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NEW PROFESSIONAL APPROACHES FOR CARE LEAVER IN FOSTER CARE REGARDING THEIR PSYCHOLOGICAL AND PHYSICAL HEALTH, THEIR SOCIAL PARTICIPATION AND OVERALL LIFE CONDITION*

Introduction: The number of young people with limited or non-existent social participation is growing. Characteristic is the proportion of young homeless individuals who had previous institutional contact with youth welfare. For this group of Care Leavers, the assistance provided can be considered inadequate and unsuccessful. Their life and health situation can be described as precarious.

Research Aim: The practice research project aims improvement in the situation of care leavers with specific courses of development regarding their psychological and physical health, their social participation and overall life condition. (Care leavers grew up in out-of-family placements / foster families (according to §§ 27, 2; 33–34 SGB VIII) and are characterized as young people that are leaving or have left these public youth welfare institutions.) It is funded by the Federal Ministry of Education and Research (BMBF) and carried out in cooperation with various practice institutions, *inter alia*, youth welfare, addiction care and homeless assistance facilities, educational institutions and job centers.

Research Method: This study employed a mixed-methods approach, combining qualitative and quantitative methods, following a complementary design type, with the results integrated.

Results: Care Leavers with specific problems and developmental situations exhibit significant discontinuities in their upbringing, face difficulties, a lack of positive life orientation, and social

* Suggested citation: Frietsch, R., Holbach, D., Leißling, C. (2024). New Professional Approaches for Care Leaver in Foster Care Regarding Their Psychological and Physical Health, Their Social Participation and Overall Life Condition. *Lubelski Rocznik Pedagogiczny*, 43(3), 7–26. <http://dx.doi.org/10.17951/lrp.2024.43.3.7-26>

relationships, and are characterized by unresolved developmental tasks and critical life events.

Conclusion: The identified psychosocial developmental disorders and stressors require increased professional care – better assessment, case management, trainings for Resource Activation and Resilience Promotion – both within the framework of youth welfare and other support facilities.

Keywords: youth welfare, care leaver, salutogenesis, vulnerability, resource activation, resilience

INTRODUCTION

The rate of unplanned terminations or discontinuations of residential youth welfare measures in Germany has remained around 55% for several years (Tabel et al., 2023). The negative experiences of young people with the support system and the documented abrupt discharges from residential youth welfare settings are symptomatic. The problematic courses and experiences of out-of-home placement and institutionalization are often perceived by young people as individual failures, leading them to internalize this as a “Self-Fulfilling Prophecy” in their self-image. Many of these Care Leavers, due to their corresponding biographical experiences, approach support services with a rejecting, negative attitude, so self-initiated or renewed turns to such institutions rarely occur except in emergencies (Annen, 2020). Missing social networks, and consequently missing social support, are characteristic for these young people. Traumatic experiences in the family of origin, entrenched attachment disorders, and unresolved developmental tasks are also significant for this target group (Havighurst and Dreyer, 1975). The concrete relationships with the family of origin are characterized by ambivalences and, depending on the reasons for out-of-home placement, burdens as well as few stabilizing factors. While the family system continues to influence life orientations and activities, there is hardly any support for the successful coping with educational achievements and life goals (Sting and Groinig, 2020).

Various studies suggest that these Care Leavers often become homeless after the end of institutional support (Beierle and Hoch, 2017; Mögling et al., 2015). For a large proportion of under 25-year-old homeless individuals (60% of male and even 78% of female respondents), previous institutional contact with youth welfare could be identified (Frietsch et al., 2014; Frietsch and Holbach, 2021). In a study on the situation of young 18- to 25-year-old homeless people, 75% had previous contact with youth welfare (Knopp et al., 2014). For young people who orientate their lives on the streets with their peer group, there is often no longer a connection to classical socialization institutions and rejection of youth welfare measures (Fernandez, 2018; Mücher, 2010).

Studies further demonstrate that formerly institutionalized young people are a highly burdened group, characterized by experiences of abuse and neglect in



their biographies (Rebbe et al., 2018). Compared to the German general population, their risk of mental illness is two to four times higher (Côté et al., 2018; Courtney et al., 2014). Study results from a Swiss cohort entitled “Jugendhilfeverläufe: Aus Erfahrung Lernen (JAEL)” (Schmid et al., 2022) show that Care Leavers are characterized into adulthood by persistent psychosocial stress with a high risk of chronicity. Early diagnosis of abnormalities allows for timely initiation of supportive measures and thus prevention of symptom chronicity (d’Huart et al., 2022). Care Leavers are also twice as likely to be criminally convicted compared to non-out-of-home placed young people with a similarly burdened socioeconomic background (Côté et al., 2018).

