



# Family Formation and Transition to Parenthood Trajectories along Generations: The Role of Living in the Residential Care in Portugal

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# Abstract

Title: Family Formation and Transition to Parenthood Trajectories along Generations: The Role of Living in the Residential Care in Portugal.

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Key words: life course, leaving care, transition to parenthood, family formation, adulthood

This study explored the role of living in residential care in family formation and transition to parenthood patterns in Portugal. It also evaluated the process of youngsters in care preparation for independent life. The life course tradition was chosen as the main framework with a focus on social ecology and demographical behavior determinants that were generated in this interdisciplinary study to explain trajectories of the Portuguese with and without the experience of living in the residential care homes. For tracing the trajectories of the Portuguese without living in care background, the quantitative data of European Social Survey-Round 3 and the methods of cluster analysis and descriptive statistics were applied. For tracing the trajectories of the Portuguese with living in care background and revealing the factors of their better life outcomes, participants were selected based on purposeful sampling and snow ball methods; their narratives were analyzed using lifeline analysis and thematic content analysis methods. For examining the process of preparation for independence, group interviews with 3 pairs of educators from Autonomization Apartments project were organized and collected data were analyzed using the SWOT technique. The trajectories of male informants look more “normal” in the context of trajectories of general population represented in ESS-Round 3 than the trajectories of female care leavers. Timing and sequence of transition to adulthood events of the informants from the young cohort do not seem aberrant. The three factors of care leaver’s better life outcomes were revealed: low traumatization, extended support network, and valued education. For older and young cohorts, the role of residential care was different because of multilevel changes in the country. Care leavers from older cohorts were empowered by means of education. Moreover, male Casa Pia leavers had a powerful support network represented by ‘brothers’ and casapianos from other cohorts. Women from older cohorts also could get education and support but their experiences in institutions sounded to be traumatizing. Young care leavers seem to lose the advantage of better education due to the democratization of education system in the country. However, they grow up in the de-institutionalized residential care context, can stay in care longer, gain practical skills for independent living, and use the support of professionals to deal with adversity.

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# List of Abbreviations

CPL – Casa Pia de Lisboa

ESS – European Social Survey

INE – Instituto Nacional de Estatística (Institute of National Statistics)

LMA – Lisbon Metropolitan Area

SCML - Santa Casa da Misericórdia de Lisboa

SDT – Second Demographic Transition

TFR – Total Fertility Rate (births per woman)

WVS – World Values Survey

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# 1. Introduction

This research is purposed to reveal the role of living in residential care in family formation and transition to parenthood patterns in Portugal and evaluate the process of youngsters in care preparation for independent life. In this research, transition to family life and parenthood is seen as a sequence of events (leaving parental home or residential care, starting the first job, finishing education) that lead to adulthood and childbearing as the final stage of this process. The life course tradition was chosen as the main framework with a focus on social ecology and demographical behavior determinants that were generated in this interdisciplinary study to explain trajectories of the Portuguese with and without the experience of living in the residential care homes. For tracing the trajectories of the Portuguese without living in care background, the quantitative data of European Social Survey-Round 3 were used. For tracing the trajectories of the Portuguese with living in care background and revealing the factors of their better life outcomes, informants were selected based on purposeful sampling and snow ball methods. For examining the process of preparation for independence, small group discussions with educators from Autonomization Apartments project were organized. This first chapter offers the introduction into the background and objectives of the study and gives the roadmap of the thesis.

## 1.1. Research Background and Research Relevance

Family formation and transition to parenthood is a process where many people share quite similar experiences. However, there are differences in starting points, available resources, strategies employed and other aspects that require researchers to unveil trajectories with various intermediate transitional points (Storø, 2017). People's trajectories can vary for different generations' representatives; they have considerably changed in recent decades, become less standardized (Furlong, Cartmel, 2007).

Trajectories of vulnerable groups of population are of special interest in many developed countries. Researchers demonstrate that blood family based forms are ahead of all alternative ones in socialization of children (Stein, Munro, 2008). However, some countries' experience in de-institutionalization of children at risk have proved that encouraging adoption, foster families and extra support for independent life are advantageous measures to children and communities (Storø, 2017).

Evaluating how effectively country's policy on integration of vulnerable groups of children functions requires comparing typical trajectories of transition to parenthood of general

population (normative trajectories as “the control group” in terms of social experiments) and analogous trajectories of studied group (non-normative ones as the specific “experimental” group). Some researchers have demonstrated empirically that finding job, organizing family life and relationships, educational achievements, parental experience are more problematic for people with the background of living in residential care than for those, who grew up in biological families (Zimmerman, 1982; Barth, 1990; Fanshel et al., 1990; Stein, Munro, 2008; Sulimani-Aidan, 2014). Large differences in transition to parenthood between the representatives of two mentioned groups can be an indicator of failure in the system of socialization and autonomization of children and young people in state care. In addition to this, the point of view of professionals involved in preparing adolescents for independence is required to understand the outcomes of residential care since the process of leaving care itself is both the life project for every young person and professional project for a specialist (Storø, 2017). Revealing problematic transition points and factors of more successful autonomization contributes to better the life chances for young generations of this vulnerable group of young people. This research is pioneering in collation trajectories of general population with trajectories of adult care leavers and giving voice to professionals responsible for preparing adolescents for independent life in Portugal.

In Portugal, as well as in many European countries, very similar trends of changes in family formation and childbearing patterns are observed. These trends are the postponement of marriage and birth of the first child, rising number of young people living alone, reduction of nuptiality rate, rise of cohabitations and non-marital childbearing (Puur et al., 2012; Guerreiro, 2014). Young Portuguese people after getting final stage of education usually do not have financial independence from parents, so families continue providing them with housing and living costs (Nilsen et al., 2012).

