Scottish Journal of Residential Child Care: An international journal of group and family care experience

Volume 21.1

Emerging Adulthood: Exploring the implications for care experienced young people and those who care for them

Kenny McGhee and Sarah Deeley

Abstract

In this paper, we aim to explore some of the notions and concepts around 'emerging adulthood'; what this might mean for Scotland's care experienced young people; and what this might mean for those who care for them. Societally, transition to adulthood is a longer, more extended process than it was a few decades ago. Young people now generally live longer with their parents who tend to help with ongoing practical and financial support, as well as providing ongoing emotional and relational support and security. Changes in access to secure well-paid employment and to affordable housing and accommodation have been cited as key influencing factors. However, despite recent changes in domestic policy and legislation, too many young people growing up in alternative care – in foster care, residential care and kinship care – continue to experience their transitions from care to adulthood to be accelerated and abrupt. We set the context by exploring some definitions and offering some reflections on the concept of emerging adulthood, and what this might mean for young people transitioning from care to adulthood and interdependence. The challenges faced by our young people, and the need for extended care has become even more amplified as the impacts of the COVID-19 pandemic have hit home - and as the fragility of supports, and the structural disadvantages that many care experienced young people face, have been laid bare.

Keywords

Emerging adulthood, leaving care, transitions, care experienced young people, ageing out of care, Scotland

This work is licensed under a [Creative Commons Attribution-NonCommercial-NoDerivatives 4.0 International License]

Corresponding author:

Kenny McGhee, Throughcare and Aftercare Consultant, CELCIS, University of Strathclyde, Kenny.mcghee@strath.ac.uk

Emerging adulthood and emerging identity

The contextual framing for 'emerging adulthood' draws upon the work of Arnett (2000), who proposed that 'emerging adulthood is ...a new conception of development for the period from the late teens through the twenties, with a focus on ages 18-25' (p. 469). His contention was that this was a distinct period in a young person's development, influenced by societal factors, and involving an extended period of identity exploration and consolidation. The notion that emerging adulthood is neither childhood and adolescence nor full adulthood is reflected in the often fluid and contradictory familial and societal expectations, which, along with bureaucratic and structural thresholds, can govern everyday life during this stage:

> Economic and social changes in the developed West, as well as the prolongation of educational requirements in many fields of work have resulted in a significant shift in the age at which young people enter adult roles. By now a significant percentage of young people remain at home and are financially dependent on parents until the end of their 20's (Mann-Feder, 2019, p. 13).

Arnett argues that for many young people, having left some of the constraints and dependencies of childhood but not yet been subjected to the full gamut of responsibilities that come with adult life, there are multiple opportunities to explore a range of possibilities, in terms of life and work experiences which inform their developing sense of identity.

As Mann-Feder contends, this suggests that identity consolidation is something that doesn't happen until the mid to late 20's: 'The theory of emerging adulthood asserts that identity consolidation is a relatively late accomplishment and that exploration and instability dominate individual development throughout the 20's. According to Arnett, this reflects social and economic changes and therefore is not universal' (2019, p. 13). These notions of emerging adulthood, or prolonged adolescence (Erikson, 1968), are mostly located within the context of industrialised societies, with Erikson commenting that the psychosocial

moratorium granted to young people in such societies has allowed young adults a freedom to explore different roles and identities in order to find their niche (as cited by Reifman et al., 2007)

Social and economic changes have generally extended the transition from adolescence to adulthood in 'western/global North' countries: 'This extended transition to adulthood, the gap in the life span that it has created, and the need for postsecondary educational credentials and individualized life trajectories are what have given rise to emerging adulthood' (Schwartz, 2016, p. 312). These social and economic changes, over the last few decades or so, have meant that we tend to enter the employment market, get married, and start living on our own, later than previous generations. In comparison to previous generations, for example, there have been a range of inter-connected social and economic factors creating significant changes in transitions to adulthood for the general population. These external factors include the increase in school leaving age; more young people continuing into tertiary education; accumulation of student debt; delayed entry into the labour market; minimum wage and zero hours contracts; and less access to affordable housing and accommodation.

Lerner cautions against the assumption of a new universal life stage, observing that 'to qualify as a developmental stage, emerging adulthood must be both universal and essential…' (as cited by Cote, 2014, p. 13), whilst others have noted that emerging adulthood is not culturally universal, and that although it may be 'a useful synonym for the prolonged transition to independent adulthood, it does not take into account the social and economic conditions that have produced extended transitions' (Schoon & Schulenberg, as cited by Cote, 2014, p. 179).