This group of young people is thus characterized by frequent discontinuities in their upbringing (including self-initiated or externally enforced removals from the family with placement in foster care and/or early institutional experiences with repeated changes of institutions) and ultimately exclusion or impending exclusion from social relationships, thus, endangering societal participation.

RESEARCH AIM AND QUESTION

For young people who have spent part of their lives in foster families or in residential youth care facilities and who suffer from severe complex problems, the completion of these youth welfare measures and the transition to independent adulthood represent an extremely critical phase (cf. Frietsch and Holbach, 2021). For this group of Care Leavers, there is a risk of deterioration in physical and mental health, as well as increased and prolonged social exclusion, if specific problems become entrenched and chronic. Therefore, it is crucial for this psychosocially vulnerable and socioeconomically disadvantaged group to have access to specific structural and professional support in order to achieve appropriate living standards and societal integration. To successfully navigate this transition process, the Institute for Research and Continuing Education (IFW) at Koblenz University of Applied Sciences has developed the practice research project “Health and Life Orientation for Care Leavers”. This project aims to improve the health and life situation of young people who have been cared for in foster families or in residential youth care facilities and who have specific problems.

Through a cross-sectional analysis, the aim was to comprehensively assess and analyze the development and current status of the life situation of a specific group of Care Leavers. The results were intended to serve as a basis for the development of instruments to establish a standardized methodological approach for identifying acute needs for assistance, as well as to develop and evaluate training modules aimed at promoting resilience and life skills for this target group.

The following research questions were central to the cross-sectional survey:

- What psychosocial characteristics characterize the life situation of Care Leavers in specific problem situations?
- What experiences have they had in relationships, and how are feelings of belonging constructed and shaped?
- What private and professional social networks are available to them?
- What is the health situation of the target group? What medical treatment experiences have they had, and what are their lifestyle habits regarding consumption behavior?
- What experiences have they had with youth welfare and other social services?
- What resources are available to Care Leavers for vocational and social participation? What are their specific educational or career goals?
- What is the financial situation of the target group regarding debts? What is the current legal situation regarding ongoing or completed proceedings with authorities? Are there legal burdens from the past?
- What are the effects of the COVID-19 pandemic on the health and life situation of young people?

RESEARCH METHOD AND SAMPLE CHARACTERISTICS

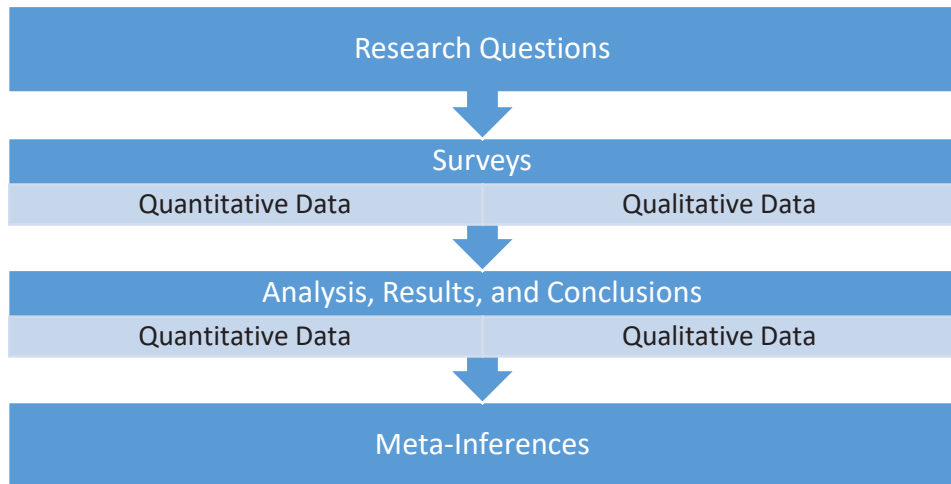
The practice research project aims to improve the social living situations and health of Care Leavers in specific problem areas. To implement this methodological approach, it was initially necessary to establish an appropriate professional access for this target group and develop a “Toolkit for Care Leavers” in collaboration with local professionals. This toolkit is intended to help address the problems of the target group over the long term, including through the use of software. The methodological approach was implemented as follows:

- establishing a professional access to the target group through binding cooperation agreements with practice partners and improving interface management (following the Case Management approach),
- developing a target group-specific concept and a specific “Toolkit for Care Leavers”,
- creating specialized software for utilizing the developed tools and for documenting and analyzing the entire help process (including a manual for using the documentation system),
- developing specific training modules and workshops for professionals to improve the social and health situations as well as the qualification and participation of the target group.



