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Young People's Transitions from Care to Adulthood in European and Postcommunist Eastern European and Central Asian Societies

Mike Stein[a]

[a] Social Policy Research Unit, University of York, York, UK
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Mike Stein

Social Policy Research Unit, University of York, York, UK

Abstract

This paper explores comparative material from two publications that provided mapping information on young people's transitions from care to adulthood. It draws on two samples: first, a European sample which included 9 noncommunist European countries; second, a sample of 14 postcommunist societies which included 9 European and 3 Central Asian countries. The paper outlines descriptive data on population; the placement of children living apart from their birth families; the age of leaving care; the legal and policy framework for preparation and aftercare; official (secondary) data and research; and policy and practice recommendations. The paper also discusses the application of Esping-Andersen's welfare regime typology in relation to leaving care policy. It is suggested that its application raises questions at two levels: first, in relation to leaving care policy within the sample of European countries; and second, in its relevance, at a more general level, to postcommunist societies. In conclusion, it is suggested the paper provides a starting point for further empirical and theoretical comparative work in this area.

Keywords: Child Abuse; Children's Rights; Out-of-home Care

International collaboration on the study of young people's transitions from care to adulthood has, to date, a short history. The Transitions from Care to Adulthood International Research group (INTRAC) was set up in 2003 in response to growing evidence of the poor outcomes experienced by young people living in and leaving care: in comparison with young people in the general population, international research showed that their outcomes were poorer, particularly in respect of education and employment, housing, and health and wellbeing (the background research studies are outlined in the 16 country chapters in Stein & Munro, 2008). The INTRAC group brought together, for the first time, researchers from Europe, the Middle East, Australia, Canada, and the United States, and laid the foundations for comparative research in this area. The work of the INTRAC group resulted in an

initial mapping publication which included 16 country chapters using a standardised framework. Information was collected on contextual data; case examples; types of welfare regimes; the legal and policy context; use of secondary data; and research findings. The publication also included four thematic chapters which addressed global issues; legal and policy frameworks; the use of secondary data; and messages from research (Courtney, 2008; Pinkerton, 2008; Stein, 2008; Ward, 2008).

The INTRAC publication included chapters on leaving care in two postcommunist societies, Hungary and Romania, which explored material on the challenges of moving from centralist, enclosed, and institutionalised models of care to more family-based provision and smaller children's homes (Anghel & Dima, 2008; Herczog, 2008). The need to find out more about young peoples' transitions from care to adulthood in Eastern European and Central Asian postcommunist societies also resulted in a mapping exercise carried out by SOS Children's Villages International, which adopted the standardised framework used by INTRAC, identified above (Lerch & Stein, 2010).

The aim of this paper is to reflect upon the comparative material detailed in these two mapping publications. This includes contextual data on population and the placement of children living apart from their birth families; the age of leaving care; the legal and policy framework for preparation and aftercare; official (secondary) data and research; and policy and practice recommendations. Two samples are identified as a basis for comparison: first, a noncommunist European sample (referred to as the European sample) that included the 9 European countries from the 16 INTRAC countries; and second, 14 postcommunist countries, which included 9 postcommunist European and 3 Central Asian countries from the SOS mapping exercise, plus Hungary and Romania from the INTRAC countries (Table 1). This is the first comparative exploration of this topic. However, there are limitations in the descriptive data: the INTRAC mapping exercise took place in 2007 and the SOS in 2009. There are also gaps in information arising from both mapping publications (which are indicated in the text). To address these limitations, more recent literature, where it exists, will be drawn on to confirm or add to the picture portrayed in this account, including publications arising from both INTRAC and SOS Villages International (Stein & Verweijen-Slamnescu, 2012; Stein, Ward, & Courtney, 2011).

Table 1 Sample of European and Postcommunist Countries[a]

European sample		Postcommunist Eastern European and Central Asian sample		
France	Norway	Albania	Czech Republic	Poland
Germany	Spain	Azerbaijan	Estonia	Russian Federation
Ireland	Sweden	Bosnia and Herzegovina	Georgia	Romania
Netherlands	Switzerland	Bulgaria	Hungary	Uzbekistan
	United Kingdom	Croatia	Kyrgyzstan	

[a]Based on Stein and Munro (2008) and Lerch and Stein (2010).