Arnett's theory does have its critics, most notably Cote, who rather dramatically describes it as 'the dangerous myth of emerging adulthood' (Cote, 2014), going on to identify the harm these assumptions can do to some young adults if policymakers are misinformed about what is causing the transition to adulthood to be prolonged. Cotes primary criticism suggests that Arnett regards emerging adulthood is a distinct psychosocial stage, and one which doesn't give enough credence to the broader social and economic context. He argues that this

assumption leads to an ever-increasing marginalisation of those who continue to pursue the more traditional routes to adult life through early entry to the labour market. Due to a lack of personal and family resources, not all young people will be able to take advantage of available opportunities, such as further and higher education opportunities, internships, and gap years for example (Cote, 2014).

However, more recently other writers have strongly countered this by contending that emerging adulthood is '…not just a sociological transition period but a biological life-history phase' (Hochberg & Konner, 2020). They note that the prolonged dependency and frequent confusion of emerging adults in modern societies is not solely attributable to the complexity of our societies, but also to the fact that they are, intrinsically and physiologically, not yet adults. A literature review (O'Rourke et al., 2020) commissioned by the Scottish Sentencing Council concluded that the adolescent brain continues to develop into adulthood and does not reach full maturity until approximately 25-30 years of age. Findings confirm that areas of the brain governing emotion develop sooner than those which assist with cognitive abilities and self-control. This imbalance explains the increased risk-taking and emotionally driven behaviour commonly attributed to young people. So, we pause to consider:

> Are young people generally staying at home longer because of the delay in achieving a consolidated 'adult' identity, with that being a distinct psychological stage?
>
> Or, are young people staying longer simply because the accumulative impact of social and economic factors mean that achieving a sense of adulthood and consolidated identity through traditional routes is simply much less attainable for many?

Regardless of the theoretical positioning and jousting that some academics may engage in, the current changes and trends mean that young people, more generally, are staying much longer in the family home across most developed countries. That is the trend. That is the reality.

This is where we begin to turn our attention directly to care experienced young people and care leavers. Scotland has progressive and enabling policy and legislation, with the ability to 'stay put' in Continuing Care arrangements being available to eligible young people up to the age of 21, and with the potential for ongoing Aftercare support up to age 26. (Scottish Government, 2013, 2014). However, despite this, the average age for young people leaving care in Scotland is still just over 17 years (CELCIS, 2015). This is in stark contrast to the average age for the general population leaving the family home in Scotland, which is around 26 years (A Way Home Coalition, 2019). This aligns with the average age of young people leaving the family home across other European countries, which is 26.4 years (Eurostat, 2021). Across the UK people are living with their parents for longer than they used to, with living with parents now being the most common living arrangement for young adults (ONS, 2017).

Many of our care experienced young people won't, and don't, have the opportunity to positively delay or prolong transitions to adulthood by 'staying put' or 'continuing care by remaining in an alternative care family home' - certainly not until their mid to late 20's:

> While transitions are not timed in a very precise way in the lives of many young people, timing may become notably 'out of synch' for care leavers, who may often have to attempt 'accelerated and compressed transitions to adulthood' sooner and faster than their peers not in care (Gilligan, as cited by Mann-Feder & Goyette, 2019, p. 54).

We need to bear this in mind when we talk glibly about 'poorer outcomes' and 'outcomes gaps' for care experienced young people. Too often they are judged against the societal norm when they '…probably had to traverse the most arduous developmental process (and) then move on to have their outcomes measured against some normative ideal with very little accommodation of difference' (Horrocks, 2002, p. 335). This talks to the often very different trajectories, and very real unfair and unrealistic expectations, and is an issue that also vexes practitioners, who can often see what are perceived as unfair expectations and comparisons, where our care systems often fail to take account of changing realties.

Adolescence generally is being drawn out as young people stay in school longer and have more difficulty in entering the job market and earning a stable income that would enable them to secure and sustain their own accommodation. Transition to adulthood can be a lengthy process marked by frequent reversals and contradictions that make young people both children and grown-ups at the same time. However, our systems, our policies, and our practice remains stuck, and at times unable to effectively comprehend and engage with young people in a way which appropriately recognises some of the complexities and contradictions of becoming an adult.