In this study, qualitative and quantitative methods were combined in a mixed-methods (Kuckartz, 2014) design, following the design type of complementarity, and the results were linked together (Figure 1). By simultaneously employing both methods, a better understanding of the extensive dataset was achieved. The research design integrates the analysis strands of the qualitative and quantitative surveys conducted concurrently, leading to a comparative view of the conclusions.

Figure 1.
Flowchart of the Research Design



Source: Adapted from (Kuckartz, 2014).

In the concluding discussion, the results of both methodological approaches were integrated and do not stand isolated from each other. The following sections describe the research steps.

To collect data, a discussion guide was developed beforehand for conducting personal interviews with the target group. By compiling questions related to the research objectives, various thematic areas were identified and grouped, forming the structure of the guide and thus the focal points of the interviews. The following figure provides an overview of the topics underlying the conversations (Figure 2).

Figure 2.
Contents of the Conversations

Family socialization Course and specific events Significant figures, Binding experiences	Contacts with youth welfare services Occasion and course of the assistance experience Significant figures	Educational, training, and employment biography Key points regarding course experiences
Health situation Lifestyle habits Consumption habits Treatment experiences	Legal, financial situation Involvement in legal proceedings Experience with sanctions Debt situation	Current life situation Relationship status Legal guardianship status

Source: Authors' own study.

The following standardized assessment/analysis instruments were used to capture the current life situation, including the resources of the target group, which were evaluated using statistical methods:

- Anamnesis of life orientation (Sense of Coherence Scale, Antonovsky, 1997 or the Dortmund Children SOC, Lengning et al., 2009)
- Anamnesis of health-related quality of life (Kidscreen questionnaire 52, Ravens-Sieberer et al., 2007)
- Anamnesis of self-efficacy (General Self-Efficacy Scale, Schwarzer and Jerusalem, 1999)
- Anamnesis of resilience (RS 25 Resilience Scale, Leppert et al., 2008)
- Anamnesis of relevant life events or Critical Life Events (ZLEL-Zurich Life Events List, Steinhausen and Winkler Metzke, 2001; Inventory of Life-Changing Events, Siegrist and Geyer, 2014; LRI-A Leipzig Resources Inventory, Klemm, 2020)
- Assessment of attachment experiences (AAS-R Revised Adult Attachment Scale, Schmidt et al., 2016; EBF-KJ Parent Image Questionnaire, Titze and Lehmkuhl, 2005; RQ Relationship-Questionnaire, Bartolomew and Horowitz, 1991)
- Questionnaire on mental health status (GHQ 12 General Health Questionnaire, Goldberg and Williams, 1991)
- Tests for stress disorders (PTSS 10 Posttraumatic Stress Scale, Maerker, 2003; CTQ Child Trauma Questionnaire, Bernstein et al., 2003)
- Consumption habits – Substance use disorders illegal substances, medications, alcohol-related disorders (AUDIT Alcohol Use Disorders Identification Test, Babor et al., 2001; SDS Severity of Dependence

Scale, Kaye and Darke, 2002; Substance Use Questionnaire, Müller and Abbet, 2019)

- Assessment of individual development and support needs based on the Case Management concept according to the German Society for Care and Case Management (DGCC, Wendt and Löcherbach, 2017).

Furthermore, the experience of the Corona pandemic and its consequences were differentiated through guideline-based interviews with the target group and professionals from various institutions.

The selection of the Care Leaver sample was conducted as a convenience samplebased on cooperation agreements with the WPK partners who had professional contact with the target group. Arbitrary selection by professionals from the WPK partners and the willingness of the clients to participate. The sample consisted of clients of the participating cooperation partners who were identified as Care Leavers with specific problem situations. Care Leavers are young people who have grown up in foster families or residential youth facilities and are therefore under the jurisdiction of public youth welfare services, have been discharged, and often discontinued or left youth welfare services – often multiple times – for disciplinary reasons. The participants were recruited by the involved WPK partners and motivated by the research team members to participate in the research project after a preliminary discussion, and were interviewed after giving consent.

The individual interviews took place in a separate room and were conducted in person according to a previously developed interview guide that served as a reference for the interviewers. Specific data collection and analysis instruments in the form of questionnaires were also used during the conversation. The interview started with a question about the memory of the first contact with youth welfare services and then followed the interview guide. The individual interviews lasted between 60 and 120 minutes, with some participants having multiple conversations throughout the project. Anonymity was assured to the interviewees in writing, and the use of the collected data was exclusively for the purposes of the practice-research project. The interviews were recorded with the participants' consent, and the recorded material amounted to over 400 hours.

