise my own children…"

"I wanted to do what I wanted to do and I tried to enforce that."

Care workers in A Way Home

"Loneliness and lack of self-confidence are recurring themes among young people. They don't dare to look ahead, they don't dare trust that it will be alright, they don't dare to dream."

Young people have to be prepared for the psychological transition. This means being able to cope with the transition to independence as well as going through the child- to adulthood transition at the same time. Resilience is an important factor. When youngsters are more resilient, this will help in coping with the transition from out of home care (Stein, 2006, 2008). A lot of young people that go into out of home care have experienced an instable connection with their birth families. Attachment theory learns that this has an impact on their later life. Disrupting the bond they have with the care takers brings these experiences back and adds up to feelings of rejection and failure (Downes 1992, in Stein, 2006: 424). Resilience is strengthened by among others, positive experiences and supportive relationships with people in the environment. The care organisation should invest in working with the youngsters on self-esteem, self-confidence and realistic adaptation to the situation. Take the youngster's pace when getting to the point of stopping the guidance (Clé, 2015). The leaving care may not be seen as 'abandonment' (Guma & Jones, 2012). Follow-up care is best done by someone the youngster already knows or at least has met. This way the follow-up goes smoother (Clé, 2015).

Young people leaving care are in the midst of defining their identity. Increasing young people's stability is helpful for them in being able to figure out who they are, while dealing with the turbulent transitioning process (Stein, 2018). While working on these aspects of a young person, one helps them thinking about their identity, which is evolving very intensely and is influenced a lot by the transition (Barn, 2010). Many different facets are part of one's identity (e.g. (self-perceived) gender, age, class, sexual preference and nationality) and make people susceptible for discrimination in (later) life, which stresses the importance of paying attention to these aspects in preparing for after care. We believe that if awareness is raised about these aspects of identity, they can be seen as strengths and help people leaving care construct their personality in a healthy manner.

Summary:

- Truly belief in what they can achieve.
- Do not consider them as a 'weak', 'difficult' or 'lost' group.
- Mind the fact that they are finding out and defining their identity whilst transitioning and that this identity (might) have an impact on the reason for admitting and on their journey after care.
- Choose the method to prepare for care together with the care leaver, to put them at the steering wheel of their path.
- Support the youngster's ability to take their life in their own hands, as much as possible and wished for.

3.2   Guideline 2: Ensure that the focus is on individual strengths rather than on deficits

Young care leavers are the main actors of their own future, so it is important to take their perspective into account. Young care leavers see their future perspective in roughly three ways: a positive future perspective without problems (they 'move on'), a positive future perspective with some temporary problems ('survivors') and a negative future perspective with insurmountable problems during the transition (they feel as if they are 'victims'). People that 'move on' are very capable (resilient) of managing their situation. Survivors have the support from their professional and personal environment

and link their resilience to this environment, and victims are in a very disadvantaged position and lack strong relationships (Stein, 2006; Van Audenhove, 2016).

Youngsters in A Way Home

"Positive experiences and activities give memories and they give us successes that help in life"

"A positive attitude is important"

Care workers in A Way Home

*"*Working with small steps and keeping expectations low can help: focus on what is already going well. Which small steps are already going well? This is important to know."

To be able to *move on* as a young person after care, the stability provided during the care in preparation to the life after the care is of utmost importance (Höjer & Sjöblom, 2014; Wade & Dixon, 2006). When events for young people in care were bad or when the transition did not go as wished, research shows that it is not always the end of the world; some youngsters do get into better situations after leaving care (Wade & Dixon, 2006). Youngsters already have a lot in them that can be encouraged, but it is a task for the caregiver to discover these strengths in co-operation with the young people (using different methods), so they realise themselves that they have several possibilities (Rapp & Goscha, 2006).

Summary:

- To prepare people for life after care, care workers have to recognise their capacities
- Focus on strengths, but don't ignore difficulties
- Plan education, training or work together with the young person, so they have something to look forward to that will put their strengths in use.

