EDITORIAL

Leaving care: Continuity of care vs. continuity of rights in a period of transition?

Leaving care may entail various circumstances for children and young people, which call for a process of comprehensive assessment, preparation, support and monitoring. Is the importance of this process given due consideration and adequately implemented?

The process of leaving care – which is undoubtedly a process of transition – is a vital period in a child or young person’s life. It is often understood that young people leave care when they come of age in the system, but children may also leave care when there is a reintegration into their family of origin or when they move to another placement. Nonetheless, it remains a low priority for many countries in their efforts taken to strengthen their child protection systems. A number of questions arise out of this ‘low priority status’: How is reintegration supposed to be a permanent solution without adequate support for children and their families? How are young people expected to become autonomous without adequate preparation and post-care support? Are the voices of young people listened to and taken into consideration during the process?

Leaving care towards reintegration: Are children and families adequately assessed, prepared and supported?

One ground for initiating a process of leaving care is when there is a good possibility that a child could return to their family environment – that is, when this option responds to their best interests and is based on a comprehensive intervention with the child and the family allowing the initial grounds for the family’s separation to be overcome. In principle, is not reintegration the primary goal of leaving care, as promoted in the Guidelines for the Alternative Care of Children (Paras. 49-52)? With this in mind, what steps need to be undertaken prior to, during and following the child’s reintegration to ensure it provides true permanency for the child, avoiding the common occurrence of repeated placements?

As with all aspects of alternative care, there is a need for individualised planning (Guidelines for the Alternative Care of Children, Para. 132). As reflected in the Guidelines on Children’s Reintegration, there must be an assessment and planning; the child and the family must be prepared and be able to participate; they must have prior periodic contact; and post-reunification support must be planned (see p. 6). These steps are all essential to ensure positive outcomes for the child and the family, as the Guidelines on Children’s Reintegration reiterate that reintegration is not only a ‘physical reunification’...
(i.e. reunification) but involves ‘a sense of belonging and purpose in all spheres of life’.

Leaving care towards another placement: How are continuity and certainty ensured during the transition?

In other situations, the child may need to move from one type of placement to another – either temporarily, or sometimes permanently. How can key elements of a child’s well-being, such as the need for continuity and certainty, be ensured in this process? Indeed, such a transition is not only a physical change in the child’s living environment, but such as shift undoubtedly will also have an impact on his or her well-being. Thus, once again, it is vital to ensure that there is an individualised planning process, and adequate sharing of information amongst professionals. How often do care leavers actually receive comprehensive information and explanation about the prospective options? How are their voices listened to? What is being undertaken to strengthen the capacity of professionals to support this process (see Monthly Review No. 208 (January 2017))?  

Leaving care towards autonomy: Complex outcomes calling for a variety of initiatives?

Finally, a young person reaching the legal age for leaving care will require the determination of an independent life project. Is aftercare support available and for how long? Are young people involved and their voices listened to in their transition? Based on their participation, the child should be able to ‘assume self-reliance and integrate fully in the community, notably through the acquisition of social and life skills’ (Guidelines for the Alternative Care of Children, Para. 131). With this in mind, how are young people expected to manage so many aspects of life when many of them have been placed in forms of care that do not promote their autonomy, with the disastrous consequences this may entail? This lack of preparation for independent living has found its way into the Guidelines for the Alternative Care of Children, which promote the allocation of ‘a specialised person who can facilitate his/her independence when leaving care’ (Para. 133) and the availability of ‘access to social, legal and health services, together with appropriate financial support’ (Para. 136).

Given the complexity of this process for the young people themselves (see p. 10), they sometimes have to resort to returning to their families of origin due to a lack of viable options. Care leavers’ networks have been created and contribute to the strengthening of child protection systems (see pp. 10 and 12 and Monthly Review No. 223 (July 2018) and 237 (December 2019)), reflecting the needs and difficulties faced by many care leavers worldwide, such as to connect with peers to move forward initiatives aimed at facilitating this period (housing, education and employment, health care, preventing potential risks, etc.), whilst also learning to assume responsibilities towards autonomy.

Some nations have acknowledged this sensitive period and have adopted legal instruments to ensure that support is offered beyond the legal age to leave care. In this regard, recent Scottish legislation increased the leaving care age and subsequent ongoing support, and introduced ‘corporate parenting’ and support with housing (see Monthly Review No. 198 (January 2016) and No. 299 (February 2016)). Likewise, in Italy, the government created a fund for young people transitioning out of care, and in Argentina, a specific law on leaving care has been adopted (see p. 12). Furthermore, a number of comparative regional and national studies, some of them involving care leavers (see p. 7), have put these issues further up on the agenda and in care professionals’ training.

Leaving care is a complex process that ‘should be prepared as early as possible (...) and, in any case, well before the child leaves the care setting’ (Guidelines for the Alternative Care of Children, Para. 134). A number of promising practices demonstrate that actions can be undertaken to strengthen the various stages of this process. However, there is no greater evidence than the voices and actions taken by care leavers worldwide – some of them with specific experiences, such as having migrated, having to leave care during the COVID-19 pandemic (see p. 5) or with disabilities – to promote the implementation of their rights and positive outcomes following their care experience.

The ISS/IRC team,
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References:
1. See, for example, studies and articles at: Child Welfare Information Gateway, Preventing placement re-entry, https://www.childwelfare.gov/topics/permanency/reunification/prev-reentry/