STATISTICAL DATA ANALYSIS PROCEDURE

The analysis of the sociodemographic data and the standardized survey instruments of the sample was conducted quantitatively. The data were analyzed in several steps: initially descriptively for all respondents (univariate), then differentiated according to specific aspects of the respondents (bivariate), and finally according

to cumulative characteristics of the individual persons (multivariate). Comparisons with data from other studies and panel surveys provide insight into how the sample compares to representative data from the general population. However, the specific composition of the sample must also be taken into account when interpreting these comparisons.

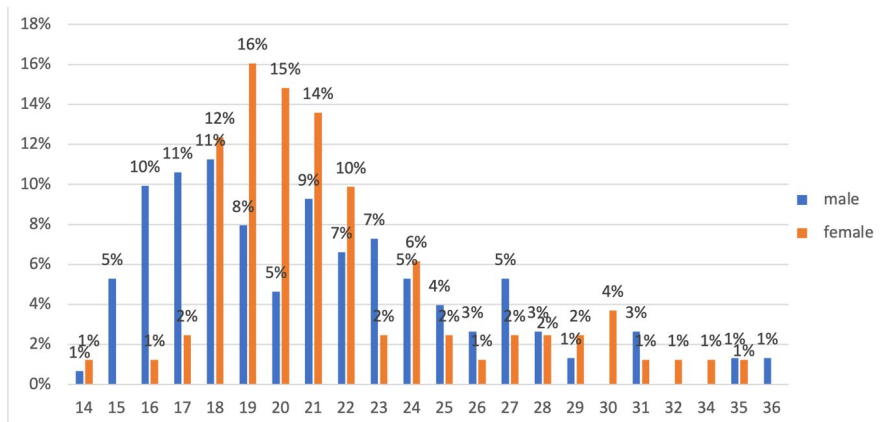
The interview statements from the face-to-face conversations were qualitatively analyzed using a category scheme. All recorded conversations were transcribed verbatim, amounting to approximately 1,000 pages. The qualitative data were analyzed according to the method of content analysis following Mayring's (2013) approach. Here, the complexity of the transcribed data was reduced by categorizing them into categories that were developed inductively from the material. The systematic approach to qualitative content analysis followed established procedures and workflow models. The transcribed material was systematically processed, initially examining a portion of the material to identify central categories. After establishing these categories, the entire material was examined for them and systematically processed by several individuals to ensure reliable assignment of text elements. Care was taken to adequately consider newly emerging aspects and to expand the list of categories if necessary. This predefined process in the examination and analysis allowed for the individual steps (development of survey methods, transcription rules, analysis methods, etc.) and their results to be comprehensible. Interpretation was done in groups to ensure that the subjective evaluations of individual researchers did not unduly influence the results.

SIZE AND SOCIO-DEMOGRAPHIC CHARACTERISTICS OF THE STUDY GROUP

The cross-sectional survey could be carried out with 232 care leavers who were characterized by specific problems and development needs. The age of the study participants ranged from 14 to 36 years (Figure 3). While the study included all genders and gender identities, 65% of the surveyed care leavers identified as male (151 people) and 35% identified as female (81 people). Almost all respondents ($f = 97\%$; $m = 95\%$) were of German nationality. 6% of the surveyed young men and women reported a refugee background.



Figure 3.
Age of the study participants



Source: Authors' own study.

RESULTS

Admission to residential youth welfare

The care leavers surveyed were on average 7.3 years old when they first contacted the youth welfare office; this is evidence of very early family problem constellations. The first residential stay in youth welfare or a foster family was established at the age of 9 for the young women surveyed and at 9.4 years for the young men surveyed. Many insufficient participatory and sometimes traumatizing removals from the family of origin have been documented (e.g. taking into care under other pretexts (e.g. excursion), lack of transparency about the scope and duration of inpatient educational assistance). In addition, several young people reported stressful experiences when admitted to residential youth welfare services.

Psychiatric problems and treatments

In the interviews, many respondents ($N = 202$, $f = 69$, $m = 133$) reported phases of psychological instability up to serious crises requiring treatment. 29% of young women and 32% of young men have already sought outpatient medical/therapeutic help to treat mental disorders. 61% of young women and 37% of young men reported residential psychiatric treatment. 22% of the young people surveyed ($f = 33\%$; $m = 13\%$) reported attempting suicide.

Substance use and detoxification treatment

The majority of surveyed care leavers showed a substance-related addiction problem, including "illegal drugs" such as amphetamines, ecstasy, LSD, cocaine, NPS,

inhalants, cannabis and mushrooms. 67% of young women and 90% of young men reported using illegal drugs. Overall, many respondents exhibited polydrug consumption behavior with a mixture of several illegal drugs and legal substances such as tobacco and water pipes. 73% of the young men and 51% of the young women consumed first time up to age 13. Addiction/detoxification treatment was already provided to 81% of male care leavers and 33% of female care leavers.