3.3   Guideline 3: Use the community as an oasis of resources

A social network and social capital (a social ecology of support) are important factors in coping with the transition process (Pinkerton, 2011). The network of the youngster, when present, should be addressed when preparing for the transition (Clé, 2015). Working with the youngster's network, makes that their expertise as a client comes at the focus of the process, instead of the knowledge and experience of the caretakers.

Social support from a meaningful social network (informal and/or professional) is crucial for a positive transition. To have a good outcome in aftercare, a network is a central factor, regardless of whether this is a formal or informal/family and friends network, or a combination of both (Stein & Dixon, 2007). In the (after)care trajectory, there needs to be attention for emotional and social support and social and relational skills. If an informal network is missing, the formal network (professionals) becomes more important. After leaving care, the youngsters experiencing a positive transition – despite the

absence of a supportive informal network - had a social worker they could talk to about their problems (Van Audenhove, 2016). It is important that the social worker supporting the young person in youth care, and with whom they have a positive relation, is also available after the young person has left care (e.g. via outreaching work) (Van Audenhove, 2016). Providing a social network and after care contributes to stability. A study conducted in England found that when young people had a stable environment in their last placement, they have more positive educational outcomes after leaving care (Stein & Dixon, 2007).

When preparing youngsters for out of home care, learning practical skills is often stressed, which is good, but not enough. As stated at the beginning, youngsters leaving care are interdependent (as is every human being) so their network is an important source of help for them. We acknowledge that this network might be very small, but working on sustaining and/or broadening this with people and services will give a youngster the support they need after they have left care. Practical skills alone are not enough to continue life after care, they are in need of bonding, bridging and linking capital. This also contributes to the case manager-client relationship described in guideline 5.

An important note on the network-connection is that "family re-unification should be considered and encouraged only if it is in the best interests of the young person. It should be a matter of choice, not a solution due to a lack of other options. Any cooperation with the family of origin should be carefully considered and thoroughly planned" (Guma & Jones, 2012). Relationships with the birth family and peers might even be problematic and a difficulty in being able to move on (Guma & Jones, 2012; Stein & Dixon, 2007), so steps towards this birth family should be taken very carefully.

Youngsters in A Way Home

"I have never really had much contact with the outside. Because I'm from the indoor care, I went straight home to my mum and I didn't know anybody there, neither the neighbour upstairs or downstairs, nor anybody else. M. (*from indoor care*) was in the same city, so I at least knew her."

"With us, it was also often the problem, 'we can't drive you there'. Then I organised something for myself and then the answer was, no you can not do it. Then I thought, say it right away and don't be such a coward."

"It is also easy in care when there are 40 children, and if I don't like you today, I will just play with someone else. So you don't have to deal with conflicts. Now, it is difficult to approach people, how to make contact."

"Don't underestimate our loneliness, please help me expand a healthy friend circle."

Care workers in A Way Home

"It's just really difficult. The reason is often to be found in the parental home, so it is difficult to let other children (friends) go to that place." Reply of a youngster: "Yes, now I understand a lot of things, but as a child back then it was really difficult."

"I experience it again and again with the smaller children, in case of birthday parties, that it's very difficult to make proper contacts with other parents, that I have to do things with them regularly so that the children get along."

"Mobility is a real problem, we are situated far away and have to drive the children, but they don't want to be seen in our bus or car. Sometimes we park two streets further."

"Knowledge about the use of networks is limited. There is a focus on maintaining and restoring previous family ties and formal networks while there is a lot of potential in creating new networks in the neighbourhood, with friends, leisure time ..."

