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Procedures when young people leave care — Views of 111 Swedish social services managers

Ingrid Höjer ^{a,*}, Yvonne Sjöblom ^{b,1}

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ABSTRACT

In western societies, there is a general tendency towards a protracted transition to adulthood for young people, who thereby may become increasingly dependent on support from family. Young people leaving a placement in out-of-home care often lack such support, and will thus have a disadvantageous position compared to their peers. With the purpose of looking into the procedures when young people leave a placement in out-of-home care, telephone interviews were performed with 111 managers of social service units in two Swedish regions (West Sweden, and Stockholm Region), using a structured interview schedule. Answering rate was 99.1%.

Only 6% of the managers had information of the young people's whereabouts once they had left care. 86–88% had general support programmes for all young people concerning housing, employment etc. but only 2–4% had specific programmes for young people leaving care. A majority of the managers were attentive of the difficulties the young people leaving care may encounter, but displayed little awareness of the consequences of a prolonged transition to adulthood, and the need for continued support after leaving care. Several managers referred to the general support of the Swedish welfare state, meaning that young people leaving care had the same access to support as all other young people in Sweden. Consequently, young people leaving care are at risk of being invisible in the welfare system and facing a compressed transition to adulthood.

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1. Introduction

For all young people, the transition to adulthood is a significant phase in life. In western societies, there is a general tendency towards a protracted transition to adulthood for young people, who thereby may become increasingly dependent on support from family. Those who leave a placement in out-of-home care often lack support from their family of origin. International, as well as Swedish, research has shown that young people leaving a placement in out-of-home care consequently are at risk of being disadvantaged compared with their peers (see for example Biehal & Wade, 1996; Courtney et al., 2005; Cashmore & Paxman, 2006; Höjer & Sjöblom, 2010; Little, Leitch, & Bullock, 1995; Stein, 2006). The support that is received from social services in this transitional phase may be crucial for the continuation of their adult life.

In many western countries, the situation for young care leavers is high on the political agenda, and policymakers and service providers have discussed strategies to improve the situation for this group

¹ Tel.: +46 8 164859.

(Collins & Pinkerton, 2008; Mendes, 2010). In Sweden, however, this issue has so far attracted little attention, neither from social service providers nor from researchers. Unlike the situation in other western societies, local municipalities in Sweden seldom use any specialised programmes or dedicated services for this group. The prolonged transition to adulthood and the individual variations in this transitional phase, are seldom recognised in social policy or programmes for young people. Swedish social workers pursue their work with young care leavers on an individual basis within their ordinary tasks. Little is known about how social services look upon and organise the provision of support to care leavers during their transition from a placement in care to independent life.

The Swedish social welfare system gives a high priority to support and care for young people while they are placed *in care*. By interviewing the managers of 75 Swedish social services units, we wanted to enhance the knowledge and understanding of the absence of support to young people when they are in the process of *leaving care*. We have studied this empirically by looking into the procedures used by social services units when young people leave a placement in out-of-home care. Telephone interviews were performed with 111 managers of social service units in 75 Swedish local authorities. The aim of this paper is to describe and discuss how these managers look upon the organisation and implementation of transitions from a placement in foster/residential care to independent living for young people ageing out of care.

^a Department of Social Work, Göteborg University, P.O. Box 720, 405 30 Göteborg, Sweden

^b Department of Social Work, Stockholm University, 106 91 Stockholm, Sweden

^{*} Corresponding author. Tel.: +46 31 773 15 68.

E-mail addresses: Ingrid.Hojer@socwork.gu.se (I. Höjer),
Yvonne.Sjoblom@socarb.su.se (Y. Sjöblom).

2. The Swedish context

Sweden has 9.1 million inhabitants. There are three democratic levels of government: Parliament at national level, county councils at regional level and municipalities at local level. There are 21 county councils and 290 municipalities. County councils and municipalities have their own decision-making powers. They are run by elected bodies, known as municipal and county council assemblies. These assemblies consist of politicians who are directly elected in general elections every fourth year.

Unlike many other countries, Sweden does not have a "Children's Act". The work performed by the Social services is regulated by the Social Services Act (2001), which is a "frame law" and regulates different areas of social support on a voluntary basis, and the Care of Young People Act (1990) which regulates when and how to use mandatory care orders.

In Sweden there is a high level of local self-governing, and as long as the basic standards of the Social Services Act are respected, municipalities can organise their child welfare in the way they find most suitable. An important characteristic of Sweden is that many of the municipalities have few inhabitants: in 2005, 76 municipalities had less than 25,000 and 31 had less than 12,500 inhabitants. 39 municipalities had less than seven inhabitants per square km (http://www.skl.se/web/Kommungruppsindelning.aspx).