There are several research that describe Portuguese care leavers’ independent life experiences and report that they face the same problem as the representatives of this vulnerable group of population around the Europe do (Colen et al., 2005; Maia et al., 2012; Martins, 2015; Instituto da Segurança Social, 2017; Adeboye et al., 2017). Lack of after-care support and impossibility to return to residential home seems to be one of the main issues for care leavers (Storø, 2017). It might be crucial for this vulnerable group representatives in Portugal hence it is common for youngsters to live with parents for several years after official age of adulthood (Nilsen et al., 2012). A major consequence of mentioned issue for care leavers is the need to start first job earlier than general population representatives do (Stein, Munro, 2008). Such behavior is also considered to be the way to develop their identity as young adults and decrease

the period of uncertainty in their lives (Storø, 2017). The study of Adeboye et al. (2017) deserves special attention hence its central objectives have been to describe the past experience, present life, and projected future pathways of youth in transition stage from care to independent life in SOS village of Portugal. One of the results has a special value for this research. The authors have found out that the disadvantages of the past life could influence family formation plans of young people. Finding a partner and childbearing became a misplaced priority for some participants, they hardly saw themselves partners or parents in future. This research focuses on matrimonial and reproductive events as the framework for other events shaping transition to adulthood to understand if family formation is a problem for care leavers or their unwillingness to become partners and parents is a result of more global trends occurred in modern societies.

Being aware of many difficulties that young people after leaving care had faced, Portuguese Ministry for labor and Social Solidarity ran de-institutionalization of children at risk policy complemented by Autonomization Apartments project. Together, these arrangements cover “social responses providing permanent shelter for children and young people in danger and the measures adopted which lead towards the de-institutionalization of children taken in” and their further autonomization (Institute of Social Security, 2007: 17). This research examines the practices used in the project of Autonomization Apartments for identifying strengths and weaknesses of preparing young people for independence.

## 1.2. Research aim and objectives

This research aims to unveil the role of living in residential care in family formation and transition to parenthood of Portuguese people and evaluate the process of care leavers preparation for independent life. The key research questions are “do Portuguese people with the experience of leaving residential care organize their transition to parenthood in the same way as the Portuguese grew up in their family of origin do?”, “why do some care leavers organize their lives better than others?”, “what are the transitional points that care leavers face problems with?”, “how do educators see the preparation of care leavers for parenthood and other aspects of adult life?”. The following objectives help to answer these questions:

1. Revealing family formation and transition to parenthood trajectories of Portuguese people (normative trajectories);
2. Revealing family formation and transition to parenthood trajectories of Portuguese people with residential care experience (non-normative trajectories);
3. Finding out the factors of care leavers’ better life outcomes;

#### 4. Analyzing the process of the young Portuguese preparing for leaving care.

The additional objective of the research is to give recommendations to policy makers on supporting vulnerable children who are not able to grow up in biological family environment in their transition to independence.

### 1.3. Definition of the studied population

This study concentrates on family formation and transition to parenthood trajectories of two groups of people: representatives of general population of Portugal who have lived in biological families and vulnerable group of Portuguese population who have spent several years of their lives in residential care facilities. The trajectories of the first group have to be revealed to demonstrate the patterns common for representatives of specific gender-cohort groups. The second group is in the main research focus.

In international research on the topic of this study, the terms to describe similar vulnerable group of population differ rather notably. In the UK, researchers use the terms “looked after children”, “children in accommodation”, “care leavers”, while in the US, academics address them as “children and young people in out-of-home care going on to age out of the system or to emancipation” (Stein, Munro, 2008: 13). For this research, the expression ‘care leaver’ in its narrow meaning is adopted to indicate the process of making the transition from years in residential care facilities to adulthood that means going through particular set of life events rather than just reaching the age of majority. An obligatory condition for potential informants is the experience of living in an orphanage in the Lisbon Metropolitan Area for at least three years and leaving it for an independent life.

This population is studied from several perspectives:

- care leavers from older and young cohorts;
- educators working on the preparation of young cohorts of care leavers for the life outside the residential care homes from the programme of Autonomization Apartments in two leading institutions that provide child care services – Santa Casa da Misericórdia de Lisboa and Casa Pia de Lisboa;
- employees from the Associação Casapiana de Solidariedade who support aged care leavers from Casa Pia de Lisboa;
- colleagues of care leavers who were studied in Casa Pia de Lisboa (but lived with families of origin) and had a chance to observe the lives of children in the residential care.

## 1.4. Structure of the work

The presentation of this research is organized in five chapters. This first chapter introduces the research approach, background, objectives. The second one presents recent changes in family formation and transition to parenthood in Europe among general population and care leavers, offers the research analytical model, and describes the social context of Portugal where young people accomplish their life passages. The third chapter provides the overview of data and methods used throughout this study. The fourth part includes research findings. The final chapter concludes the research, gives recommendations on improving the process of care leavers preparation for independence and discussion on possible steps on in-depth study of this topic.

## 2. Literature Review and Analytical Framework

This chapter gives an idea of changes in transition to family and childbearing in Europe with focus on Portugal, analytical framework of the study that includes life course, social ecology and demographic behavior perspectives, along with the social context of Portugal where different cohorts of people made their life course choices.