In foster care there are some positive results in working with mentoring. An experimental study shows that the youngsters improved their social skills and felt more comforted and trusting in relationships (Rhodes, Haight & Briggs, 1999). In an American study, mentoring is related to having less stress and a greater satisfaction in life (self-perceived results). Besides those results, youngsters are less likely to have been arrested by the age of 19, when having had a mentoring relationship. It seems to be best to have a mentor that is not a person from the kin/family of the youngster. A mentoring adult also has the possibility to be a person that the youngster is more likely to show responsibility to, making them less likely to show criminal behaviour, for example (Munson & McMillen, 2009).

Connecting youngsters to their community in a formal and informal way, will give them a soundboard for questions they have and will make them feel less alone.

Summary:

- Don't lose sight of the possibilities of the surrounding of the youngster, even if they are small
- Connect the youngsters to their network or help them build up one outside care.
- Invest in their social relations, formal and informal
- Combine methods that train them in reinforcing and enlarging the social network (do not depend on one method).

3.4   Guideline 4: Realise that success depends highly on the case worker - client relationship

As becomes clear throughout this document, there are several critical moments that can create troubles for youngsters in or leaving care. Many youngsters leaving care have created an aversion towards care, so they want to leave it behind as fast as possible (Van Audenhove, 2016). Yet, youngsters need to be surrounded by a warm, relying network in the organisation and outside, and have to be able to make the transition stepwise (Clé, 2015; Stein & Dixon, 2007). Professionals can do this by checking with the youngster what they want instead of deciding this for them. Since out of home care is often unpredictable it is hard to plan on aftercare (Harder et al., 2011a), but it is not impossible. During the whole guidance the caregiver has to keep in mind that there will be a moment that independence is the next step for the youngster and has to reflect upon this throughout the actions they take in the guidance. The problem that comes up is that there is always too little time to give the youngsters what they need, to make the transition in a successful way, or that there is no preparation at all and that the youngster has to depend on themselves (Clé, 2015).

Youngsters in A Way Home

"It is very important that the caregiver works together with the youngster to help in the best possible way."

"Good care is when the guidance sees you as more than a number."

Care workers in A Way Home

"Taking informal time for young people and being present is important. Really making time for young people in an informal atmosphere, hanging out to build a relationship, doing ordinary things (often around the theme of food, drinks, cooking, ...), are important for young people and sometimes brings more to the fore than formal activities."

"Changing counselling makes it difficult to reconnect after the counselling, youngsters do need stability. Sometimes you can celebrate a birthday during and after care, which can be nice for the young person. Keeping in touch via facebook, texting on special occasions, ... can give young people the feeling that someone is there, even if they have left care, someone they know should be available to them."

As described earlier, the case manager has as a task to act as a *traveling companion*. The way of working of an organisation can help youngsters to find their strengths and give them the resources to grow. It is sad to see that building a relationship with the youngsters is prohibited or that the relationship one has, is ended abruptly once a youngster leaves care.

Summary:

- Provide a warm, relying network. Build it together with the youngster, outside care.
- Be clear towards the young people about their upcoming in(ter)dependence
- Plan as well as possible, to provide a grip for the young person
- Be a traveling companion for the youngster and be professionally close to them.

3.5   Guideline4: Ensure that the youngsters voice is at the centre of the care process

A very important factor for youth to create meaning in life, is being able to reach dreams (Van Audenhove, 2016). Dreams are different for every youngster, but it is the task of the mentor or the *traveling companion[6]* to make sure they reach the point they want to reach. In the relationship they have with the youngster, the communication has to be clear and appropriate and *with* the youngster, instead of *about* the youngster with other people.

Generally speaking, it is important in the youngster-care giver relationship to emphasise continuity, managing the transition, and informing the youngster. Aspects contributing to this continuity are: attachment, consistency, trust, flexibility and commitment (Naert, et al., 2017).

Continuity in managing the transition points to the complementarity and timing of interventions by other services. Also sharing information about the path of the young person to other organisations is part of this goal. While doing this, one should involve the youngster in this (Naert et al., 2017; Tobon, 2015; Wade & Dixon, 2006).

