

From Institutional Care to Real Life: Uncertainties, Problems, And Social Policy

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Abstract

This study examines the social, economic and psychological challenges faced by young people raised in institutional care when they transition to independent living. It also explores how these challenges relate to current social policy practices. Those raised under state protection often transition into adulthood earlier and under more uncertain conditions than their peers. This paper was prepared based on a literature review of the problems experienced by individuals who have left institutional care and transitioned to independent living. The research discusses the difficulties experienced during the period after leaving care within the framework of theoretical approaches in the literature, focusing on neoliberal social policies, stigmatisation, a lack of family capital, social exclusion and inadequate institutional support. Drawing on previous studies of the

experiences of these individuals after leaving care, the study outlines the general problems they encounter. Young people leaving institutional care encounter multidimensional challenges, including stigmatisation, a lack of family support and social exclusion. Goffman's theory of stigma and Bourdieu's concept of capital are employed to elucidate their social disadvantages. Neoliberal policies reduce the state's social responsibilities, leaving individuals to fend for themselves, a gap that NGOs only partially fill. However, the lack of structural support negatively affects these young people's access to education, employment and their overall quality of life. Therefore, long-term, rights-based social policy interventions are needed.

Key words: Institutional care, social policy, stigmatization, social exclusion, family capital, neoliberalism.

Introduction

Children taken into institutional care have a disadvantaged start in social life due to the neglect, abuse, and deprivation they experience in their early years. These children, whose families are unable to care for them, become part of the protection systems provided by the state. However, the services provided by these systems are limited to meeting physical needs and are inadequate in terms of psychosocial support. Especially the transition period after turning 18 and leaving institutional care is filled with uncertainty and various risks for these young people. The main problems faced by individuals leaving institutional care include unemployment, housing problems, social exclusion, stigmatization, and inadequate social support. In this study, the problems experienced during the process of leaving institutional care are evaluated within the framework of current social policy practices and in conjunction with the concepts of labeling and family capital. The study will first discuss the development of institutional care as a social policy application, then briefly touch on the history of social policy applications in Turkey by referring to the relevant literature on social policy. An important aspect of the issue of institutional care is stigmatization, as various studies indicate that individuals who have grown up in institutional care are exposed to this situation in various ways at some point in their lives. This issue is addressed within the

framework of Erving Goffman's labeling theory. Another important aspect of the issue is family capital, as individuals raised in institutional care enter adulthood separated from their families and are thus deprived of this capital, which is an important factor affecting the transition to independent life.

The history of the family is as old as the history of humanity. Especially in traditional communities centered on reproduction, family ties were about having children, living together, or continuing their existence within a community. With modernization, the family, which is the most important refuge in the lives of individuals, has become one of the problematic areas in the process of social change, along with the phenomena of marriage and divorce. Today, the concepts of family and child-rearing are undergoing major changes. In particular, we are in a position to re-examine child-rearing within the family. Since the beginning of modernity, the concept of the nuclear family has been supported, and the structure of the family has been constructed around child-rearing. The most sensitive issue in the reproductive function of the family is ensuring that children open up to the outside world and socialize. The family, which facilitates the adaptation of the new generation to the social environment and their interaction with groups that share similar characteristics, is the carrier of the existing order in society. Values such as equality, freedom, justice, merit, courtesy, respect, honesty, love, tolerance, justice, brotherhood, cooperation, truthfulness, diligence, hospitality, compassion, and conscience are high values that must be passed on to new generations, and the family ensures their transmission along with the modern education system (Oktik, 2022: 220-225).

Social cohesion is necessary to maintain order: therefore, control is necessary and essential to maintain cohesion. "Control is possible through the socialization process of the individual, by teaching the individual the rules of society and making it clear what is socially acceptable and what is not, starting in the family and expanding in concentric circles" (Oktik, 2003: 4, cited in Oktik 2023: 220-225).