Contextual and Comparative Data

Population of Children Under 18 in the General Population

In the postcommunist sample, the population of children under 18 years of age, as a percentage of the total population, varied from 18.7% in Bulgaria to just over double that living in Uzbekistan (39%). Between these two country extremes were the Czech Republic (19%), Russian Federation (19%), Bosnia and Herzegovina (20%), Estonia (20%), Romania (20%), Hungary (21%), Croatia (22%), Poland (22%), Georgia (25%), Azerbaijan (31%), Albania (32.6%), and Kyrgyzstan (35%). In the European sample, the similar population group ranged from 17% in Spain to 25% in both Norway and Ireland. The other countries were in a band between 20% and 24%. In terms of comparison, the Central Asian countries had a higher percentage of the population under 18 than the postcommunist European sample and the European sample, reflecting the higher birth rate and underpinning demographic and cultural factors (although this was not explored in the SOS mapping research).

The Placements of Children and Young People Living Apart from Their Birth Families

For each of the postcommunist countries, data was collected and categorised in respect of young people placed under "guardianship" in kinship care with relatives (extended family members); in a large institutional setting; or in a family setting including family foster care, small children's homes, or SOS children's foster care villages. As detailed in Table 2, in 10 of the 13 countries a majority of the young people were living either "under guardianship" in kinship care with relatives, or in an institutional setting. Smaller percentages of young people were living in an alternative "family setting", which in the mapping exercise was categorised as including family foster care, smaller children's homes, or SOS foster families ("children's villages"). However, there were some large differences between countries. The percentage of young people living in an institutional setting in the 13 countries varied between 4% in Albania (where most young people were placed in kinship care) and 98% in Bulgaria. The percentage of young people living "under guardianship", in kinship care, also varied: between 17% in Croatia, to 96% in Albania.

The percentage of those living in an alternative family setting, including foster care, smaller children's homes, or SOS children's villages, varied between none (0%) of the young people (in Albania, Azerbaijan, and Kyrgyzstan) and 2% in Bulgaria and Uzbekistan, to 73% and 75% in Georgia, and Bosnia and Herzegovina, respectively. In only considering the numbers of young people living in institutional settings, in comparison with young people living in "family settings" (foster care and children's homes), information was available on 12 countries. This showed that in eight of these countries a far greater percentage of the young people lived in institutional settings than family settings.

Table 2 Postcommunist Sample: Children and Young People Living in Alternative Care[a]

Country	Guardianship kinship care (with relatives) % (percentage)	Institutional setting, large residential homes % (percentage)	Foster care and SOS families, small children's homes % (percentage)
Albania	96	4	0
Azerbaijan	34	66	0
Bosnia and Herzegovina	0	25	75
Bulgaria	0	98	2
Croatia	17	50	33
Czech Republic	0	75	25
Estonia	45	42	13
Georgia	0	27	73
Hungary	0	47	53
Kyrgyzstan	—	—	—
Poland	90	—	10
Russian Federation	63	37	*
Romania	0	35	65
Uzbekistan	27	71	2

[a]Type of placement: Information on 13 countries.
*This category (foster care, SOS families, and small children's homes) is included in the 63% in the column "Guardianship, kinship care with relatives". Although not disaggregated it is estimated that about 70% (of the 63%) are placed in "family type care", although this is less so for adolescents (see Lerch & Stein, 2010, p. 110).

In the European sample (see Table 3), most of the young people were living in either family foster care or residential care placements (in this sample, data collection differentiated between foster and residential care). Residential care included small children's home and residential centres employing social pedagogues. Its usage varied from 10% in Ireland to 60% in The Netherlands. The use of foster care placements varied from 8% in Spain to 74% in Sweden. Very limited information was available

Table 3 European Sample: Children and Young People Living in Alternative Care (Type of Placement)

Country	Foster care % (percentage)	Residential care % (percentage)	Kinship care % (percentage)
France	55	37	—
Germany	45	55	—
Ireland	55	10	25
Netherlands	40	60	0
Norway	61.7	19.2	19.1
Spain	8	45	46
Sweden	74	26	13
Switzerland	—	—	—
UK[a]	62.1	13.2	—

— Means no information available in mapping exercise.
[a]Total for England, Wales, Scotland, Northern Ireland: Where comparable information available.

on the use of kinship care in the mapping exercise. It showed that 46% of placements in Spain, 25% in Ireland and 13% in Sweden were kinship care placements (Table 3).