Then, there is the *informational continuity*. Information points to both the care plan that has been undertaken and the information communicated to the youngster (Naert et al., 2017). It is considered as one of the crucial aspects in continuity of care; when information is not passed between care takers, people have to pass this themselves, which often means that they should describe their story with every new (possible) care taker or even have to take a liaison position in their own care programme (Tobon, 2015).

Finally, there is the *experienced continuity*. This means that the young person needs to have a feeling of understanding, support and being heard through their process. There is the risk that the youngsters feel that their environment is saturated with social workers which will make them want to distance themselves from this. The key is to find the right balance in this experienced continuity in interaction with the young people (Naert et al., 2017; Tobon, 2015).

Youngsters in A Way Home

"But that is the point of making your own mistakes. That you can see 'ok, maybe this isn't so good for me', within certain limits of course. So I believe that if you can make certain mistakes before you are 18, nobody will ask you what's wrong with you later. We could make too little mistakes as a child or as a youngster. If something happens later, then you don't have anybody to help you with the shit. "

"We need some free space, where we can experiment."
"Work on what <u>we</u> want to learn."

Care workers in A Way Home
"Letting go and dealing with rules is a recurring theme among care workers. Nowadays it is experienced in the care sector that avoiding liability has far too strong an influence. As a result, young people are not allowed to experiment, they get too many rules. The distinction between rules and agreements is important. Rules are imposed; they are non-negotiable. Agreements are made together with young people. Young people are quite willing and even asking parties to make

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[6] Originally from Walter Deitchman, 1980 (in Rapp & Goscha, 2006).

agreements. An example: one facility made a list of existing rules in order to rationalise them (which are still important today and which have only grown from a historical perspective). Or one can vary the rules: the number of rules per young person is the same, but the rules themselves can differ."

In the process of leaving care, the youngster has to have the decision making power and the caregiver is the *traveling companion*. Yet, the caregiver has to make an effort to continue this relationship in a healthy manner. This means that the caregiver is there for them and they guide them along the way to adult life and/or other care (Naert et al., 2017). Finally, professionals can support youngsters in making relationships outside the residential care (Stein, 2006; Pinkerton & Rooney, 2014).

Summary:

- The youngster is the centre of the process
- Be a traveling companion to help them in guiding them into their future
- Show attachment, consistency, trust, flexibility and commitment
- Make sure the process shows continuity
- Try to use everything that is available, as a traveling companion and as an organisation. Sometimes, the youngster does not know what is possible, until they are told.
- The different kinds of continuation through the process should all be taken care of; when one lacks, others tend to suffer as well (Tobon, 2015).

3.6   Guideline 6: Raise awareness and policy support

Large scaled change is situated on a higher level than what the individual care taker can realise in the guidance. In the model of Rapp and Goscha we cannot find a guideline regarding to policy influence. Therefore, we decided to add a guideline to direct policy makers. Policy rules and the funding organisations receive, are still key issues in how much time can be spent on every person and the pressure caregivers have to work with (Burns, Hyde, & Killet, 2016).

The UN resolution on Alternative Care (2010) prescribes that there should be an aftercare trajectory planned for every young person leaving care. Developing this by law and covering housing, employment, family reunification, education etc. is recommended, alongside an adequate budget allocation (Guma & Jones, 2012). In this policy the youngsters should be regarded as experts in their care path (Quality4Children, n.d.). Young people should get relevant information in time, regarding their rights, especially on important aspects of life such as: housing, accommodation, child protection, etc. Ideally the support should be available for care leavers until they are 25 years old (Stein, 2018). Some sources state that children should have the possibility to return to the care placement up to the age of 21 (Action for Children, 2014).

Summary:

- A call for policy to rethink their laws and regulations on out-of-home care and make them (more) client friendly
- Raise awareness for the voice of youngsters (e.g. look for funding for a special interest group on youth care experiences)
- Facilitate collaboration between relevant welfare policy domains (e.g. youth care, youth work, employment, education)
- Improve the knowledge base by doing research and gathering data: collect data on the youngsters so there can be a better understanding, on small interventions and on larger programs.