Critical life events

With regard to unresolved critical life events (Filipp and Aymanns, 2018), young women mentioned primarily experiences of violence (52%), highly conflictive parental relationships (39%) and serious illnesses (33%). The young men surveyed cited alcohol/drug problems (56%), highly conflictive parental relationships (42%), and the death of close relatives (35%).

Experiences of violence

More than 50% of the young women and men surveyed reported experiences of violence within and/or outside the family ($N = 213$, $f = 72$, $m = 141$). 58% of young women and 48% of young men had experienced physical harm or abuse. 35% of female and 13% of male care leavers ($N = 232$, $f = 151$, $m = 81$) were exposed to sexual violence.

Judicial burdens/delinquency

72% of all care leavers surveyed ($N = 168$, $f = 50$, $m = 118$) reported judicial burdens due to violations of law, like violations of the BtMG, theft or burglary, damage to property, obtaining transportation services by fraud and bodily harm.

Over-indebtedness

Over half of the young people surveyed ($N = 203$, $f = 69$, $m = 134$) were in a situation of excessive indebtedness. The average amount of debt was around EUR 4,500 for female and EUR 10,000 for male care leavers. Some of those had not taken advantage of debt counseling at the time of survey, although an immediate debt limitation was urgently needed.

Primary problem areas

Identified primary problem areas were psychological impairments and psychosocial problems ($f = 95\%$, $m = 90\%$) due to heavily strained family relationships as well as substance use disorders/drug addiction ($f = 35\%$, $m = 72\%$). The current housing situation ($f = 23\%$, $m = 19\%$) and impending housing emergencies also proved to be problematic for many respondents. Several care leavers also rated their training/employment situation as stressful ($f = 11\%$, $m = 22\%$).

Social networks/relationships

Close contact persons for reliable help/support in case of problems/emergencies could not be named by 30% of the young women and 43% of the young men ($N = 203$, $f = 69$, $m = 134$). 39% of female and 44% of male care leavers stated that they could turn to parents, foster parents or grandparents at least partially/for certain problems. At the same time, however, these family relationships were assessed as very fragile/unsustainable. The majority of young people surveyed did therefore not have any viable social networks for support in problems/crises.

Experiences of help/support from youth welfare office

Around half of the care leavers surveyed ($f = 46\%$, $m = 53\%$) found help planning to be ineffective. Another third ($f = 43\%$, $m = 30\%$) rated some of the help as effective. 11% of the female and 17% of the male respondents had a positive/satisfactory experience with the help.

Effects of the Corona pandemic

The impact of the Corona pandemic was evident among the care leavers surveyed in terms of the lack of everyday structures (significant restrictions on personal freedoms), the high threshold for advice/support and the cancellation of help (loss of skilled workers with pre-existing health problems), as well as a lack of contacts, social isolation, withdrawal from support offers. Further effects were increased alcohol and drug consumption, increased media consumption (analog, digital), as well as a lack/inadequate digital connection for digital forms of teaching and uncertain transitions from school to qualification forms.

Life Orientation according to Antonovsky

Using the Sense of Coherence Scale (SOC 29) questionnaire by Antonovsky (1997), the survey participants' psychosocial life experiences and attitudes affecting their ability to cope with stress and maintain health in various life situations were assessed. The average SOC value among the interviewed young women is 106, while among the young men, it is only slightly higher at 108. In comparison, the value among the reference group of young people in the general population is 146, significantly higher. Only 6 of the interviewed Care Leavers (1 male, 5 females) achieved an SOC value equivalent to that of the general population. These results of the SOC 29 study on life orientation measurement underline the increased vulnerability of the target group.

DISCUSSION

In summary, it can be observed that the life situation of the interviewed Care Leavers is characterized by high complexity. The analysis of the support experiences of