The complex and often-conflicting array of issues, influences, and expectations can also weigh heavily on the emotional timbre of the work, potentially affecting workers, and the engagements and relationships they are able to form with the young people in their care:

> … if that (young) person is hearing us harp on about how they should be doing more and maybe subconsciously we're pushing them out the door and we're telling them to 'be an adult, be an adult'… so maybe they're like that, 'oh, I've got to go' (McGhee, 2017, p. 11).

Arguably, this creates an uneven playing field for care leavers. Whilst the transition to adulthood for the general population has become prolonged, more complex, and personalised, our care systems have yet to meaningfully take these changes into account (Goyette, 2019). They remain aligned with overly simplistic chronological concepts and legislative triggers and thresholds, which continue to accelerate young people from care to instant - and in many cases damaging versions of – adulthood (Stein, 2012, 2019).

Care leavers are expected to make multiple, accelerated abrupt transitions when they are often least able to cope (Stein, 2012). Leaving care too early, without proper levels of support, and with all the pressures and responsibilities that come with 'instant adulthood' is traumatic and damaging. Leaving care later matters because leaving care too young is at odds with normative, cultural, and neurobiological development (Stein, as cited by SCLC, 2017)

We've highlighted that the goal of financial and residential independence for the general population has generally become a much longer-term outcome, generally with extended practical, financial, relational, and emotional support. We have mentioned a number of factors that may influence the age at which young people enter adult roles. Consider now the impact that trauma may have on that transition, where childhood is comprised of severe and sustained adversity, or persistent disruption and unsettlement (Common Weal, 2021).

Impact of unresolved childhood trauma

Young people transitioning from care to adulthood can be an inherently disenfranchised group, with early traumatic life experiences, often unresolved, impeding the negotiation of age-appropriate developmental milestones and the consolidation of a stable and healthy identity (Yancey, as cited by Mann-Feder & Goyette, 2019).

Any toxic stress experienced in those early years – addiction, sexual, physical, emotional abuse, neglect, domestic violence, unexpected death or injury to someone they are close to – could potentially affect and damage the basic structures of a developing brain (Perry, 2006). Many of our children and young people currently in care, transitioning from care, or care experienced, have experienced neglect and/or trauma prior to their transition into care, which can have long-term, or indeed, lifelong, consequences (Robinson & Brown, 2016). Even when it is for all the right reasons, for a child or young person entering the care system is in itself traumatic: 'It occurs in the context of failed relationships with significant others, and imposes an overwhelming loss on a child, no matter at what stage it occurs. It is amongst the greatest personal tragedies that any child can face' (Mann-Feder, 2007, p. 2).

With each move and change in living circumstances that follows that first point of entry, there is the potential for additional trauma. The independent review into Scotland's care system heard from young people 'that being taken into care and growing up in the "care system" was among the most traumatising experiences they had ever had… living with strangers and moving multiple times' (*The Promise*, 2020, p. 7). Every move affects that child or young person's

sense of felt security. Tarren-Sweeney (2010, 2017) describes this reverberating impact of impermanence and within-care adversity as having a detrimental impact on young people's mental health. The importance of consistency and predictability of care are critical to healthy development into adulthood. Bolinger et al. (2021) explore the importance of placement stability, not simply measured by length of time in placement, but in terms of the consistency of relationships with well supported adults during the time spent in an individual placement, describing this as a 'felt sense of stability' (Bolinger et al., 2021, p. 12).

The importance of developing a sense of 'felt security' for young people, provided through consistency of care, in an environment which is predictable and consistent, cannot be over-stated (Skinner, 1992). Skinner recognised that for most young people parental support carries on into their twenties, even where this may be intermittent. Young people in care also need this support, arguably even more so. Yet, this is too often denied to our looked after young people because of the way care is designed and delivered. As stressed in the Care Review, overcoming trauma requires a foundation of stable, nurturing, loving relationships (*The Promise*, 2020). As far back as 1992, Skinner argued that we needed to take a much longer-term view and see beyond the bureaucratic constructs of age-related triggers and thresholds, and overly simplistic chronological timescales.