Care workers in A Way Home

*"*Organisations and care workers indicate that there is a need for exchange around knowledge, experience and social services. They ask for information to be made available because it is difficult to keep abreast of all initiatives at regional level.*"*

"In many facilities, aftercare is still too much voluntary. What you do outside working hours for the young person, is up to you and is not embedded. That is a pity, because it depends on who the youngster has as a supervisor, whether the aftercare is sufficient. After care takes time."

4   After care policy in two European regions

4.1   Carinthia

In Carinthia the care for young adults is granted via Youth Care Act, §48. It's foreseen that the young adults receive the youth care until they are 21, but only when needed and if the young adult wants it. The support for the young adults could be housing, employment, training and education or individual social support like psychotherapy or assistance or training how to deal with topics of daily life (house holding, money, going to work, insurances, etc.).

Youth welfare is controlled by the government, which sets up the policy. There are about one hundred social workers employed by public authorities, working in the ten Carinthian districts. At the time 900 minors are in residential care or foster families.

Youth care is granted to all minors living in Carinthia via the Youth Care Act (Kärntner Kinder- und Jugendhilfegesetz – K-KJHG, 2013). Minors receive individual support that ranges from ambulant services for the whole family up to care in a foster family or foster homes or assisted living.

If there is no support from youth care possible, the young adults can receive the so called "Mindestsicherung" (needs-oriented guaranteed minimum resources). Single living young adults may receive 844,46 Euro per month. 75% (633,34 euro) are granted for daily life costs, 25% (211,12 euro) are paid for housing (if they do not have a job or training).

Part 40 of this act (§40 of K-KJHG) prescribes that there should be a help plan drawn up that is the basis for the support for the youngster. This plan has to entail the needs of the youngster and steps that need to be taken for the welfare of the child. When choosing the aids, efforts must be made to activate or maintain the potential for self-help. Local networks with family members, friends, school colleagues and other caregivers must be maintained and promoted. Appropriate social, psychological and physical development and training of the young people must be addressed in the plan. At least once a year, the plan has to be reviewed, preferably more often, if necessary, both the definition of objectives and the choice of aid should be adjusted.

Policy

"We now have more information on the problem. The terminology around the issue is more precisely defined. It was very positive to bring all the local stakeholders from the Villach region together at the launch conference, but also at the intermediate meetings that took place. This has achieved so much that the awareness is already quite different. Something that we have not yet discussed at all, but which is ultimately one of the intended aims is to look at the economic part as well. By taking a closer look at the situation of young people, we save a lot of money in the long term. I would even say there are two points. On the one hand, the preventive approach and on the other hand the networking, where one tries to bring together the assisting organisations, both demarcate responsibilities more precisely. I believe that this could also save a great deal of money. If we simply optimise cooperation. The economic benefit is certainly great. Especially if it starts in time.

This was also a very important point for us. That there is a great deal of help available, on the one hand from child and youth welfare, which more or less ends at the age of 18 or 21, but also a great deal of help for adults. But that a niche, or rather a gap, which is difficult to close, has emerged for this group, namely those up to the age of 30, with their very special needs. It would make sense to bring them

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together in the sense of networking, where adult help is combined with youth help, and to put their possibilities, their needs, but also their limitations on the table and say, okay, we have many resources, how can we bundle them so that we can work out the best possible solution for this target group.

This is what we originally intended to do when we designed the project, to focus on foster families. But that was difficult, partly because the resources were well spent on other things, but also because foster families are a bit different. Foster families are still often the place to go for those who have dropped out or become independent. But there are also those who leave the foster families and feel alone. So we want to take a closer look at their situation in the future."