Out-of-home care within the child welfare system is an area of expansion with an increasing number of young people placed in care. In 2008, around 22,000 Swedish children and young people were placed in care at some point during the year. Of these, 3344 young people were between the ages of 18 and 20 (Socialstyrelsen, 2009a). In recent decades, about 75% of all children and young people in out-of-home care have been placed in foster families. For young people over 18 years of age, the median time in care was over four years (Socialstyrelsen, 2009a,b).

When a child/young person is placed on a mandatory care order, according to the Care of Young People Act (1990), the social welfare committee can decide when to end the placement. If the young person is placed in care due to care deficits, abuse or other problems in the home, the placement should be ended at the age of 18. If a young person is placed because of his or her own behaviour (for example drug abuse and/or criminal activities), the placement should end at the latest at the age of 21.

Although the law stipulates an age limit of 18 (or 21 in cases of mandatory care orders), young people often stay in care until they have completed their upper secondary school education. Thus, placements in foster/residential care are usually ended when young people reach the age of 19. When they leave a placement in care, they are expected to find housing and a job, to be able to live independently. This is a factor which distinguishes this group from their peers, as the median age for young Swedish people to be fully established in society is 28 (Ungdomsstyrelsen, 2005).

Few young people under the age of 18 move from care to independent living. When young people under 18 leave a placement in care, they are more likely to return to their parents or to move on to a new placement. Sweden does not have any statutory requirements that specifically regulate the transition from care to independent life. On 1 April 2008, however, some amendments were made to the Swedish Social Service Act Of special importance for young people leaving public care is an amendment where the social welfare committees are held responsible for support and help to children and young people after they have left care. The legislators also emphasised the importance of young people's access to adequate support with housing, help to find a job, guidance in finding suitable education, and also help and support in contacting their birth families, i.e. parents and relatives (National Board of Health and Welfare, 2009a, b). So far there is no evidence about how the social services in the municipalities implement this new policy. Furthermore, the question of what authority is responsible for providing support – the placing municipality or the municipality where the young person has been placed – still remains unsolved. This indistinctness concerning responsibility can be a problematic issue, and may prevent young care leavers from receiving adequate support (Höjer & Sjöblom, 2010, 2011).

3. Family service orientation of the child and family welfare system

There are mainly two approaches that characterise the different child and family welfare systems in different countries: the family service orientation and child protection orientation. In Sweden we have a family service orientation (Freymond & Cameron, 2006), although reporting of child abuse is mandatory. Sweden, along with the other Nordic countries, follows a social democratic model of social protection where the core concept is equality. Social rights are associated with citizenship and benefits provided by the public sector are delivered in the form of free services or all-inclusive benefits.

It is clear that variations between these orientations have important consequences for children and parents, for social workers and for the relationship between families, the community and the state. A family service orientation assumes that the interests of families and the state are indivisible. There is an emphasis on social inclusion of children and families and on maintaining family connexions. There is no permanency planning in the Swedish system, adoption of children from care is practically non-existing, and legislation explicitly emphasises the importance of maintained contact between children/young people in care and their biological network — parents and relatives. The wellbeing of all children and families, including those who are vulnerable, is looked upon as a collective responsibility and a strong involvement from the community/state in family life is accepted. This means in reality that there is no separation between protecting children and supporting families (Freymond & Cameron, 2006).

Social workers place a strong emphasis upon securing children's and parents' voluntary cooperation in services. 75% of all out-of-home care in Sweden takes place with parental consent and reunification with families is a strong component in the system. The family service orientation emphasises a non-stigmatising handling of social problems, and the provision of supportive measures and services to children and families. It also implies a considerably high level of discretion among social workers in their practise. One consequence of this discretion is that formal standard risk assessment procedure is not as commonly used in Sweden as in those Anglo-American countries with a child protection orientation (Freymond & Cameron, 2006).

In Sweden, social work practise does not distinguish between services directed towards the general population and services directed towards maltreating families. The use of a broad range of social protection interventions is emphasised. One example of this is that social workers use lay contact persons/families as one of the most popular child and family interventions. In the family service system there is great trust in the relationship between front-line service providers and families. Only in emergency cases or with particularly severe abuse is this trust questioned. In the child and family welfare system in Sweden the discretion of social workers is highly valued. The relationship between the client and the social worker is seen as important and looked upon as being a relationship flexible enough to accommodate individual solutions to different types of problems (Freymond & Cameron, 2006).

4. Information from research

The problematic situation of young people in the transitional phase from care to adulthood is described by a number of researchers (Stein, 2006). Young care leavers are often depicted as a vulnerable

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