Although there are difficulties in making direct comparisons, given the gaps and difference in data categorisation (in particular, the grouping together of foster care, small children's homes, and SOS families in the postcommunist sample), two points stand out. First, the use of institutional care in the postcommunist sample: in five of the 12 countries, more than half of young people were living in institutional care, and in six of the 12 countries, between a quarter and half of placements were in institutional care. As discussed later, these placements were generally seen as very negative. This contrasted sharply with how positively residential centres, using social pedagogues, were seen in the European sample. Second, the prevalent use of kinship care placements in the postcommunist sample: these were used in 7 out of the 11 countries for which information was available, and in 6 of these countries over a quarter of placements were with kinship carers.

Age of Leaving Care

Ten postcommunist countries provided information on the age of leaving care—no information was provided for Estonia, Georgia, Kyrgyzstan, or Uzbekistan (see Table 4). This showed that the age range of leaving care was wide, with young people ageing out of care from between 14 years to 26 years of age. In Albania and in Bosnia and Herzegovina, young people could leave care from aged 14 and 15, respectively, if not continuing in education. In the Russian Federation, young people aged out of care between 18 and 23, and those who were continuing their education or pursuing vocational training were entitled to support. There was evidence from some of these countries (e.g., Czech Republic and Poland) that young people will age out of care later if they continue with their education.

In the European sample the age range was 15–21 (in both Germany and Sweden) and in half of the countries young people left care at 18 years of age

Table 4 Postcommunist Sample: Data Provided on the Age of Young People Ageing Out of Care[a]

Country	Age of leaving	Country	Age of leaving
Albania[b]	14/15, or up to 17 to continue education	Hungary	18–24 (up to 24 if cannot take care of themselves)
Azerbaijan	22	Poland	18; beyond 18 to continue education
Bosnia and Herzegovina	15–24	Romania	18–26; beyond 18 to continue education
Bulgaria	18 or 20	Czech Republic	18–26
Croatia	18	Russian Federation	18–23

[a]Information on 10 countries.
[b]Albania data included Stein and Verweijen-Slamnescu (2012).

Table 5 European Sample: Data on the Age of Young People Ageing Out of Care

Country	Age of leaving	Country	Age of leaving
France	18	Norway	18–20
Germany	15–21	Spain	18
Ireland	18	Sweden	15–21
Netherlands	16–18	UK	16–18

(Table 5). In contrast to some of the postcommunist countries, remaining in education did not necessarily entitle care leavers in the European sample to remain in accommodation—although, since the INTRAC mapping exercise was carried out, there is evidence that young people who participated in the "Staying Put" family placement pilot programme in England were likely to be in further or higher education (Munro et al., 2012).

The Legal and Policy Framework for Preparation and After Care

The information provided on the legal and policy framework in the postcommunist sample shows that there was very little specialist or dedicated legislation for preparation for leaving care, or for supporting young people after they left or aged out of care (Stein, 2010; Stein & Verweijen-Slamnescu, 2012). The country analysis showed that existing legal provisions were contained within more general social care or child care and protection legislation. In seven of the countries this included legal provisions for general assessment and care planning as the main preparation for young people. For example, Albania had a "pathway plan"; Croatia had a "duty to prepare"; and Poland had a "self-reliant plan". In six of the countries, the legal framework allowed young people to remain in their care placement to continue their education and this qualified them to receive some form of financial support. In Bulgaria and some Russian federal districts there were schemes to enhance employment, through employee subsidies and job quotas for young people. In the Czech Republic and Poland young people could receive some personal assistance or counselling to assist them in finding accommodation or employment. Only one postcommunist country, Romania, identified a specific or dedicated legal framework for aftercare services (Anghel, 2011; Anghel & Dima, 2008).