4.2   Flanders

The Flemish Youth Welfare Agency is responsible for youth care and is part of the department of 'Wellbeing, public health and family' of the Flemish Government. According to article 18, §3 of the Flemish Parliament Act of July 12, 2013 on integrated youth care, continued youth care is possible until the age of 25 for young people who applied for it before the age of 18. However this will change in 2019: Every person who in the past has asked for youth care, will have access to continued care in youth care.

In 2017, The Youth Welfare Agency launched an Action Plan targeting young adults, with initiatives for improving support to young adults between the moment of leaving youth care and independence or the transition to adult care. The goal of the plan is to further spread the already existing local and regional initiatives for young adults leaving care, to turn these in a structural after care strategy and to guarantee a continuity in care. Actions focus both on preparing of the transition and on supporting the young adult during the transition to independence. 2018 is the year of concrete implementation.

- A growth plan at the age of 16: A plan focussing on the strengths and needs of the young person and his context in the different life domains, how these needs will be met (what can the young person and his context manage himself, for what professional help will be needed) and on the pathway the young person sees for himself in the short, middle and long term. The network around the young person should take an important position in the plan.
- A round table with support plan: 6 month before the young person turns 18, a round table is organized with the young person, his key figures and service providers in the different life domains to prepare in a very concrete way the transition to independence (with or without the help of youth care or adult care). In the plan the responsibilities and engagements of every person around the table is stipulated and it is defined who will coordinate the actions and who is point of contact if things would go wrong.
- Citizen initiatives and volunteers: in the actions for young adults we look for collaboration with initiatives working with volunteers that have as goal to strengthen the networks of persons with a vulnerability in society and to strengthen the integration of young adults in the neighbourhood
- Aftercare: the youth care service providers should have an active policy on aftercare, as well as individually as collectively: how to stay in contact with the young adult?
- Every young person that made use of youth care as minor has the right to continued youth care or to a smooth transition to adult care.
- Co-housing projects, integrated in the neighbourhood, are launched as missing link between the residential care and independent living.

- Youth care providers focus on intersectoral collaboration (with local public services, mental health care, care for persons with disabilities, …) in order to establish tailor-made support for the young adults. More and more tandem guidance takes place

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Policy

"The implementation of policy instructions in organisations is always difficult. I think that this is where the difference is made with the European project. That the guidelines and the methods are tailored to the facilities. The second element that was certainly important to us in the European project is that we can't solve it solely from the point of view of youth care. There is a need for good cooperation between different domains such as local authorities, housing, work, ... all domains that every citizen is confronted with. The fact that they are involved in the A Way Home methodology, in the formation of coalitions, was very important to us. It starts from an equality between all partners.

What did we do in the past? The government works something out and then sees how it can be implemented. Whereas now we start from a problem definition, and in that phase, without a plan, we sit around the table with the stakeholders and try to go to a coalition, try to install a coalition of the willing and start from there. That has also been innovative for us, that the users, the young people, are also there. That we don't let them reflect at the end of the ride. That we ask from the start: what are you getting stuck on? In this way you create more coherence, you create involvement, and you are also sure that you are going for solutions to problems that young people are confronted with."

Interviewer: What lessons have you learned from the project, that you want to give to the other member states?

"Do not start from the macrostructure, but stay close to reality, to practice, to young people, to youth workers. This creates a recognisability and an immediate added value in their work. What I also found clever about the project is that we started from equality. That there was equality between the young people, the facilities, the government and the academic partner. Something like that makes a big difference if we want to go for results with a common agenda that everyone can identify with. A collective feeling, a collective commitment has been developed. The solution should also certainly not remain enclosed in youth care, other partners must be involved. We have a joint mission, that's fundamental to me. Together we can achieve results that have an impact. You can achieve great results if you just do it together."

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5   Attachment1: a participatory method to implement the framework

We suggest the principles of Sociocracy (https://sociocracy30.org) to organise participatory activities, to call for support and translate the framework into procedures and protocols. Sociocracy is easy to use, when gathering voices and creating change processes in an organisation.