### 2.1. Family Formation and Transition to Parenthood in European Countries

Since the middle of the 20th century, reproductive and matrimonial behavior of population have changed significantly in many European countries. The ages at first childbearing and entry into the first matrimonial union increased, the rate of unregistered unions rose and children born outside wedlock are no longer a rarity (Puur et al., 2012; Perelli-Harris, Lyons-Amos, 2015). All these changes have gone in step with prolongation of transition period between youth and adulthood (Nilsen et al., 2012). It requires researchers to observe the transition to parenthood in relation to other life course events. As it was mentioned before, in spite of the fact that, in the process of transition, people usually go through similar set of the events, there are differences in support they can rely on and resources they can use. Researchers from different parts of Europe have reported that inequalities in the access to support of family or the state lead to differences in transition to independence between general population representatives who are “allowed a period of extended dependency” (normative trajectories) and care leavers whose transitions are “accelerated and compressed” (non-normative trajectories) (Stein, Munro, 2008; Storø, 2017: 772). The subsequent sections contextualize this study in the existing body of research and debates devoted to life courses of these two groups of population.

#### 2.1.1. Normative Trajectories

The life course trajectories of population are in the process of de-standardization in terms of the order of events, their timing and linearity of their occurrence (Brannen, Nilsen, 2002). In other words, some young people organize such events as finishing education, leaving parental home, starting first job, entry into matrimonial union and childbearing to occur in parallel while others prefer to scatter them on the whole decade. The nowadays tendency is long-lasting adolescence

with extended education and training (Brannen, Nilsen, 2002; Crespi, Fontaine, 2012). Demographers have observed moving from the old pattern of the transition to parenthood that was early, contracted, and simple towards late, protracted, and complex one (Billari, Liefbroer, 2010). New pattern typical for modern societies is a quite early leaving parental home, followed by living alone, entry into cohabitation, childbearing at a relatively late age comparing to older generations and marriage that can start just before or after becoming a parent or not occur at all.

According to some research (Brannen, Nilsen, 2002; Nilsen et al., 2012), there are four patterns of transition from youth to parenthood as the final event of becoming an adult in Europe. The first one is a long period of youth that is typical for those who take higher education but rely on the financial and housing support of the family. This pattern can be found in South Europe among the representatives of middle-class families. The second one is young adulthood, a pattern of leaving parents for separate accommodation while earning enough money to provide for independent life and family formation. The pattern prevails among middle-class young people in Scandinavia and Western Europe. The third one is an early adulthood pattern. It refers to young people forced to fulfill the duties of adults early in life by starting job that is usually low skilled and confine themselves to secondary education. Sometimes they transit to parenthood relatively early. Their strategy is insecure in long term and they can rely mainly on themselves. Early adulthood pattern can be found in all European countries but it is less frequent in resourceful welfare states like Scandinavian. The last pattern is the short period of youth, which is similar to the third one in terms of timing of events. The fundamental difference is in the support of the state that can provide young people with education and vocational training for skilled work. Thus, mainly working-class young people from Northern Europe follow this transition pattern. Transition to parenthood has different impact on women's and men's educational and working paths (Nilsen et al., 2012). Women usually stay out of work longer after becoming mothers than men after fathering children in all European countries (Nilsen et al., 2012; Crespi, Fontaine, 2012).

The latest data of Eurostat (2017) demonstrate that normative lifelines of men and women in Europe are quite diverse. In 2016, women moved to parenthood at the age of 28,9 years (with a minimum equal to 26 years in Bulgaria and maximum equal to 31 years in Spain) after start of the first employment (23 years) and leaving parental home (25,1 years). Men, in their turn, started working at the age of 22 years and left parents at 27,1 years. There are no data about the age of men at childbearing that reflects the gender order perceptions still existing even in data official agencies. Women on the average got married two years earlier than men did. Obviously,

there were age differences for these events occurrence among the member states. For instance, the age difference at first marriage between men and women exceeded three years in Bulgaria, Greece and Romania and it did not reach two years in Ireland, Portugal and Lithuania (Eurostat, 2017).

In Portugal, very similar trends of changes in patterns of family formation and transition to parenthood have been observed since the 1970s (Viegas, Costa, 2000). The ages at first marriage for both sexes and mother's age at giving birth to the first child are continually rising (Guerreiro, 2014). According to the latest statistical reports, in 2016, the mean mothers' age at giving birth to the first child exceeded 29 years (29,6), the mean age at marriage was equal to 32,8 years for men and 31,3 years for women (Instituto Nacional de Estatística, 2018). In addition to it, a noticeable decrease in marriage rates not typical for Portuguese people who traditionally preferred to formalize matrimonial unions throughout the twentieth century has been observed. It does not mean that young people avoid leaving in a couple. This trend simply represents the choice of cohabitation as the first stage before marriage or independent union where partners give birth to a child. In fact, nearly 80 % of children born outside wedlock live together with both parents (Guerreiro, 2014). One more important detail here is that young Portuguese people study longer and experience difficulties with finding a job that guarantees a minimally secure source of income, hence they usually do not have financial independence from parents and families continue providing them with housing and living costs (Nilsen et al., 2012). Indeed, in 2016, a mean age at leaving parental home was equal to 29,1 years (29,9 years for men and 28,2 years for women) (Eurostat, 2017). The overall transition to adulthood pattern in Portugal can be classified as "long period of youth" revealed by Nilsen et al. (2012). This pattern has variations corresponded to the different layers of modernity highlighted by Viegas and Costa. The "uncertain transitions", found by Guerreiro and Abrantes (2005: 170), vary from prosperous trajectories with promising career, higher education, arranged family life to destructive ones with unemployment, low education, poorly satisfied survival needs, depending on youngsters' opportunities and resources to maneuver in precarious social contexts of Portuguese society.