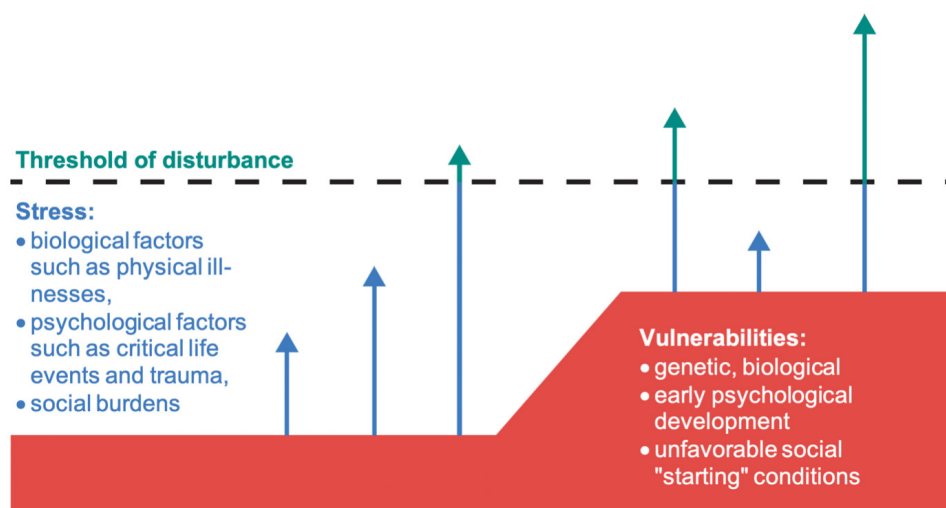
this group clearly indicates that institutional support measures, especially in the field of youth welfare, have not been professionally adequate so far. In this context, urgent legal and conceptual realignments are necessary to conduct comprehensive psychosocial assessments in a timely manner and to offer differentiated professional support.

Vulnerability: Model for understanding/consolidation of disorders

The vulnerability concept offers a model for understanding the emergence and consolidation of disorders of varying degrees. This concept describes vulnerability as genetically and/or biographically acquired susceptibility, which develops as a result of prolonged and multi-layered stress into symptoms of vulnerability. These psychosomatic symptoms can manifest, among other things, as self-harm tendencies, such as addiction behavior. Fundamental criteria for vulnerability include insecure social networks, lack of relief options, negative self-concepts, and specifically consolidated attribution styles. Vulnerability is also increased by socio-ecological or developmental discontinuities/transitions, such as frequent changes of caregivers documented in "Care Leavers", as well as critical life events in the family and relevant caregivers, such as illness, separation/divorce, and unemployment.

Figure 4.

Vulnerability as an explanatory concept for clinical pictures, processing through resource activation and resilience promotion



Source: (Wirtz, 2019).

The documented life experiences from various areas collectively lead to an accumulation of significant stressors, which also indicate an increased susceptibili-

ty to psychopathological developments (Figure 4). For this group of young Care Leavers with complex developmental areas, the methodological offers for processing must therefore be more professionally differentiated.

CONCLUSIONS

Professionally appropriate development promotion

The identified diverse psychosocial developmental disorders and stressors among care leavers require increased attention and professional care both within the framework of stationary educational assistance and in other support facilities. It is professionally necessary to use valid assessment and diagnostic tools for early detection of disorders and to timely refer the affected individuals to further support services. This requires professional guidance through a specialist assessment, including a binding overall support plan according to case management. Additionally, binding cooperation agreements with various local service providers such as youth welfare, addiction services, socio-/psychotherapeutic institutions, or job centers are essential. The opportunity for participation, for example, through membership in self-help groups, associations, or sports clubs, is also important. Through extendable assistance, transitional offers, aftercare services, and return options, young people should be enabled to make a successful transition to independent living after completing stationary youth welfare measures (discharge management).

Need of early prevention of failed youth welfare measurements

Based on the survey results of the practical research project (data analysis of interviews, questionnaires and tests on the living situation as well as previous experiences with help), three target groups with the following areas for improvement were identified:

1. Target group: Young people who are admitted to residential youth welfare facilities (even after conflictual termination of care phases in foster families and early terminations of other residential youth welfare measures). Professional goals for this young people should be: Promoting development (specific professional diagnostics, intervention and evaluation) within residential youth welfare using professional instruments (specific survey instruments and methods for resource activation and resilience promotion).
2. Target group: Young people with behavioral problems (particularly addiction problems) in measures of residential youth welfare. Professional goals for this target group: (re)integration into the help, prevention of further breaks/terminations (with attachment figures inside the youth welfare facilities) through integration groups/intensive care of young people in special residential groups (including

consideration of the peer group) as well as intensified specific development support through specific professional instruments and methods.

3. Target group: Young people looked after in residential youth welfare facilities before the help is broken off/terminated (because of conflicts with youth welfare/educational institutions and instances of formal social control such as the police/youth court). Professional goals regarding these young people: Responsible discharge and/or handover to other support providers through life orientation training as well as differentiated, professional discharge management (according to case management criteria) and aftercare.