Until recently, contrary to Skinner's aspirations, leaving care was seen as an event rather than a process, with young people expected to undertake living on their own after a 'crash course' in practical skills, being pushed out in a way that has little to do with 'readiness' to assume an adult lifestyle (Mann-Feder, 2019). Supporting successful transitions from care is not just about practical skills. The importance of emotional readiness, resilience, and ongoing relational support is fundamental (Scottish Government, 2013). Deep-rooted issues around unresolved childhood trauma can also impede young people's abilities to make use of available support and services (Burgess, 2007), not due to their explicit and implicit memories of said trauma (Robinson & Brown, 2016):

> Issues connected to loss, rejection, lack of a stable home base and breakdown of care placements, can affect the young person's ability to

> engage with peers and supportive adults. This can lead to social isolation and make participating in some interventions problematic (Burgess, 2007, p.44).

It begs the question as to why we remain tied to overly simplistic chronological triggers and thresholds when they are at odds with what we know about the impact of childhood trauma, about young people's development, and about notions of emerging adulthood.

Transitions to interdependence

The transition to adulthood can be a lengthy process, marked by frequent reversals and contradictions that make young people both children and grown-ups at the same time. For most it is not a linear journey, and as the pandemic has shown, the precariousness of many young adults' situations can warrant an unplanned return to the family home (Pinsker, 2020). Too often our policies talk about preparing looked after young people for 'independence and independent living'. However, most people rely on family, partners, parents, children, colleagues, friends, and neighbours for support. As Lee writes, '[a]dults can move in and out of dependency as they move through life' (2001, p. 23).

When considering the situation for young people transitioning from care, Moodley et al. (2018) contend that independent living is wholly antithetical to human nature, and we need to shift away from neoliberal ideals, that are entrenched in our own policies with expectations of independent living, to a more realistic notion of interdependent living.

We already recognise this in policy, here in Scotland, as the Staying Put Scotland Guidance states: 'The notion of independence is perhaps better expressed as "interdependence", more accurately reflecting the day-to-day reality of an extended range of healthy inter-personal relationships, social supports and networks' (Scottish Government, 2013, p. 5). This reflects international research and academic writing, highlighting the importance of relationships and interdependence, and recognising that the term 'independence' is inappropriate in the context of young people's transitions (Moodley et al., 2018).

Social support networks are noted as fulfilling an important function for young people on their journeys to adulthood (Wade, 2008), providing 'the emotional, psychological, physical, informational, instrumental, and material assistance provided by others to either maintain well-being or promote adaptation to difficult life events' (Dunst & Trivette, as cited by Sulimani-Aidan, 2018). A crucial point is that for many young people '…their interpretation of "independent" does not exclude receiving support; rather, it is the avoidance of dependence' (Moodley et al., 2018, p. 4).

If we accept that emerging adulthood is a time to explore possible identities, enabling young people to develop a consolidated sense of self, a secure identity which brings with it psychological and emotional resilience, then the importance of extended care, and ongoing relational support for our care experienced young people, cannot be over-stated. The African phrase Ubuntu - I am because we are – encapsulates that notion. Some authors use the term 'interdependence' or 'interconnectedness' as Western synonyms for Ubuntu. Or perhaps, closer to home, the Scottish phrase of 'we're a' Jock Tamsons bairns' - with its egalitarian sentiment and belief that all people are equal, with a shared feeling of fellowship, community, or interest - reflects similar notions of our intrinsic common bonds and shared connections. The development of resilience is incumbent upon having positive, interdependent relationships, thus enabling a range of positive social, emotional, and moral experiences, which emphasise 'social connections as the crucible of personhood' (van Breda, 2018, p. 8).

Scotland's 'Promise'

In 2021, Scotland is being challenged to think differently about how we care for our young people, and particularly those looked after in alternative care settings. The work of the Independent Care Review, culminating in *The Promise*, makes clear statements in relation to what is expected for our care experienced young people. It is clear that in its view parenting does not stop when young people reach the age of 18, and that Scotland must continue to create greater equity and opportunity for care experienced young adults (The Promise, 2020).

Actions must reflect 'the ongoing responsibility for the children for whom it has had parenting responsibility and whose family life has been disrupted by the decisions of the State' (The Promise, 2020, p. 118). In doing so, this must see young people who are currently in the care system staying in their care setting as they enter adulthood and when ready being fully and completely supported to move on (The Promise Scotland, 2021). The worthy intentions of *The Promise* in relation to young people transitioning from care to adulthood echo the already existing legislative and policy responsibilities and calls to action (Scottish Care Leavers Covenant, 2015), but this is not without its critics (McGhee & Waterhouse, 2019; Common Weal, 2021). A lack of detail in what needs to change and how, and an underestimation of the complexities involved, give rise to a more cautious appraisal of what *The Promise* may be able to deliver (Common Weal, 2021).