Recent quantitative study shows that pluralization of family trajectories in Portugal is limited (Ramos, 2016). More than 75% of the sample followed two trajectories: early parenting where a long period of residence in the parents' household is followed by creating a couple with children (32.3%) and late parenting where people live in the parents' house, then live together with a partner, and finally in a couple with children (43.9%). Both trajectories are close to the traditional family cycle but differ in timing of transition. While the early parental trajectory is



marked by the urgency of the transitions, the late parental trajectory presents greater variability. The comparison between cohorts has revealed that the early parental trajectory predominates in the 1950-55 cohort (39.8%). The late parental trajectory is the most frequent in the cohort of 1935-40 (42.6%) and becomes hegemonic in the cohort of 1970-75 (53.4%). The late parental trajectory is leading among men (56.6%), while in case of women the early parental trajectory is slightly more pronounced (38.6% vs. 35.4%). Other trajectories represent different combinations of partnerships and childbearing with living arrangements and complexities before and after family formation: living with relatives, living alone, divorce or widowhood, single parenthood.

These trajectories are typical for general population of Europe, while the following section describes trajectories of a specific group of European population: care leavers.

### 2.1.2. Non-normative Trajectories

The non-normative trajectories of transition from residential care to adult life received increased attention from researchers in Europe. However, the central concept of transition is still considered undeveloped. Presumably, it happened because of diverse understanding of transition concept by authors. According to Storø, who has analyzed the existing body of literature on transition from care, researchers in their works address “the process of transition from care to becoming part of a community”; “the experiences of the young people making the transition”, and “support and aftercare during the transition” (2017: 775). He has concluded that in the minds of young people transition includes such constituents as breaking with the past in the moment of leaving care; moving forward life changes; coping with uncertainty in their lives outside institutions.

The most famous international project (INTRAC) aimed to bring the light on transition from care to adulthood was supervised and described by Stein and Munro (2008). It brought together researchers from 16 countries. Authors wanted to demonstrate the poor live outcomes for care leavers in comparison to adults who had never been in care. They focused mainly on their education, health and well-being in brief follow-up periods with a limited number of researchers having access to the data about matrimonial and reproductive behavior (Harder et al., 2011). This cross-country research confirms that young people, who have been in care, become younger parents, drop out from education, get low-skilled jobs, demonstrate offending behavior and mental health problems.

Among 16 countries-participants, only 11 were European: France (Dumaret A.), Germany (Köngeter S., Schröer W., Zeller M.), Hungary (Herczog M.), Ireland (Gilligan R.), the Netherlands (Knorth E. J., Knot-Dickscheit J., Strijker J.), Norway (Storø J.), Romania (Anghel R., Dima G.), Spain (Del Valle J. F.), Sweden (Höjer I.), Switzerland (Gabriel T., Stohler R.), United Kingdom (Wade J., Munro E. R.). The short summary of the situation in each country is introduced below:

- *In France*, youths with an experience of living in residential care face difficulties in managing housing, jobs and relationships. They often feel abandoned and lack preparation for independent life. At the age of 24-27 years, about 10-25% are still not living autonomously, rather with friends or in residences. They demonstrate a faster progression in employment and family formation than the general population representatives do.
- *In Germany*, existing research reveal a gap in the educational support for this group of population. The information about reproductive and matrimonial behavior is missing.
- *In Hungary*, young people after residential care can rely on financial help, but their preparation for living in an autonomous way requires improvements, since nowadays practices hardly add any chances to their successful integration without repetition of their parents' live patterns. Few studies display limitations of the care system that does not perform its functions on training them to be self-sufficient adults despite they can stay in care quite long (until 24 in some cases). Hungarian care graduates' social skills are very low and family ties are absent or weak.
- *In Ireland*, the likelihood of becoming homeless is linked to living in a non-family-based placement before transition to independence. In terms of coping with accommodation, training and employment, young care leavers usually 'do well' or 'do moderately well' with comparatively low proportion of those who are 'doing poorly' (Stein, Munro, 2008: 78).
- *In the Netherlands*, boys, young people with a foreign background, early care leavers have a risk of less favorable outcomes compared with girls, native people of the Netherlands, and regular care leavers.
- *In Norway*, care graduates are socially marginalized. In spite of the fact that they have an access to supportive services, legislation does not specifically instruct professionals to deliver these services. Therefore, a number of care leavers find themselves in the

situation of no support on their way to independence and their transitions become more problematic than trajectories of general population.

- *In Romania*, the majority of care leavers lack family support, do not get employed, and only about 50% of them have accommodation that is mostly temporary. Separation from family in combination with time spent in care and the traumatic conditions have a lifelong impact on their emotional development and ability to build relationships. Moreover, Romanian care graduates face stigma that adds extra points to their vulnerability and inclination to crime. Many young care graduates experience early parenthood.
- *In Spain*, care leavers have the right for support until they reach the age of 18 years. Research showed that most of residential care graduates are doing quite good after autonomization in terms of education and labor market position. Small percent have problems with drugs or delinquency though. The more changes of care homes a child had, the poorer are his or her results in future.
- *In Sweden*, care leavers are exposed to increased risk of “higher mortality, mental health problems, suicide attempts, poor educational attainment and teenage pregnancy” (Stein, Munro 2008: 155). The ample opportunities of the Swedish welfare system do not guarantee comprehensive assistance to young people in the transition to adulthood (Höjer, Sjöblom, 2014).
- *In Switzerland*, some young care leavers are under risk of social exclusion due to low levels of education and qualification, difficulties with lodging, imprisonment. The risk is higher for males, ethnic minority groups, those who lack social networks.
- *In the United Kingdom*, at least a semblance of stability, possibility of new attachments, contacts with family, social network, priority of education in care planning increase the life chances of former residential care users. Care leavers in the United Kingdom are likely to go through unemployment, homelessness, involvement in the justice system. They take adult responsibilities earlier than their peers do. Later study conducted in the country has showed the decline in teenage pregnancy rates among general population but not among care leavers who become parents within 18-24 months after leaving care (Weston, 2013).