Institutional Care

When families were unable to fulfill their responsibility of raising children for various reasons, charitable and religious institutions historically took on the task of caring for orphaned children. In particular, in 1601 in England, the Queen Elizabeth Poor Law included an important provision for providing education to children in need of care in order to secure them employment. In 1741, the first children's care home was established. For the first five years, children were sent to the countryside, and later, girls were given domestic help training and boys were given apprenticeship training. In the 19th century in America, the institutionalization of orphanages began in the Ottoman Empire through foundations and religious institutions, following a tradition inherited from the Mongols and Gazzelis, and later, in 1914, an orphanage called Darüleytam was established with state support (Gökçearsan, 2009:60).

However, although the care of children and young people with state support has historically been seen in traditional communities, the first social service institution in our country was the Türkiye Himaye-i Etfal Cemiyeti, established in 1917. This institution was established to protect the children of homeless and poor families. In 1935, this institution was renamed the “Türkiye Çocuk Esirgeme Kurumu” (Turkish Child Protection Agency). In 1963, the Turkish Child Protection Agency was merged with the General Directorate of Social Services. In order to “conduct studies to protect and strengthen the integrity of the family and increase social welfare,” the Family Research Agency was established in 1989 and transformed into the General Directorate of Family and Social Research in 2004. In 2011, social service units were merged under the Ministry of Family and Social Services (Ministry of Family and Social Services, 2022). The practice of taking children into care and protection when their parents are unable to provide for them stands out among social policy practices (Tapan, 2022). Services for children taken into care include institutional care (such as children's homes, foster homes, and children's houses), adoption, and foster family programs. Services for children, which vary according to social policy applications, were carried out under the “barracks-type” care model in Turkey, but since 2008, they have continued under the home-type care models called Love Homes and Children's Homes and the foster care model.

Statistics published in 2023 indicate that a total of 14,435 children benefited from these services in children's homes, children's shelters, and child support centers. In Turkey, young people without any disabilities and who are not continuing their education leave institutional care after turning 18. Those who leave institutional care are employed in public institutions and can receive economic support equivalent to one-third of the minimum wage after leaving (General Directorate of Child Services, 2021). According to the workshop report organized by the Hayat Sende Youth Academy Association, which provides services to individuals who have left institutional care as adults, approximately 700 young people leave institutional care each year (Hayat Sende Youth Academy Association, 2020).

Separation from the Institution and Problems Encountered

Research indicates that young people who have been separated from their families due to institutional care have lower educational attainment, are less likely to continue their education after the age of 16, are at higher risk of becoming parents at an early age, experiencing homelessness and higher unemployment, and experiencing behavioral and mental health issues compared to young people who have been raised in a family environment (Stein & Dixon, 2005:9). Young people who have been separated from institutional care experience the transition to independent living much more quickly than those who have been raised in a family environment and take on responsibilities at an early age (Stein and Wade, 2000). On the other hand, it is noted that they have more unstable career models and higher levels of dependence on social benefits (Stein, Pinkerton, and Kelleher, 2010:243).

Young people who leave institutional care face many risks, including lack of continuity in education, early parenthood, homelessness, unemployment, and psychological problems. William Bridges' three-stage transition theory suggests that this process occurs in three stages: preparation, uncertainty, and new beginnings (as cited in Dima, 2011). Mike Stein divides young people who leave institutions into three groups: those who continue on their path, those who survive, and those who struggle, drawing attention to the decisive role of support mechanisms in this process. The lack of formal and informal social support networks makes it difficult for young people to acquire independent living

skills. Emotional effects such as social exclusion, loneliness, and low self-esteem directly affect young people's long-term quality of life (Stein M., 2008:41).