Our care system does not exist in a vacuum, and our ongoing responsibility must take into account the changing socio-economic and socio-demographic trends within which our care systems exist: 'Care is also political. It is impossible to separate the care we experience formally or informally from the context of the services and policies in which these take place' (Smith, 2021, p. 4). To realise the ambitions of *The Promise* our systems and processes must take account of, and incorporate, the concepts surrounding emerging adulthood. This must start by moving away from overly simplistic, bureaucratic, chronologically driven transitions and thresholds. Closing the 'outcomes gap' will only be achieved if we close the input gap – and that must include ensuring we set the care of our looked after young people in the context of emerging adulthood, thereby designing our care, services, and supports to meet care experienced young people's needs into adulthood.

Conclusion

Scotland has been at the forefront of some very informed and creative thinking around our duties, responsibilities, and obligations to our care experienced children and young people, going back many years, and now going forward with *The Promise*. However, we would contend that if Scotland wants to be truly

transformational in its practice and approach, consideration must also be given to an applied understanding of emerging adulthood as both a psychological and a sociological concept. This must transcend not only social work and care services but also the full range of 'corporate parents' (Scottish Government, 2015) who have responsibilities to our care experienced young people. However, our systems, our policies, our practice remains stuck and, at times, appears unable to effectively comprehend and engage with young people in a way which appropriately recognises some of the complexities and contradictions of becoming an adult. Adaptive changes in how we think must be enabled and supported by the required technical re-alignments which address the unhelpful legislative and bureaucratic constructs which continue to inflict 'instant adulthood' on our care experienced young people. This will require consistent coordinated activity across a range of inter-connected areas at different levels, and an increasing understanding and use of active implementation approaches (Blase, 2009; Burke et al., 2012).

Service structures, supports, and responses must be focused on the evolving psychological and social developmental needs of our care experienced young people, rather than bound by unhelpful fixed, social, and bureaucratic constructs. When we intervene in children's lives, in families' lives, dramatically, by placing children into alternative care for care and protection purposes, we need to consider the long-term impacts and consequences – and our long-term obligations and commitments. Quite simply we need to change the frame – and provide our care experienced young people with predictability, consistency and continuity of care and support into adulthood, acknowledging that attaining a healthy functioning interdependent sense of adulthood is generally a much longer journey than our current systems and processes are designed for.

That change must reflect the ongoing responsibility Scotland has for the children for whom it has had parenting responsibility and whose family life has been disrupted by the decisions of the State (*The Promise*, 2020, p. 118). As Smith (2021) contends, care is not an intervention, but a continuous series of relationships involving a moral and emotional investment from workers. How that manifests itself for our care experienced young people must see a

fundamental philosophical shift in how we conceptualise and discharge our responsibilities to them, to 'our' children, alongside practical changes to our systems and structures.

When we reflect on the oft trotted out corporate parenting mantra, 'would this be good enough for your child or young person?' we would argue that we can only fully realise this if we adopt an applied understanding of emerging adulthood in how we respond to, and deliver, the care that all of Scotland's young people deserve.

References

'A Way Home Scotland' Coalition. (2019). *Youth homeless prevention pathway: Improving care leavers' housing pathways* https://www.celcis.org/files/2715/7348/4299/Youth_Homelessness_Prevention_Pathway.pdf

Arnett, J. J. (2000). Emerging adulthood: A theory of development from the late teens through the twenties. *American Psychologist, 55* (5), 469-480. http://jeffreyarnett.com/ARNETT_Emerging_Adulthood_theory.pdf

Arnett, J. J. (2007). Afterword: Aging out of care—Toward realizing the possibilities of emerging adulthood. *New Directions for Youth Development, 113* https://onlinelibrary.wiley.com/doi/10.1002/yd.207

Blase, K. (2009) *Technical assistance to promote service and system change* https://files.eric.ed.gov/fulltext/ED577840.pdf

Bolinger, J., Mendes, P., and Flynn, C. (2021). Stability in residential care in NSW, Australia: The role of the workforce. *Scottish Journal of Residential Child Care 20*(2) (pp.1-13)

Burgess, C. (2007). *Staying afloat: Effective interventions with young people in South Ayrshire.* Stirling: Social Work Research Centre, University of Stirling.