In Portugal, several research aimed to understand how care leavers organize their lives have been conducted. Experts report that Portuguese young people after care face the same problems as the representatives of this vulnerable group of population around the Europe do.

The research conducted among 150 care leavers of Santa Casa Misericórdia de Lisboa (the influential non-state organization that among several others provides child care services) has indicated that many young people after care present a Good integration index. However, they still have to deal with such problems as poor schooling results and low level of education followed by modestly paid jobs with temporary contracts, absence of stable housing, drug addictions, tendency to reproduce social vulnerability (Colen et al., 2005). It is worth mentioning that women and those who have had shorter periods of institutionalization demonstrate better integration to community after leaving residential care, than men and youngsters who have spent many years in care. The research group from Casa Pia de Lisboa (the state organization with several centuries history of supporting children at risk) conducted quantitative study with the sample equal to 778 cases that included former institution's students lived in residential care or only studied in its educational establishments from three generations born between 1920 and 1983 (Maia et al., 2012). Their results have demonstrated that a great majority of informants from all generations are socially integrated. The percent of those who do not have a partner and children is low; the majority reach a medium or high school level; the vast majority continue to invest in their academic career after leaving Casa Pia; they usually do not have problems with employment. Another study about the life trajectories of 40 former students of Casa Pia de Lisboa has showed that young people undergo behavioral changes during their time in residential care and it helps them to leave the care prepared (Martins, 2015). In many cases, they move in with the family of origin after leaving care but later feel the need to live alone or with friends. The same study has revealed the link between good school results and successful integration after leaving care. More recent study has demonstrated that professionals often have concerns about care leavers' future life outcomes and family formation since about 34% of young people are identified as having behavioral problems and some of youngsters do not have a reliable network outside institutions at the moment of transition to independent life (Instituto da Segurança Social, 2017). One more important issue is a social image of children and youth who grew up in residential care that Portuguese people keep in mind. The results obtained in the study of Calheiros et al. (2015) have demonstrated that the attributes of this group of population in Portugal are mainly negative: aggressive, sad, and lonely. Such image hardly contributes to successful integration of care leavers to the society.

Researchers from many European countries indicate the need for extra support for care leavers and for after-care services (Stein, Munro, 2008; Stein, 2012; Instituto da Segurança Social, 2017). It is known from investigations that normative trajectories of general population are not linear and it is normal for young people nowadays to move back to parental home in

case of need. This moment indicates crucial contrast to the experiences of most care leavers whose trajectories do not suppose coming back to care while the possibility to return to safe environment might determine successful transition (Storø, 2017).

Professionals see the transition as a process of uncertainty, risk and vulnerability for young people. However, young people themselves might have positive expectations of the changes that transition can bring (Stein, 2012). Young people consider such experience-based subjective markers of being adult as “being included in the family’s secrets, or being treated like an adult” very important (Storø, 2017: 778). It can mean that the transition to independent life is not only moving from one status to another over time but also private project of every care leaver and professional involved.

Researchers recognize the demand to develop a theory or even several theoretical perspectives to understand transition from care to independent life (Storø, 2017). This work does not pretend to offer a theory rather than an analytical framework that seems useful for structuring the context around young people who transit from either family environment or residential care to parenthood as the final stage of becoming an adult. This framework is presented below.

## 2.2. Analytical Framework: Life course, Social Ecology and Demographic Behavior

This study is conducted within the life course research tradition (Mayer, 2004). It is important to keep in mind that this approach is neither an explanatory theory, nor a methodology. It is a framework that represents the complexity of interactions between them (Hareven, 1987). Elder was the one who presented four key principals of the approach (Elder et al., 2006; Nilsen et al., 2012). The first principal concerns the duration of an individual development that, according to experts in this field, is lifelong (the Principle of Life-Span Development). The second one focuses on the importance of individual choices within the historical and institutional context (the Principle of Agency). The third one says that the timing of key events in the life of an individual influences his/ her future life transitions (the Principle of Timing). The last principle insists on the interconnectedness of the individuals' life courses that are rooted in socio-historical contexts (the Principle of Linked Lives). Studying the effect of timing led researchers to understanding of synchronization of individual life course with collective family transitions in the context of changing historical time (Hareven, 1987).

As it was mentioned above, this research focuses on family formation and transition to parenthood trajectories in their connection with other markers of adulthood. Differences in studied trajectories can be explained with the well-known among social workers universal ecological theory of individual's social development, proposed by Bronfenbrenner (1994) and the multilevel model of demographic behavior determinants presented by Balbo, Billari and Mills (2013).

Like other models appeared in the tradition of system analysis, Bronfenbrenner's one was developed under the impact of structural functionalism, and primarily works of T. Parsons and R. Merton. Adherents of the system analysis view society as a set of interconnected elements located in a certain environment and striving for equilibrium. Taking into account the same assumptions, Bronfenbrenner differentiated five environmental systems that influence the development of a child in an adult member of society (1994). His model includes micro-system (institutions that directly influence the child's development), meso-system (interrelation between the microsystems), exo-system (social settings with the elements of indirect impact on child's development), macro-system (culture in which a child socialize), and chrono-system (sociohistorical context). Ecological model meets the principles of the life course approach but concentrates mainly on years of childhood and can obstruct understanding of future analysis of older years of the life course that are in focus of this research.