Developmental support through targeted training programs

A professionally appropriate approach to addressing the issues is to ensure training and education modules based on salutogenesis in the youth welfare setting, such as “Coaching to Go” and “Coaching for Resource Orientation and Resilience Promotion”. The aim is to offer care leavers learning opportunities for the development of relationship and conflict skills and to support them in activating internal and external resources. This enables young people to try out alternatives to symptomatic problem behaviors such as substance abuse, lack of compliance, school absenteeism, or delinquency under professional guidance. Based on the survey results, the integrated exercises of “Coaching to Go!” and “Coaching for Resource Activation and Resilience Promotion” take into account the specific developmental needs of the target group by strengthening their motivation, self-efficacy, comprehensibility, manageability, and meaningfulness according to the salutogenesis concept. The selection of methods is tailored to the target group to facilitate the input of their own opinions, ideas, strengths, and personal ideas. Across modules, a resource pool is built that presents participants with alternatives to their symptomatic problem behaviors and contributes to the development of a positive life orientation and psychosocial health promotion.

“Coaching to Go!” for 13- to 20-year-old care leavers

The “Coaching to Go!” training program is aimed at adolescents and young adults aged 13 to 20. The title illustrates the goal of emerging strengthened from stationary youth welfare or other support systems and mastering the transition to independent daily life and coping with a positive orientation toward life and health, ultimately integrating into society. “Coaching to Go!” specifically considers the needs and life situations of care leavers who are still in the youth welfare system despite several interruptions or who have ended youth welfare in other systems, planned or unplanned. With the “Coaching to Go!” manual, coaching professionals receive a flexible guide that can be adapted to the challenges of everyday life in the respective support system. The coaching comprises seven training modules that allow participants to explore their individual life situations, rediscover their



skills, formulate clear goals, and gain practical experience in everyday life. This process is consciously playful and experiential, with the questions and tasks used being focused on experiences and offering specific learning opportunities in diverse thematic settings. The modules cover the following topics:

1. Module – Warming-Up, Resource Identification: Inventory, personal approaches and skills, personal interests and strengths.
2. Module – Three Dimensions of Life Orientation, Sense of Coherence: Communication skills, dilemma situations, peer group orientation and group consensus.
3. Module – Success Stories / Success in My Life: Conflict and relationship skills training (role plays), definition of success, successful problem analysis, search, and solution.
4. Module – Trying Out New Things – Collecting, Evaluating, Transforming Experiences: Negotiating skills/strategies, abstract-cognitive problem-solving ability, self-reflection.
5. Module – Searching Together and Presenting the “Case”: Collecting, analyzing, and evaluating facts, reflecting on personal values and norms, forming opinions.
6. Module – Resource Kit: What’s next? What have I achieved? Individual interviews and final assessment DoK-SOC or SOC29. What do I do with the results? (Outlook – “Coaching to Go” – Da Capo): Resource pool, balancing demands and resources, resource activation/priming.
7. Module – Separation, Transition, Restart: Life area radar, clarification of perspectives, goal formulation, planning, and monitoring.

“Coaching for Resource Orientation and Resilience Promotion” for 21- to 35-year-old care leavers

With a focus on utilizing existing resources, “Coaching for Resource Orientation and Resilience Promotion” has been developed for young people aged 21 to 35 with specific problems and developmental trajectories. Especially care leavers still need support in this age group to shape their lives and develop a positive orientation toward life and health. The training program is therefore specifically tailored to the needs and life situations of 21- to 35-year-old young people who are supported in support systems. The corresponding manual provides professionals with a flexible guide that can be used and adapted to the challenges of everyday life in the support system. Like “Coaching to Go!”, this training program consists of seven consecutive modules. The selected exercises provide participants with an exploration field for researching their current life situation and skills. In the training process, young people repeatedly formulate goals that they can test in everyday life. This process is consciously playful and experiential and is supported by new experiences and learning processes. These topics are covered in the seven modules:

1. Module – Starting Point, Resource Identification: Getting to know each other and mutual introduction, personal assessment of the current situation, strengths in favorite songs, the diverse interests and strengths of the group.
2. Module – Reflection and Perception Training: Social and person-related perception, facial expressions/mimic resonance, intuition vs. cognition, group result surpasses individual result.
3. Module – Strengths from Experiences and Life Experiences: Lasting memories, map of heroes/heroines from childhood and youth, strengthening peer relationships, exchange on the topic of respect.
4. Module – Three Dimensions of Life Orientation – Sense of Coherence: Thoughts and perceptions in a person's life, understanding others and communicating one's own perception, achieving consensus and recognizing group performance, discussing human dilemma situations.
5. Module – Conflict and Relationship Skills Training: Identifying conflict strategies, negotiation strategies in role play, tensions in the team, communication exercise, change of perspective.
6. Module – Recognizing Own Thought Patterns – Criminal Cases: Forming opinions using press releases, further investigative work based on the trace files, recognizing one's own (possibly biased) thought patterns.
7. Module – Separation, Transition, Restart: Life area radar, discovering basic needs and resources, writing a story in six months, creating a vision board.