Burke, K., Morris, K., and McGarrigle, L. (2012). *An introductory guide to implementation: Terms, concepts and frameworks.* Dublin: Centre for Effective Services. https://www.lenus.ie/bitstream/handle/10147/306846/Guide%20to%20implementationconceptsframeworks.pdf?sequence=1&isAllowed=y

CELCIS. (2015). *Housing options and care leavers: Improving outcomes into adulthood.* Glasgow: CELCIS https://www.celcis.org/application/files/7114/3938/6983/Inform-Housing_Options_and_Care_Leavers.pdf

Common Weal. (2021). *Empty promise? A critical analysis of the Scottish Government's strategy for children in care* (Common Weal Policy Paper) https://commonweal.scot/wp-content/uploads/2021/08/Empty-Promise.pdf

Côté, J. (2014). The dangerous myth of emerging adulthood: An evidence-based critique of a flawed developmental theory. *Applied Developmental Science, 18*(4), 177-188 https://www.researchgate.net/publication/268447076_The_Dangerous_Myth_of_Emerging_Adulthood_An_Evidence-Based_Critique_of_a_Flawed_Developmental_Theory

Eurostat Online. (2021). *Age of young people leaving their parental household* https://ec.europa.eu/eurostat/statistics-explained/index.php?title=Age_of_young_people_leaving_their_parental_household

Hochberg, Z., and Konner, M. (2020). *Emerging adulthood, a pre-adult life-history stage.* Front. Endocrinol. 10:918. doi: 10.3389/fendo.2019.00918 https://www.frontiersin.org/articles/10.3389/fendo.2019.00918/full

Independent Care Review. (2020). *The Promise* https://www.carereview.scot/wp-content/uploads/2020/03/The-Promise_v7.pdf

Mann-Feder, V. (2007) Youth aging out of care: An overview. *New directions for youth development, 113*, (pp.1-7) https://onlinelibrary.wiley.com/doi/epdf/10.1002/yd.197

Mann-Feder, V., & Goyette, M. (Eds.) (2019). *Leaving care and the transition to adulthood*. New York: OU Press.

McGhee, J., & Waterhouse, L. (2020). *#KeepThePromise – or childcare without parents* https://sceptical.scot/2020/10/keepthepromise-or-childcare-without-parents/

McGhee, K. (2017). Staying put and continuing care: The implementation challenge. *SJRCC*, 16(2) (pp.1-19) https://www.celcis.org/files/4215/0641/7391/2017_Vol_16_2_McGhee_K_Staying_Put_and_Continuing_Care_The_Implementation_Challenge.pdf

McGhee, K., Lerpiniere, J., Welch, V., Graham, P., & Harkin, B. (2014). *Throughcare and aftercare services in Scotland's local authorities: A national study.* CELCIS Research Report RR2014:4 http://www.celcis.org/media/resources/publications/Throughcare-and-aftercare-in-scotlands-local-authorities.pdf

Mendes, P., & Moslehuddin, B. (2006). *From dependence to interdependence* https://onlinelibrary.wiley.com/doi/pdf/10.1002/car.932

Moodley, R., Raniga, T., & Sewpaul, V. (2020). Youth transitioning out of residential care in South Africa: Toward ubuntu and interdependent living.

Emerging Adulthood, 8(1), 45-53. doi:10.1177/2167696818812603 https://www.researchgate.net/publication/329807095_Youth_Transitioning_Out_of_Residential_Care_in_South_Africa_Toward_Ubuntu_and_Interdependent_Living

National Trauma Training Programme https://www.nes.scot.nhs.uk/our-work/trauma-national-trauma-training-programme/

Office of National Statistics. (2017). *Milestones: Journeying into adulthood* https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationestimates/articles/milestonesjourneyingintoadulthood/2019-02-18

O'Rourke, S., Whalley, H., Janes, S., MacSweeney, N., Skrenes, A., Crowson, S., MacLean, L., & Schwannauer, M. (2020). *The development of cognitive and emotional maturity in adolescents and its relevance in judicial contexts* https://www.scottishsentencingcouncil.org.uk/media/2044/20200219-ssc-cognitive-maturity-literature-review.pdf

Perry, B. D. (2006). Applying principles of neurodevelopment to clinical work with maltreated and traumatized children: The neurosequential model of therapeutics. In N. B. Webb (Ed.), *Working with traumatized youth in child welfare* (pp. 27–52). New York: The Guilford Press.