Balbo, Billari and Mills (2013) have presented an explanatory model of reproductive behavior in advanced societies that classifies the whole variety of its determinants into three large groups of macro-( cultural and institutional settings), meso- (social relationships and social networks), and micro-level (the individual and/or couple). However, their analytical model does not pay due attention to historical context crucial for this study.

Taking into account principles of the life course approach, advantages of both models described, specificity and interdisciplinarity of the study, it was decided to generate another analytic framework. The resulting model includes four interrelated subsystems that shape individual's family formation and transition to parenthood trajectory and can explain the differences in trajectories of Portuguese people with and without leaving care background (Figure 2.1).

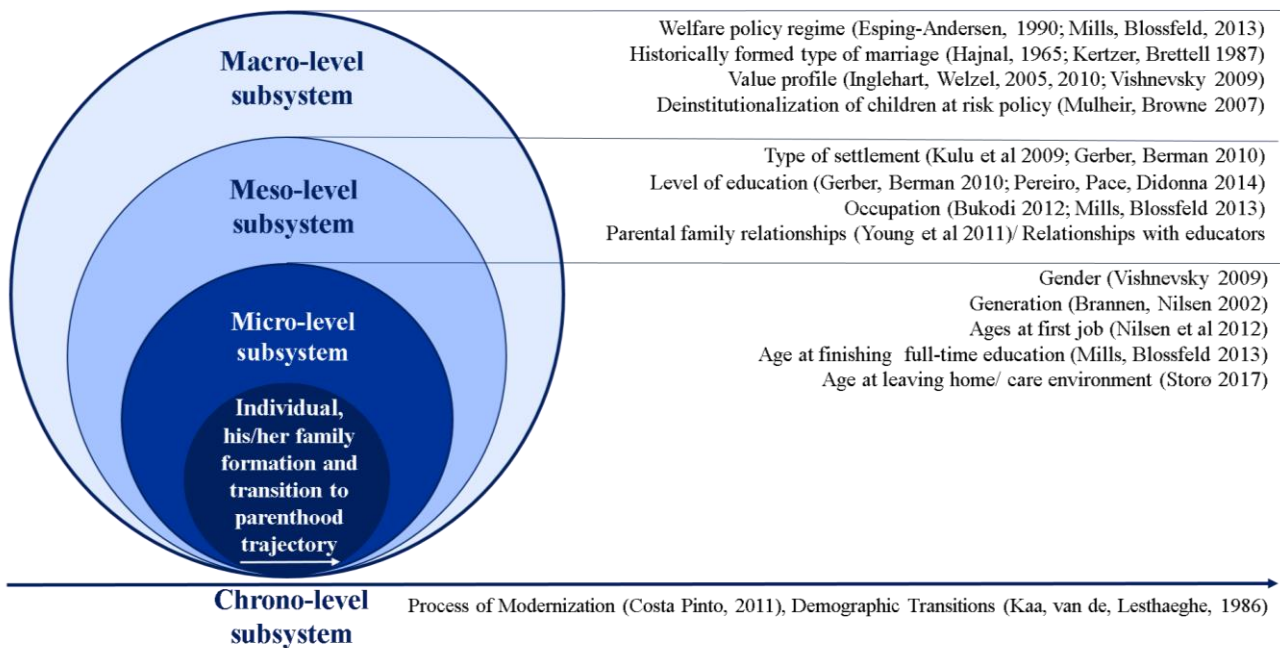


Figure 2.1. Modeling Family Formation and Transition to Parenthood Trajectories

Examination of the model should begin with the chrono-level, because it is the subsystem where social transformations start. Elements of this level are responsible for changes occurring in time (mainly historical changes) that have consequences for the organization of the individuals' life course. This level can also be determined through time-evolving links between other subsystems of the model (Bronfenbrenner, 1994). The modernization process, and the Second Demographic transition as its important component (Kaa van de, Lesthaeghe, 1986), can be considered as the key explanation of changes in family formation and transition to parenthood. Modernization of the process of generations reproduction became possible due to the global processes of democratization (Inglehart, Welzel, 2005; Costa Pinto, 2011), industrialization (Riley, 2005), achievements in medicine (Minagawa, 2013), the emergence of effective contraceptives (Kaa van de, Lesthaeghe, 1986). The Second Demographic Transition Theory postulates that modernization leads to convergence of demographic behaviors from different regions of the world or, in other terms, to unification of social spaces of industrial and post-industrial societies (Haferkamp, Smelser, 1992).

Demographers usually associate SDT with weakening of public control, broad and long-term changes in norms that include alternative lifestyles, emphasizing individual fulfilment rather than investing in family life and parenthood (Kaa, van de, Lesthaeghe, 1986). At the same time, young people do not have the full control over their lives because they need to minimize risks of re-structuring labor markets, increasing demand for educated workers that results in extension of period of young people's dependence on their families or on the state in

case of care leavers (Beck, 1992; Furlong, Cart, 2007). The fact that new risks were largely unknown to their parents makes the situation even more complicated as young people have not enough sources to get knowledge about mechanisms of mitigating hazards. The ideas of the risk society are connected to reconceptualizing of time from cyclicity existed in pre-industrial or traditional society to linearity in the modern world (Brannen, Nilsen, 2002). Increased uncertainty in all life dimensions has become a source of stress and vulnerability. Not all people are equally able to manage risks and plan the life calendar. Modern generations of care leavers presumably face even more risks and cope with bigger uncertainty on the way to adulthood than their predecessors. These changes of chrono-level subsystem are connected with the macro-level subsystem of the analytical model.