In the European sample, France, Ireland, Norway, Sweden, and the UK had specialist aftercare legislation, but none existed in Germany, The Netherlands, Spain, and Switzerland. Where specialist legislation was in place it could either be discretionary (that is, "permissive", whether it was implemented or not), as was the case in Ireland, or mandatory (that is, there is a duty to provide services), as was the case in England. The main provisions of legislation included providing assistance for young people in respect of education, employment and training, accommodation, and personal support (Stein, 2012; Ward, 2008).

Table 6 European Sample: Official (Secondary) Data and Primary Research[a]

Country	National data care experiences	Subunit data care experiences	Gov. data used for research	Data pop. Studies used for research	Research on care leavers[b]
France		Yes		Yes	Yes
Germany	Yes				Yes
Ireland		Yes			Yes
Netherlands	Yes				Yes
Norway	Yes		Yes		Yes
Spain		Yes			Yes
Sweden		Yes	Yes	Yes	Yes
Switzerland		Yes			Yes
UK	Yes			Yes	Yes

[a]Adapted from Courtney (2008, p. 281).
[b]Research on care leavers from country chapters in Stein and Munro (2008).

Official Data and Research on Care Leavers

Most of the postcommunist countries had very limited data (or official statistics) on the numbers of young people living in and ageing out of care—"better official data" was consistently recommended (Lerch & Stein, 2010; Stein & Verweijen-Slamnescu, 2012). The need for official monitoring or outcomes data was also seen as important, in order to know what was happening to young people after they aged out of care. This could include data on their housing; education, employment, and training; and health and wellbeing. As regards research at the time of the mapping exercise, in only two countries, Poland and Romania, had there been a small number of research studies in respect of this specific group of young people. In the Czech Republic, there was no specific research on "care leavers", although this group of young people had been included in other studies of vulnerable young people. In the remaining nine countries there had been either "no research" (eight countries) or "no comprehensive research" (three countries).

In the European sample, four of the countries collected national data on care leavers and five collected data at a subunit level: for example, by the local authority or administrative unit responsible for children's services (see Table 6). In only two countries was government data used for research, and in three countries data from population studies was used for research. All of the countries had some research on the experiences of care leavers, although there was considerable variation in the range and type of studies carried out (Courtney, 2008). Although the evidence base within the country chapters was variable, this showed the generally poor outcomes for care leavers on their main pathways to adulthood (education, employment, and training; accommodation; health and wellbeing) in comparison with their peers (Stein & Munro, 2008).

<div align="center">Policy and Practice Recommendations</div>

The Legal and Policy Framework

The main policy and practice recommendations contained within the INTRAC and SOS International country analyses reflected the range of issues discussed above. In all postcommunist societies and European societies without specialist legislation, there was recognition of the need for the introduction of a legal framework specifically for preparation and aftercare (Lerch & Stein, 2010; Stein & Munro, 2008; Stein & Verweijen-Slamnescu, 2012). In the European sample countries where legislation was "permissive" (as detailed above) there were recommendations for strengthening the law—introducing a "duty" to provide leaving care services. In the European sample there was also a consensus that the legal framework should contain provisions to provide support to young people aged 21 to 25, not just at the time of leaving care (Stein & Munro, 2008). Since the INTRAC mapping exercise was completed, in England the Children and Young Person's Act 2008 (introduced in April 2011) has extended young people's entitlement to a personal adviser to the age of 25 where they resume an education or training programme (Stein, 2012). In regard to the national policy framework, in the postcommunist sample, there were recommendations for a national strategy and clear standards for preparation and aftercare services; better national governmental interdepartmental co-ordination; less fragmentation of responsibilities between different government departments; and better local government interagency co-operation, including the involvement of non governmental organisations (Lerch & Stein, 2010).

