

# **Recognising Gender Specifics when Supporting Young People Leaving Care**

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# Why talk about gender in leaving care context?

1. Developmental aspects of leaving care
2. Gendered difficulties and problems faced by care leavers
3. Need for understanding vulnerability and risk behaviours as gendered
4. Lack of focus on gender in care and aftercare contexts in the region

# 1. Developmental aspects of leaving care

- Typically, happens in (late) adolescence and continues to emerging adulthood
- What is special about this developmental stage?
  - New social roles
  - Intensive identity development
  - Intimate/ romantic/ sexual relationships
  - Choice of career/ life path

- How are these developmental transitions gendered?
  - New gender roles: from girls/ boys to women/ men
  - Gender identity development: which kind of gender, how salient part of identity?
  - Intimate and sexual relationships: gendered meanings and risks
  - Career choice: gendered achievement/ autonomy aspirations
- Specific issues in leaving care
  - What gender role models are available to and projected on children in care?
  - Early unfavourable conditions/ violent events: role in identity development, intimate relationships
  - Accelerated transition to unsupported living

## 2. Gendered difficulties and problems

Little research data with gender comparisons

Griffith et.al. (2009) review and research:

Entering care:

- girls present more risk factors than boys: more frequent multiple family problems, out-of-home placements, eating disorders, and experience with physical/ sexual abuse

While in care:

- girls perceived as harder to work with, higher internalizing and externalizing behaviours

At the time of leaving care:

- higher academic achievement for girls
- more school problem behaviours for boys
- better program success for girls

## 2. Gendered difficulties and problems

After care:

- Early pregnancy, teenage parenthood (Vinnerljung, 2007)  
50 % of women in 18-24 months after leaving. Contributing - sexual abuse, lack of sex education, loneliness and isolation (Mendes, Moslehuddin, 2006)
- Disproportionate number end up in prostitution (Mendes, Moslehuddin, 2006)
- Women with foster care experiences overrepresented among human trafficking victims (Lithuanian Caritas, IOM Vilnius)
- Gender aspects of issues like poverty, education and employment deficits, homelessness, crime

# 3. Vulnerability and risk behaviours as gendered

- Structural factors as gendered
  - economic, career and achievement, social policies
- Cultural factors: masculinity and femininity concepts as risk-related
  - e.g. Reddy (2007) found that the dominant discourse of femininity through which young women made sense of their gender identities stood in direct contradiction to their health/sexual safety
  - e. g. Hird and Jackson (2001) hyper-heterosexuality perceived as proof of masculinity among teenage boys
- Interrelatedness of risks:
  - e.g., early mothering and poverty as risk for trafficking and prostitution

# 4. Attention to gender in care and leaving care

WGCC mapping results (2008):

- Only a few gender-specific and gender-sensitive projects identified in 11 countries
- Gender-specific targeted
  - girls and young women, particularly, young mothers and potential victims of trafficking
- Gender-sensitive aimed
  - to protect individuals from unhealthy group pressure or negative biases about gender,
  - encouraged girls and boys to try activities generally considered non-traditional for their sex
  - taught sex education from gender-sensitive perspective
  - evaluated personnell with regard to their gender sensitivity with an aim to provide training based on needs

# Reflections and ideas

- How important gender issues are in care and care leaving?
- How can gender sensitive support be provided in different contexts?