Pinsker, J. (2020). *The new boomerang kids could change American views of living at home* https://www.theatlantic.com/family/archive/2020/07/pandemic-young-adults-living-with-parents/613723/?utm_source=newsletter&utm_medium=email&utm_campaign=atlantic-daily-newsletter&utm_content=20200720&silverid-ref=NjY5MzkyMzMxNTE3S0

Reifman, A., Arnett, J., & Colwell, M. (2007). *Emerging adulthood: Theory, assessment and application* https://jyd.pitt.edu/ojs/jyd/article/viewFile/359/345

Robinson, C., & Brown, A. M. (2016). Considering sensory processing issues in trauma affected children: The physical environment in children's residential homes. *Scottish Journal of Residential Child Care 15*(1) (pp. 6-18) https://www.celcis.org/application/files/8316/2308/6835/002._2016_Vol_15_1_Robinson_Considering_Sensory_Processing.pdf

Schwartz, S. (2016) *Turning point for a turning point: Advancing emerging adulthood theory and research* https://journals.sagepub.com/doi/abs/10.1177/2167696815624640

Scotland's Commissioner for Children and Young People. (2008). *Sweet 16: The age of leaving care in Scotland.* Edinburgh: SCYPP. http://www.sccyp.org.uk/uploaded_docs/leaving%20care%20young%20persons%20for%20web%20200803.pdf

Scottish Care Leavers Covenant. (2017). *Walking the walk: Two years on*, 1st Annual Conference Report

https://static1.squarespace.com/static/55c07acee4b096e07eeda6e8/t/5a831daf71c10b977a192bd5/1518542259579/SCLC+Conference+2017+report+FINAL.pdf

Scottish Government. (2013). *Staying put Scotland: Providing care leavers with connectedness and belonging*. Scottish Government Guidance http://www.scotland.gov.uk/Resource/0043/00435935.pdf

Scottish Government. (2014). *Children and Young People (Scotland) Act 2014* https://www.legislation.gov.uk/asp/2014/8/contents/enacted

Skinner, A. (1992). *Another kind of home*. Edinburgh: HMSO.

Smith, M. (2021). *What is Care?* (Common Weal Policy Paper) https://commonweal.scot/wp-content/uploads/2021/10/What-is-care.pdf

Stein, M. (2005). *Resilience and young people leaving care: Overcoming the odds*, Research Report. York: Joseph Rowntree Foundation. http://eprints.whiterose.ac.uk/73176/1/Document.pdf

Stein, M. (2012). *Young people leaving care*. London: Jessica Kingsley.

Stein, M. (2019). Supporting young people from care to adulthood: International practice. *Child & Family Social Work 24*, 400–405. https://onlinelibrary.wiley.com/doi/abs/10.1111/cfs.12473

Sulimani-Aidan, Y. (2018). Qualitative exploration of supporting figures in the lives of emerging adults who left care compared with their non care-leaving peers. *Child & Family Social Work*, Vol.24, Issue 2, (pp 247-255) https://doi.org/10.1111/cfs.12609

Tarren-Sweeney, M. (2010). It's time to re-think mental health services for children in care, and those adopted from care. *Clinical Child Psychology and Psychiatry, 15*(4), 613–626.

Tarren-Sweeney, M. (2010). Mental health services for our most vulnerable children. *Clinical Child Psychology and Psychiatry*, *22*(4), 521–523.

The Promise Scotland. (2021). *The Promise Plan 21-24* https://thepromise.scot/plan-21-24-pdf-standard.pdf

van Breda, A. D. (2018). A critical review of resilience theory and its relevance for social work. *Social Work/Maatskaplike Werk, 54*, 1–18. doi:10.15270/54-1-611 file:///C:/Users/gxb12175/Downloads/611-1779-2-PB.pdf

About the authors

Kenny McGhee is the Throughcare and Aftercare Lead based at CELCIS at the University of Strathclyde. Kenny works with local authorities, care providers and other stakeholders at local and national level to close the gap between policy and practice for young people transitioning from state care to adulthood and interdependence. Prior to joining CELCIS in 2012, Kenny worked for many years in local authority settings as a practitioner, trainer and manager of specialist services for young people.

Sarah Deeley is a Consultant with the Improving Care Experiences Hub, based at CELCIS at the University of Strathclyde. Sarah works with local authorities, care providers and other stakeholders at local and national level to support the implementation of complex change programmes and improve the experience of care experienced children, young people and those who care for them. Sarah is a qualified Social Worker with practitioner and management experience across local authority and Residential Child Care settings.