The Quality of Care

The major challenge facing postcommunist societies was seen as deinstitutionalisation (Lerch & Stein, 2010; Stein & Verweijen-Slamnescu, 2012). In the SOS country analysis, large institutional settings were consistently seen to have a very negative impact on the lives of most young people. The main consequences, in terms of "violations of rights", identified in the SOS report included the abuses of young people in institutions; the impact of institutional stigma; the failure to meet the needs of young people growing up, in terms of their education, development, health, and psychological wellbeing; the lack of individualisation; the geographical and emotional separation from parents; and the failure to adequately prepare and support young people into adulthood. Recommendations included increasing the use of foster care placements and care in family settings, such as SOS foster families, as well as greater use of smaller children's homes, and training for staff, carers, and "guardians" (kinship carers). In this context, the implementation of "quality standards" that comply with the UN Guidelines on Alternative Care for Children (currently under review), were seen potentially as an important mechanism for improving the quality of care, including preparation and aftercare services (Lerch & Stein, 2010; Stein & Verweijen-Slamnescu, 2012).

In the European sample, there was recognition of the association between the quality of care and later outcomes. There were recommendations for better quality care to compensate young people for their damaging precare experiences, through stability and continuity, a positive sense of identity, assistance to overcome educational deficits, and holistic preparation. The screening for mental health problems and the provision of therapeutic services was recommended to prevent later problems (Dumaret, 2008). In the country chapters, the use of foster care placements, small children's homes with a positive culture, residential care providing psychological interventions and sociopedagogy were identified as contributing to positive outcomes (Stein, 2008).

Transitions from Care

In the European sample there was agreement that young people leaving care should be provided with opportunities for more gradual transitions from care—less accelerated and compressed, and more akin to normative transitions within their cultures. This would include giving young people "psychological space" and recognising the different stages of transition, common to "emerging adulthood". Opportunities for gradual transitions identified in the mapping exercise included placements, where young people were settled and carers were able to support them into adulthood, or, if that was not possible, transitional or "half-way" supportive arrangements (Stein, 2008). In contrast to the accelerated and compressed transitions in the European sample, in postcommunist societies one feature of institutional care was extended and abrupt transitions: although some young people left care at a very young age (e.g., 14 years in Albania), many young people were leaving care at an older age but being unprepared and uninformed until they were about to leave, and ill-equipped to cope with the transition to living independently. In response, deinstitutional and preparation programmes were recommended (Lerch & Stein, 2010; Stein & Verweijen-Slamnescu, 2012).

Support after Care

In both the European and postcommunist samples there were recommendations for improving the support provided to young people after they leave care. In postcommunist societies this included the need for housing and employment priority schemes, financial assistance, personal support, and crisis services; more involvement of non governmental organisations; greater involvement and participation of young people in the development of services; care leavers' own support networks and a peer website; and increasing public awareness of the problems and challenges faced by young people leaving care. In the European sample the focus was on providing young people with support into adulthood, not just at the time of leaving care, and the contribution of specialist leaving care services (Lerch & Stein, 2010; Stein & Munro, 2008).

Official (Secondary Data) and Research

In both the European and postcommunist samples, there was also a consensus about the need for more use to be made of official (secondary) data to understand the experiences of young people leaving care. As Courtney (2008) suggested, it could provide information on a range of key adult outcomes, including education, health and wellbeing, social integration, and use of public services, as well as allowing for comparisons to be made with the outcomes for other groups of young people. As detailed above, in spite of its great potential, little use was made of secondary data. This may be as a consequence of the decentralisation of services, attitudes to the privacy of care leavers, and the "limited political capital" of care leavers as a group (Courtney, 2008; Lerch & Stein, 2010).

As discussed above, there was little research on leaving care in the postcommunist sample. In the European sample important gaps were identified. Recommendations included the need for more cohort studies, based on large representative samples, to provide a more sophisticated understanding of "risk" and "protective" factors over time; the need for more evaluative research on the effect of specific interventions, using experimental and quasiexperimental designs; and more ethnographic research to add to qualitative knowledge (Stein, 2008).