CURRENT SOCIAL RELEVANCE OF THE RESEARCH RESULTS

During course of the project, in June 2021, the German Child and Youth Strengthening Act (KJSG) came into force (Bundesministerium der Justiz, 2021), which takes better support for care leavers into account. According to KJSG, youth welfare providers are obliged to set up timely transition planning for care leavers, while including other relevant specialist disciplines (e.g. job centers, integration assistance) (§ 36b SGB VIII). Obligatory support for care leavers in every stage of the process is also mandatory (§ 41a SGB VIII). Young adults over 18 are granted the unrestricted right to come back to the system and receive youth welfare support despite being of legal age.

By strengthening young people before, during and after the leaving care process, the KJSG offers the legal basis for improved support structures. The amendment also opens up new conceptual possibilities, particularly with regard to greater consideration of young people's life orientation and the introduction of new technical approaches such as resource orientation and resilience promotion. However, the successful implementation of the legal strengthening depends largely on how

those involved meet the current challenges, such as still undefined details in the amendment, increase of clients with severe complex problems, growing personnel requirements and a simultaneous shortage of skilled workers, as well as the necessary training and further development of professional skills. Furthermore, the KJSG requires continued reliable financial and substantive design as well as evaluative practical support. Among care leavers there is currently an important debate about who (institutions, foster families, youth welfare offices, guardians, etc.) should be considered for improved support and follow-up care. Their perspectives should also be taken into account, when implementing the new legal rights.

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NOWE PODEJŚCIE ZAWODOWE DLA OSÓB OPUSZCZAJĄCYCH PIECZĘ ZASTĘPCZĄ: SZKOLENIE „COACHING TO GO!”

Wprowadzenie: Rośnie liczba młodych ludzi, którzy mają ograniczony lub całkowity brak uczestnictwa w życiu społecznym. Charakterystyczny jest odsetek młodych bezdomnych, którzy mieli wcześniejszy kontakt instytucjonalny z pomocą społeczną dla młodzieży. W przypadku tej grupy osób opuszczających placówki opiekuńczo-wychowawcze świadczona pomoc może być uznana za nieadekwatną i nieskuteczną. Ich sytuację życiową i zdrowotną można określić jako niepewną.

Cel badań: Projekt badawczy ma na celu poprawę sytuacji osób porzucających opiekę z określonymi kierunkami rozwoju w zakresie ich zdrowia psychicznego i fizycznego, ich uczestnictwa w życiu społecznym i ogólnej kondycji życiowej. (Osoby porzucające opiekę dorastały w placówkach pozarodzinnych / rodzinach zastępczych (zgodnie z §§ 27,2; 33–34 SGB VIII) i charakteryzują się jako młodzi ludzie, którzy opuszczają lub opuścili te publiczne instytucje opieki nad młodzieżą). Badanie jest finansowane przez Federalne Ministerstwo Edukacji i Badań Naukowych (BMBF) i przeprowadzane we współpracy z różnymi instytucjami praktycznymi, m.in. ośrodkami pomocy młodzieży, ośrodkami opieki nad osobami uzależnionymi i bezdomnymi, instytucjami edukacyjnymi i urzędami pracy.

Metoda badań: W badaniu zastosowano podejście mieszane, łączące metody jakościowe i ilościowe, zgodnie z komplementarnym typem projektu, a ich wyniki zostały połączone.

Wyniki: Osoby ze specyficznymi problemami i sytuacjami rozwojowymi porzucające opiekę wykazują znaczące nieciągłości w wychowaniu, borykają się z trudnościami, brakiem pozytywnej orientacji życiowej i relacji społecznych oraz charakteryzują się nierozwiązanymi zadaniami rozwojowymi i krytycznymi wydarzeniami życiowymi.

Wnioski: Zidentyfikowane psychospołeczne zaburzenia rozwojowe i stresory wymagają zwiększonej profesjonalnej opieki – lepszej oceny, zindywidualizowanego podejścia, szkoleń w zakresie pozyskiwania zasobów i promowania *resilience* – zarówno w ramach pomocy społecznej dla młodzieży, jak i innych placówek wsparcia.

Słowa kluczowe: pomoc społeczna dla młodzieży, wychowankowie placówek opiekuńczo-wychowawczych, salutogeneza, podatność na stres, aktywizacja zasobów, *resilience*