One principal idea is that people get information and are invited to give a hand gesture in the group, to show what they think and feel about it. Three hand gestures are used. More about the complete program can be read on the program's website.

Thumb up	Meaning: i support the idea, it is ok for me without doubts or worries
Weaving the hand (shaking, with the palm of the hand below)	Meaning: i have some doubts, but i support it
Palm up hand (no shaking, you seem to give it back) There is no thumbs down in sociocracy, only 'giving the idea back'.	Meaning: i object to the proposal, the idea is not feasible

Sociocracy uses statements. So it is neccessary to phrase a number of statements such as:

Care must be individually adapted to the adolescents/young adults.

The care must always cover many areas of life (health, work, social contacts, joint activities etc.)

All plans and goals must be made together with the youths/young adults. Their goals, their wishes and their needs should be the focus!

The preparation for the transition must start early.

Social contacts should be promoted, so that one has a social network in the long term.

A meeting place for careleavers and future careleavers should be created.

Using statements to discuss basic principles with Sociocracy, can be supported by an open conversation with care workers in facilities/foster families.

-What does the facility/foster family do to find out what the young person wants to achieve in different areas of life (school, work, relationship with family, friends, housing, leisure, administration and rights inclusion)?

- What does the facility/foster family do to give the young person confidence in what he/she can do on his/her own and what can be done to increase self-confidence?

- What does the young person indicate to be able to do on his/her own and how can you support this so that he/she can actually do it on his/her own?

- What does the young person want to do? What is he/she motivated to tackle? How are the young person's wishes and hopes taken into account?

- How are informal and formal social networks involved? How does this network get a place in the support of the young people?

- How can contact be maintained with the young person after the transition?

6   Attachment2: voices of youngsters in after care, results from a project workshop

Care leaving requirements

Who guides?
the relationship:
warm, trusting, available, stable

Many of the youngsters mention the relationship with the care worker as a precondition for successful care leaving. This implies:
- a permanent guidance (no turnover of care workers)
- a trusting, warm and respectful relationship
- available when needed / easy to reach (also outside office hours)
- being able to keep in touch after leaving youth care

How to guide?
the professional attitude:
positive, flexible, participatory

No matter which method of guidance is used, the professional attitude should be focused on:
- flexibility in dealing with methods, there is no 'best method', guidance should be adjusted to the needs of the individual
- enhancing the participation of the youngster, letting the youngster co-decide, listen to their wishes, being open and transparent in what you do
- a positive point of view (strength-based, motivational, believe in the potential)

What needs to be guided?
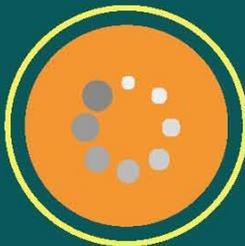
Youngsters need guidance in:
- legal and administrative literacy (knowing rights, help with living arrangements, financial simulations based on real life settings, tips and tricks to get assurances, loans, ...)
- creating and upholding sustainable mental/emotional resilience (dealing with loneliness, knowing what makes you happy, ...)
- using leisure activities and holidays as a boost for for self-worth and confidence
- how to deal with drugs, alcohol, temptations of consumption
- finding out who they are, searching their identity
- getting lifestyle related tips&tricks: knowing how a lot of people live, not how they pretend to live or what media shows is the perfect lifestyle
- looking for the most suited living conditions (alone, with friends, guided living, with family ...)
- creating and managing a trusting network (friends, professional help, family, ...)
- preparing the step to adult care if needed, being able to ask for help
- life coaching and connecting to future activities (work, study, ...): creating a positive and realistic future planning on work, study, family life, ... (and how to deal with changing plans)
- a stepwise adaptation towards independent decisions in life (stepwise freedom and preparation to responsibilities)
- how to learn from other young people that have no experience in care

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