Welfare Regimes

In the European sample, contextualisation of the main findings discussed in this paper have included identifying the countries' welfare regime, using Esping-Andersen's typology, as detailed in Table 7 (Esping-Andersen, 1990; Pinkerton, 2008). Esping-Andersen identified three basic types of welfare regimes—conservative, liberal, and social democratic—and proposes that the positioning of a country is assessed on two main characteristics: first, the extent of decommodification, whether services are provided as a right to enable sustaining a living without participation in the market; and second, the extent to which a society promotes social solidarity and reduces inequality. On these criteria, the three types proposed are—first, social democratic welfare regimes (high on decommodification and social solidarity, including state support); second, liberal welfare regimes (low decommodification

Table 7 Welfare Regimes Based on Esping-Andersen[a]

Country	Regime	Country	Regime
France	Conservative: Citizenship rights	Norway	Social democratic: Increase market
Germany	Conservative: Sociopedagogical tradition	Spain	Conservative: Mediterranean family model
Ireland	Conservative; hybrid state	Sweden	Social Democratic
Netherlands	Social democratic: Liberal tendencies	Switzerland	Liberal: Strong liberal
		UK	Conservative

[a]Identified in the country chapters, Pinkerton (2008) and Stein and Munro (2008).

and high stratification with the aim of freeing the market and individual choice); and third, conservative welfare regimes (medium decommodification and social solidarity, state provision supporting existing structures).

As Pinkerton suggested in regard to Esping-Andersen's typology, "the categories are theoretical constructs and so states should not be shoehorned into them but rather referenced against them" (Pinkerton, 2008, p. 252). Brydon (2011) and Mendes, Johnson, and Moslehuddin (2011) also highlighted limitations of Esping-Andersen's model: a "discourse about welfare states … focussed largely on Western models" (Brydon, 2011, p. 22), and, in similar vein; "a much wider range of welfare regimes exists in the former Soviet Bloc countries and in Asia and developing countries" (Mendes et al., 2011, p. 81). As Mendes et al. suggested, it is likely that in East Asia "Confucian ideas and values such as individual self-reliance and family solidarity will mean at least for some countries a strong emphasis on independence via participation in the labour market, and assistance from family and non-government organisations rather than from government" (pp. 81–82). Brydon (2011) made a similar point in proposing a fourth cluster, "clearly defined Asian models of welfare provision" (p. 22). Recognising these limitations, and returning to Esping-Andersen's typology, what is of relevance to the present discussion is the relationship between welfare regimes and leaving care policy. The expectation might be that social democratic regimes would have the most comprehensive provision to support the highly vulnerable group of care leavers. However, the picture is more complex. As regards those countries with social democratic regimes, in The Netherlands there is no specialist legal framework, and in Norway and Sweden a specialist legal framework was introduced only relatively recently, in 1998 and 2008 respectively. In both these countries, universalism—central to the social democratic model—in child care and youth provision was seen as being able to meet the needs of all young people, including care leavers. As regards conservative welfare regimes, Germany and Spain had no specialist legislation, whereas the UK, France, and Ireland did. Only Switzerland conformed to type—a liberal regime with no specialist legislation.

Esping-Andersen also envisaged that the transition from communist to post-communist societies would result in those societies adopting one of the three welfare regimes identified above and this would in part be driven by potential or actual membership of the European Union (Anghel & Dima, 2008; Esping-Andersen, 1996; Fenger, 2005; Rys, 2001). However, as Anghel and Dima (2008) commented:

> Fenger (2005) considers that post-communist countries are in the process of developing their own type of welfare. Based on three indicators: characteristics of government programmes, social situation and political participation—he proposed three more types of welfare regime: former USSR; Post-Communist European; and developing. (Anghel & Dima, 2008, p. 162)

Szalai (2007) also challenged Esping-Andersen's typology, proposing the category of "post-socialist welfare" which, as Herczog (2008) reminded us, recognises the specific history and culture of a country. Anghel (2011), in her analysis of changes in

child care law and policy in Romania, also captured the complexity of change, including the impact of both external and internal forces. The SOS International country analysis showed that the process of deinstitutionalisation was at different stages in the postcommunist countries and that different organisations were involved in leading the change programmes. In Albania, Azerbaijan, and Georgia, UNICEF was taking a lead, and in Bulgaria, Poland, Uzbekistan, and the Russian Federation, central government had a leading role. The deinstitutionalisation agenda also included the introduction of preparation and aftercare programmes—even in the absence of specialist legislation, as detailed above. These were provided in all countries, either centrally or locally by the area or district authorities, and by non governmental organisations