The elements of the macrosystem relate to social, cultural and political conditions of society development, shape the ideology, the structure of knowledge and beliefs, the way of life of individuals. Some researchers identify historical and cultural features (path dependency) as the roots of present demographic behavior (Mills, Blossfeld, 2013). In case of family formation and transition to parenthood, they refer to the whole group of determinants that appeared as a response to the modernization process: transformation of historically formed type of family (Hajnal, 1965), values profile of population (Inglehart, Welzel, 2005, 2010), welfare policy regime (Esping-Andersen, 1990; Mills, Blossfeld, 2013), and, crucial in the context of this research, de-institutionalization of children at risk policy (Mulheir, Browne, 2007).

Hajnal was one of the first authors who initiated the investigation of matrimonial behavior in the cross-regional context (Hajnal, 1965). He noted that during the last few centuries, the historical marriage pattern in Europe was different from those in other regions of the world. Outside Europe, it was observed only in countries of the Western civilization populated with former Europeans, such as the USA, Canada, Australia. The marriage was late, the final celibacy rate was unprecedentedly high for that period (10–15% for men and 15-20% for women). Hajnal plotted a line from St. Petersburg, Russia, to Trieste, Italy. This line separated areas with two different types of family formation. A European marriage pattern prevailed to the west of the line whereas to the east of it the marriage was more early and universal, and the signs of the SDT appeared there later than in Scandinavian and Western European countries (Puur et al., 2012). Hajnal himself later recognized that a single east-west boundary could not be considered a perfect generalization to describe the variety of marriage and family forms in Europe of past centuries, especially in its South part (Kertzer, Brettell, 1987). Wrigley acknowledged the existence of "Mediterranean" pattern of marriage and household formation characterized by late age of marriage for men and early age for women that could be found in



Spain, part of Portugal, Italy (Kertzer, Brettell, 1987). Hajnal suggested though that the distinctiveness of this marriage pattern was destroyed by the nineteenth century when modernization came.

Another macrosystem determinant of people's choices in matrimonial and reproductive behavior is transformation of population values profiles. Sociologists R. Inglehart and C. Welzel (2005, 2010) postulated that industrialization brings a shift from Traditional values to Secular-rational values and post-industrial modern society brings a shift from Survival values to Self-expression values. Before the SDT, a human life was considered as a cycle where each age corresponded to a particular role set (standardized life course). As the modernization began, life was asserted as a pathway with a multiple choice available to individuals despite gender or age (de-standardization of life course). In other words, a logical transition from Survival values<sup>1</sup> to Self-expression values occurred. The cohabitation as a trial marriage and postponement of childbearing play important roles allowing to assess the stability of life. Vishnevsky, remembering M. Weber's theory of ideal types of social action, assumed that peoples' actions (including those in reproductive sphere) became more rational, more flexible and less controllable by the social system during the transition to the contemporary way of reproduction (Vishnevsky, 2009). In other words, transition from the value rational type of social action to the goal-instrumental one, or from Traditional values to Secular-rational in terms of Inglehart and Welzel, can be connected with transformation of transition to parenthood and family formation trajectories. Taking a close look at works of sociologists indirectly tests this assumption.

Inglehart and Welzel performed an analysis based on the World Values Survey data (Inglehart, Welzel, 2005). The researchers reviewed two continuums mentioned above: survival – self-expression and tradition – rationality. As a result, authors presented a map of values consisting of several clusters. Sweden, Germany, Norway, Switzerland, Finland, Netherlands, France, the United Kingdom, Australia, the New Zealand, Canada and the USA formed the cluster of countries which populations set the maximum value on the importance of rationality and self-expression. The cluster of countries which populations set a high value on the

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<sup>1</sup> **Survival values:** economic and physical safety, tangible property, intolerance to dissent, low value of liberty and human rights, readiness to authoritarianism, belief in omnipotence of science and technologies.

**Self-expression values:** high values of personality, liberty, human rights, material wealth and success; concern upon economy and gender equality.

**Traditional values:** religiosity, a focus on a close-knit family, deference to the government, social conformism, non-readiness to participate in open political conflicts.

**(Secular-) Rational values:** the rational behavior, a focus on a personal success, a minor role of religion, gender equality.

importance of rationality and survival contained China, Russia, South Korea, Bulgaria, Japan, Ukraine, etc. The Southern Asian, Latin American and African countries were in the cluster which populations set a high value on the importance of traditions and survival. The countries from the first cluster are pioneers in reproductive and matrimonial behavior modernization, while others follow the given trend (Mills, Blossfeld, 2013; Artamonova, Mitrofanova, 2018).

Esping-Andersen's typology of welfare regimes offers a useful starting point for asking questions about what international patterns may exist in transition to parenthood and leaving care (Stein, Munro, 2008, Mills, Blossfeld, 2013). Many authors noted the link between the family policy regimes of the state and processes of transformation of reproductive and matrimonial behavior (Hantaris, 2004; Esping-Andersen, 2009; Mills, Blossfeld, 2013). Esping-Andersen distinguished three main regimes on the basis of the following factors: de-commodification rate (i.e., the rate of dependence on the labor market), availability of universalistic status of a citizen, and agreements between the family, state and market institutions (Esping-Andersen, 1990).