Factors Affecting the Process of Leaving an Institution

Research (Stein et al., 2010) shows that factors such as participation in higher education, vocational training, employment, access to housing, social networks, and personal resilience significantly affect the lives of young people who leave institutions. Comparative studies conducted in countries such as England, Ireland, Kenya, South Africa, and Scotland have highlighted that the inadequacy of post-care services and the lack of government policies exacerbate the vulnerability of young people. It is argued that educational success depends on the availability of stable placements and supportive environments. However, the majority of young people remaining in institutional care cannot access these supports, which leaves them at risk of lifelong social exclusion (Mendes et al., 2014:7).

Studies conducted on individuals who have left institutional care in Turkey have highlighted issues such as housing problems, economic difficulties, stigmatization, and challenges in adapting to social life (Boduroğlu, 2017:148), insufficient preparation for the period following separation from the institution and the lack of necessary follow-up by the Ministry of Family and Social Services after separation (Candan, 2015:64), as well as the presence of “insecure attachment patterns” in individuals with a history of institutional experience (Yüksel and Öncü, 2016:73).

Social Policy

Social policy is a field that regulates the relationship between the concepts of state, society, and citizenship, aiming to secure the basic needs of individuals. It primarily focuses on issues such as poverty, social exclusion, education, health, old age, and unemployment (Buğra and Keyder, 2015, p. 9). With the development of capitalism, the emergence of social policy has also accelerated; the uncertainty and insecurity experienced in societies dominated by market relations have increased the need for intervention in this area (Buğra and Keyder, 2015:10).

The birth of the welfare state became apparent, especially after World War II, with the institutionalization of social security systems. According to Esping-Andersen, the welfare state is a structure in which not only the state but also the family and the market play an active role. Turkey's social policy model is similar to that of Southern European countries: a fragmented, unequal social security system and a strong emphasis on the family (Grütjen, 2008:118).

The field of social policy in Turkey can be examined in three periods. Early Republican Period: The fight against poverty was carried out through voluntary associations, with charitable organizations such as the Red Crescent and Himaye-i Etfal coming to the fore. During this period, there was an informal agreement between the state and society (Buğra, 2007:38). Multi-Party Period (1950–1980): Although economic developments were limited, social security systems were gradually established, and the state's role in combating poverty expanded (Buğra, 2007:44). Post-1980 Neoliberal Period: After the 1980 coup, a regulatory state approach was adopted (Buğra, 2007:45), and neoliberal policies became institutionalized in the 2000s. During this process, social policy shifted from a rights-based structure to a conditional assistance approach, along with the commercialization of health and security services (Coşar and Yeğenoğlu, 2009).

Neoliberal Social Policy

Neoliberalism encompasses an ideology that combines the characteristics of nineteenth-century liberalism and conservatism. While emphasizing the role of the individual in consumer societies, it brings the power of the family and community back into focus in situations where there is no welfare state. (Kaya A., 2015:48).

Michel Foucault defined the “art of governance” as a modern understanding of governance that includes legal or non-legal, pedagogical, cultural, religious, nationalist, and social discourses, but it can be considered a definition that is more relevant to the present day. Neoliberal governance follows a two-pronged strategy to change the state of “dependence on the state” that has developed with the welfare state. First, through action technologies, it directs individuals toward a state of freedom to make their own decisions

and manage their own risks. Second, through community technologies, it seeks to have communities or families, rather than the state, fulfill the protective function of the state by encouraging people to join a community or family-like structure (Akt., Kaya, 2015).

Many researchers, such as Foucault (Rose, Larnier), note that in the West, the welfare state was replaced by the post-social state between the 1950s and 1970s (Akt., Kaya, 2015). During this period, referred to as the post-social state, religious or ethnic-cultural communities became important for the state. While individuals are expected to manage themselves under free market conditions, the social welfare state fails to fulfill its function of ensuring and guaranteeing the welfare of the population, instead placing this responsibility on the individual. This post-welfare state process, in which the individual is expected to take care of themselves, is referred to as the transition from welfare to prudentialism. Additionally, in the new art of governance, the vacuum created by the welfare state's loss of its former function is expected to be filled by extended families and various communities (Rose, 1996).