Discussion

There are many complexities and challenges in carrying out comparative work (Stein & Munro, 2008; Munro, Stein, & Ward, 2005; Pinkerton, 2008, 2011). There are differences, for example, between countries in the care population: who comes into care, the use of different types of care placements, who stays in care, and who leaves care, as well as the purpose of care itself—whether the aim is family rehabilitation, or not (Ward, 2008). Differences in legal and policy frameworks may reflect different views about how countries see the balance between individuals, the family, and the role of the welfare state and the labour market, which in turn may be underpinned by differences in countries' welfare regimes (as detailed above), as well as the opportunities and risks associated with economic, social, and legal global influences (Pinkerton, 2008, 2011).

The initial mapping exercises carried out by INTRAC and SOS International provided the opportunity for exploring the data comparing European and post-communist societies for this paper. The findings from the descriptive data include the high usage made of large institutions in postcommunist countries, but perhaps less predictably the significant contribution of kinship care placements ("under guardianship"). In the European sample, although overall a greater percentage of young people were living in foster care placements, residential care was still much used and often seen as a positive placement; and in three countries, where social pedagogy was used, a greater percentage of young people were living in residential care placements than in foster care. There was only very limited data on the use of kinship care. As regards the age of leaving care, the age range was greater in the postcommunist sample (14–26 years) than in the European sample (15–21 years)—although neither accelerated and compressed transitions in the European sample nor abrupt and extended transitions in the postcommunist countries reflected normative youth transitions in those countries. In some of the postcommunist countries, young people who remained in education were entitled to remain in their accommodation. Most of the postcommunist societies lacked specialist legislation for supporting young people after they left care, and this was also the case in four of the European countries—legal provisions being contained within more general child care and protection legislation. In the European sample, there was evidence of more collection of official data and

research on care leavers than in postcommunist societies, although only four of the European countries collected national data on care leavers.

The main policy and practice recommendations were grounded in these findings. In postcommunist societies this included deinstitutionalisation, through increasing the use of foster care placements and care in family settings; better preparation and more gradual transitions from care; more holistic support after leaving care; more official data and research; and a specialist legal framework supported by a clear interagency strategy. In the European sample the main recommendations included improving the quality of care across the life course of young people; opportunities for more gradual and normative transitions, providing support into adulthood, beyond leaving care; making better use of official data and carrying out more evaluative and ethnographic research; and strengthening the legal framework. In conclusion the paper discusses some of the complexities in applying Esping-Andersen's welfare regimes typology to leaving care policy in both European and postcommunist societies.

The contribution of the United Nations Convention on the Rights of the Child (UNCRC) in assisting European and postcommunist countries in progressing the recommendations, identified above, is an important consideration. The UNCRC reporting process and guidelines, outlining how States should promote the rights of young people making the transition from care to adulthood, can be used as an instrument to track global patterns of change in policy and practice. Research based on data from 15 countries (including the European sample and 2 postcommunist countries) shows there has been limited engagement with understanding and promoting the needs of care leavers, unless a government is committed to developing legislation and practice (Munro et al., 2011). However, there is also evidence from postcommunist countries that the *Guidelines for the Alternative Care of Children* are making a positive contribution to deinstitutionalisation (Lerch & Stein, 2010).

This paper, in drawing on two mapping studies, represents a beginning for making comparisons between European and postcommunist societies in the field of young people's transitions from care to adulthood. In the main it provides basic descriptive data and, as identified above, there are limitations and gaps. However, it does provide a starting point for further empirical and theoretical work, including the need for a comparative systematic mapping exercise, the gathering of outcome data drawing on official information and research, and further exploration of contextual issues. There may also be opportunities to extend this comparative approach to other countries— as Pinkerton (2011) reminded us, we are still a long way from having a global perspective: "there is no readily available material on leaving care in Africa, China, India and South America" (p. 2412).

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