Prudentialism, which emerged after welfare, is approached as a management technology in which individuals are responsible for the problems and risks that constitute the subject of social policy (Kaya A., 2015:48).

The existence of various communities in the civil society sphere is of great importance for neoliberal ideology. With the welfare state losing its function, extended families and communities of all kinds are encouraged to fill the void in this area. Welfare policies are no longer implemented through nation states; instead, they are being restructured, and this restructuring is directed toward communities rather than society (Rose, 1996:331).

Social policies and their components cannot be considered as separate or independent phenomena from the capitalist accumulation regime. The Justice and Development Party, which came to power in 2002, adopted a neoliberal accumulation regime, which significantly shaped its understanding of social policy and, consequently, the forms of social assistance. However, it is also necessary to emphasize the specificities created by spatial and temporal differences (Metin, 2011:180). According to Buğra and Candaş, in the early days of the new administration, while the necessity of systematic efforts to

reduce poverty and redistribution channels were accepted in Turkey's social policy, the steps taken in this area were shaped by Turkey's relations with the EU (Buğra and Candaş, 2011:52).

The social policy practices implemented by the government exhibit both continuity and change compared to previous practices. The emphasis on special assistance and initiatives in reducing poverty is an indication of continuity. There are similarities between the discourse on poverty reduction during the single-party period and contemporary discourse (Buğra, 2007:46).

In the social policy literature (Buğra, 2007; Buğra and Candaş, 2011; Buğra and Keyder, 2006), it is stated that since the 1980s, many European countries have entered a process of transformation of the welfare state, and voluntary organizations have become important service providers in this area. Recent studies (Göçmen, 2013:497) also mention the changing role of private and voluntary communities in the field of social policy. Although this transformation varies according to the cultural context of each country, it is seen to be related to macro processes. In countries like Turkey, where welfare services are not well established, rising poverty and increasing demand for welfare services as a result of neoliberal reforms have opened up a new field for NGOs. In this policy environment, they have taken on a position of assisting or acting as an alternative to the state in welfare services (Tekten, 24). Of course, this situation is also reflected in services for children under protection. These services are administered by the General Directorate of Child Services. A study examined expenditures related to children under state protection between 2014 and 2022 and noted that “while expenditures appear to be increasing in nominal terms, when adjusted for inflation, the actual amount of expenditures is declining.” (Delikaya, 2024:601). When institutional data based on the annual activity reports of the Ministry of Family and Social Services are examined, it is seen that the number of children under protection and care is on the rise: while the number of children under protection was 12,681 in 2013, this number reached 14,435 in 2023 (TÜİK, 2023). This situation shows that while the number of children under protection is increasing, expenditures in this area are decreasing.

Institutional Care and Labeling,

In addition to economic problems such as housing and unemployment experienced during the transition to independent living, children and young people raised in institutions also experience problems such as exclusion by their peers and their families, and stigmatization by society. Furthermore, these children, who grow up separated from their families, are labeled as “uneducated” and “problematic” and are subjected to discrimination by society (Turgut and Özkan, 2019:749).

Although there is no clear definition of stigma in the literature, Erving Goffman's study titled "Stigma: The Management of Stigmatized Identity," stigmatization is a process in which a person we encounter is reduced in our minds from a healthy and ordinary person to a tainted, disabled, and disregarded individual when there is a particular mismatch between the assumed identity and the actual social identity. Therefore, when the derogatory effect of the adjective used is very comprehensive, it becomes a stigma. The stigmatized person thus has a damaged personality (Goffman, 2014:31).

Conceptualizing stigma is difficult because it represents a worldview, the entirety of personal and social structures, and a series of social relationships—in essence, a type of social reality. Stigmatization reflects a characteristic, a process of social categorization, and an emotional state (Coleman L. M., 2006:141).

Goffman addresses the concept of stigma through three different types. The first involves various physical deformities of the body; the second includes individual character defects perceived as weak willpower, unnatural desires requiring suppression, deviant and rigid beliefs, and immorality; mental illness, imprisonment, addiction, alcoholism, homosexuality, unemployment, suicide attempts, and radical political behavior; finally, there are ethnological stigmas such as race, nationality, and religion, which are transmitted through bloodlines and can affect all members of a family equally (Goffman, 2014:33). Stigma emerges when an individual exhibits unexpected differences during social interactions. While those who conform to expectations are labeled “normal,” the stigma attached to an individual constructs an ideology through various discourses that discriminate against those who are “normal” (Goffman, 2014:34). According to Goffman,

stigma emerges when individuals in certain categories are not only expected to support certain norms but also when all parties are expected to behave in accordance with those norms. Therefore, the labeled individual tends to believe in the things that are believed about identity within the category they belong to (Goffman, 2014:36). While the stigmatized individual believes that they deserve respect and consideration like everyone else, when they see that this expectation is not met, it leads them to believe that some of their own qualities are responsible for this (Goffman, 2014:38).

Stigmatization is a concept that describes a relationship, and this relationship is very important in understanding the stigmatization process. Stigmatization allows some people to feel superior to others. However, for one person to feel superior, the other person must be perceived as inferior or feel that way themselves. Many stigmatized people see themselves as inferior because they accept that others are superior due to their differences. For this process to occur, one person must stigmatize another, and the stigmatized person must feel the effects of stigmatization and agree that this difference is undesirable due to its nature. Even among stigmatized individuals, relative comparisons are made, and the existence of people in worse situations than themselves comforts them. The dilemma of difference affects both stigmatized and non-stigmatized individuals (Coleman L. M., 2006:143). There are studies that expand on Goffman's theory of stigmatization. Stigmatized and labeled individuals have also suffered status loss and discrimination. The labeled, discriminated person rationally becomes devalued, rejected, and marginalized. This leads to the labeled person's loss of status and exposure to discrimination (Phelan and Link, 2001:368). Stigma, labeling, discrimination, loss of status, and discrimination emerge in power situations that allow them to coexist (Phelan and Link, 2001:377). In their study, Phelan and Link consider the role of existing power relations in the emergence of stigma.

Although studies on the labeling experienced by individuals who have been in institutional care for part of their lives are quite limited, a study conducted in Turkey has indicated that the first stigmatization experienced by individuals in institutional care is related to their biological families and stems from feelings of abandonment. Additionally, it has been stated that granting the right to work in the public sector to individuals who

have been in institutional care leads to these individuals being exposed to prejudice in their professional lives (Kılıç and Uğur, 2022: 235).

Family Capital

Young people who have been in institutional care transition to social life without access to the various forms of capital provided by their families. According to Bourdieu, capital manifests itself in three ways: economic capital (capital that can be directly converted into money), cultural capital (which can be converted into economic capital under certain conditions and institutionalized in the form of educational qualifications), and social capital (which can be converted into economic capital under certain conditions and institutionalized in the form of social connections) (Bourdieu, 1985:15). The concept of cultural capital emphasizes the relationship between the inequality in academic achievement among children from different social classes and the unequal distribution of cultural capital across different classes. Academic success or failure is not only related to economic investment in education but also to cultural investment (Bourdieu, 1985:17).

Discussions on social capital provide an important insight into explaining this situation. Social capital refers to the resources embedded in an individual's social network, which shape personal identity, influence decisions and outcomes, and determine opportunities and obstacles in one's social world. Similarly, family capital provides resources that will affect the current and future status of its members (Belcher et al., 2011:69). Social capital defined by its function. It includes different types of assets, and all of them have two common elements: they all have a type of social structure, and this structure enables individuals or institutional actors to perform certain actions. Like other types of capital, it has a productive structure and enables the achievement of certain goals that would not be possible in its absence (Coleman J. S., 1988,:98). Unlike other types of capital, social capital is embedded in the structure of relationships between actors and the connections between them. These connections can be seen at the micro level in terms of interpersonal relationships and at the macro level in terms of social networks and institutional contexts. Knowledge, norms, and support constitute the three fundamental sources for increasing an individual's effectiveness (Coleman, 1988).

Family life plays a fundamental role in the formation of social capital, and it is stated that the family has a role in creating social capital both within the family and beyond. In order to understand the role of the family in creating social capital, reference is made to some of its structural characteristics: financial capital, human capital, and social capital. These three characteristics are very important for the child's development and well-being (Belcher et al., 2011:70). Family capital can be defined as the totality of the family's resources or capital, which are used to increase gains and improve class success through investments and efforts. The concept of family capital suggests that various types of capital that shape life chances are not only individual-specific but also developed through relationships within families and between parents and children (Swartz, 2008:15).

Family capital does not only refer to the total social class transmitted within families. It also includes family solidarity, which is said to be important for the well-being and success of young adults. Although the concept of family capital is quite broad, it directly affects the life conditions of children and their reflections in adulthood. It also affects academic achievement. During the course of education, the exchange of information between children and parents about education and future opportunities can establish and reinforce expected behavior and success norms, provide support in experiencing both success and failure, and these factors support academic achievement (Crosnoe, 2004:268).

Poverty and structural disadvantages prevent families from exercising effective social control. Therefore, examining the family alone is insufficient for analysis. Although family capital does not refer solely to economic capital, it is important in terms of exercising social control in the family's relationship with the child. In a study on poverty and the family's capacity for social control, it is stated that as poverty increases, the family's social control decreases, which in turn increases the tendency of children to commit crimes (Sampson and John, 1994:538).

Therefore, it can be said that the lack of family capital contributes to children in institutional care being at a disadvantage compared to children raised in families.

Conclusion

Individuals who experience social and cultural problems, primarily economic problems. The biggest problem they face in their social lives is the problem of labeling. Generally labeled by society with epithets such as “institutional child” and “orphan,” these individuals face problems such as exclusion in their social relationships and discrimination in their job search processes. As Goffman points out, stigmatization arises from the discrepancy between the person's assumed identity and social expectations. Individuals raised in institutional care are labeled as “uneducated,” “troubled,” or “prone to crime” in social encounters, and this negatively affects their social integration and self-esteem.

Furthermore, while providing care, the family also provides a structure for the transfer of various types of capital. Bourdieu's concept of capital is crucial in explaining the disadvantage created by the deprivation of familial capital among individuals raised in institutional care. Familial capital includes the following elements: the individual's network of relationships, cultural codes, guidance capacity, and emotional support. Individuals raised in institutional care are deprived of family capital and therefore cannot acquire the various types of capital that their peers possess.

Another important aspect of the issue is social policy. The understanding of social policy influences institutional care. In this context, the transformation in social policies and neoliberalism, particularly since the 1980s, have been examined. Within the framework of Foucault's concept of governmentality, the transition to policies that encourage individuals to take responsibility for their own risks has been examined. The welfare function of the state has been reduced through reforms, with the aim of establishing a family-based social policy approach.

With the state's reduction in welfare services, new actors have emerged in the welfare field. Especially after 1980, NGOs and ITOs have become alternatives to the state in providing welfare. They provide various services in areas such as poverty, education, and health.

As mentioned above, individuals who leave institutions face problems such as inability to continue higher education, early marriage and childbearing, housing issues, unemployment, and stigmatization. The lack of adequate post-care support makes it difficult for these individuals to transition to independent living. In addition to economic problems, exclusion, loneliness, and low self-esteem negatively affect their quality of life.

When all these factors are considered together, social policies should be rights-based, provide lifelong support, and be comprehensive in nature.

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