The first type is social-democratic regime existing in Denmark, Norway, Finland and Sweden and characterized by a high tax rate, effective revenue redistribution, high rate of women on the labor market (with part-time employment capability), gender equality both at workplaces and in domestic duties, significant support for children at risk, high standards of living and a confidence in the future. This type of regime is favorable for young men and women involvement into both family and work dimensions of life. The signs of the second, conservative, regime can be found in Austria, Belgium, Germany and some other countries. It is characterized by lower rate of women on the labor market, dependence on social charges, moderate revenue redistribution, relatively high unemployment rate, and, correspondingly, less confidence in the future. This regime is focused on rather traditional type of family where the male partner earns the most of family income. The influence of this regime on the family formation is in delayed entry into the marriage and childbirth due to difficulties in combining the family life and career for women. Southern European or Mediterranean welfare regime existing in Italy, Spain, Portugal, Mexico is classified by some authors as a form of the conservative regime (Mills, Blossfeld, 2013), while other experts consider it an independent regime (Guerreiro, 2014). Its key difference from the conservative one is "the strong ideological and practical involvement of family and kinship networks in protecting its members against economic and social risks" (Mills, Blossfeld, 2013). The third regime is liberal. It exists in the United Kingdom, Switzerland, the USA, Canada. Its attributes are low state spending for social support, high level of social inequality. Due to the passive family and labor policy of the state,

young people prefer investments into education and career rather than starting the family early in life.

The harmful effects of institutionalization upon children who cannot live with their parents was proved by many authors (Mulheir, Browne, 2007). Aldgate (1994) acknowledges that every extra day spent in institutional care can increase a child's risks for substandard education, poor health, low self-esteem, unsatisfactory social skills, unemployment, homelessness. In spite of that, institutional care is still widespread around the world since not all the countries dispose the necessary resources to provide children with substitute care like family or community based care that respond more to the needs of children (Mulheir, Browne, 2007). The services that meet children's individual needs include financially expensive prevention services, reintegration and alternative care services, fostering and adoption placements, small group homes. One of the key elements of de-institutionalization is considering children as a group of different individuals, rather than as a collective number with "one-size fits all" solution, so it is not simply about restructuring institutions or introducing alternative services (Mulheir, Browne, 2007: 120). Obviously, de-institutionalization requires many efforts including "hanging hearts and minds" of professionals, proper psychological preparation of children, well-planned logistics (Mulheir, Browne, 2007: 120). However all the strivings are worthy for the future of the young service users as their chances to organize lives in a normative way in the domains of education, employment, housing and social relationships enhance dramatically (Donkoh, Montgomery, Underhill, 2006).

Described indicators of the macro-level subsystem are associated with the indicators of the levels of lower orders. Thus, they determine the choice of an individual in favor of a particular life-course planning strategy, that can be continuing education or entering the labor market, giving birth to a child or the postponing of this event, joining a union or choice to be single, separation from parents or living in the parental home as long as possible.

Meso-level subsystem determinants, in their turn, explain in-country differences in transition to parenthood trajectories. The paths might differ for inhabitants of urban and rural areas, people with secondary and higher education, stable or unstable occupational position, those who have support of relatives and an opportunity to come back to parental home any moment they want and people deprived of these opportunities.

The impact of education and occupational position on family formation differs for men and women. The risk of entry into the unregistered union is higher for men with professional education rather than for those who had the higher education (Gerber, Berman, 2010). In contrast, women with secondary or vocational education are less likely to start a family with

cohabitation than more educated ones. The risk of entry into matrimonial union of any type is higher for employed women than for unemployed in Spain and Italy (Pereiro, Pace, Didonna, 2014). Concerning childbearing, highly educated women are more inclined to devote their young ages to careers rather than family life (Balbo, Billari, Mills, 2013). Increasing income power releases them from the pressure to get married for economic reasons, so they postpone becoming mothers. The lack of stability in the beginning of working trajectory increases the risk of entry into cohabitation rather than marriage as a first union for men (Bukodi, 2012). Moreover, low income increases the risk that the cohabitation will not lead to the marriage and childbearing. In general, time of remaining in the education system and ability to find a job are highly related to postponement of family formation among young men and women in modern societies (Mills, Blossfeld, 2013).

Mills and Blossfeld also emphasized that not only education and employment are interrelated with the transition to first partnership and parenthood (2013). Relationships with parents regulate the degree of freedom of young people's choices and their confidence in the future. Modern pluralization of lifestyles and family formation patterns might create a conflict between parents who expect their children follow traditional way through marital union and childbearing and adult children who prefer starting matrimonial biography from non-marital cohabitation, remain single, postpone transition to parenthood or even be childfree (Young et al., 2011). Youngsters, and young women in particular, face a serious pressure by their relatives because of different views on transition to parenthood (Isupova, 2015). At the same time, parents can offer their adult offsprings a great support in childrearing and keeping the work-life balance. The opportunity to accept this support can be crucial in decisions on the time of transition to parenthood. It is important to contextualize the family formation practices of care leavers here. They grew up in residential care and transitioned from almost total support to no support without a chance to return and, more important, without people who can guide them in their decisions and support if required (Storø, 2017).

Bronfenbrenner (1994) characterized the micro-level subsystem as a complex of relations between a person and everyday environment. At this level, the primary set of the social roles of an individual is formed through his/ her previous experience. Experience is a key concept of this level and the reference to the second (the Principle of Agency) and third (the Principle of Timing) principles of the life course framework. "Time shapes experience and vice versa" (Brannen, Nilsen, 2002: 517). It represents the individual choices and timing of the key life events. Thus, experience in such life dimensions as education and occupation histories might influence individual's future life transitions in the dimension of family formation and

childbearing (Nilsen et al., 2012; Lahire, 2017). From the life course perspective, one of the life experience indicators is an age at main events. Researchers who focus on the analysis of individual cases in order to explore how microsystem characteristics work in shaping trajectories, demonstrate that transition to parenthood should be observed and interpreted in relation to circumstances and timing of other life course events occurring (Nilsen et al., 2012; Storø, 2017).

This study also focuses on gender and cohort. Gender roles gradually change. Before the SDT, family and children were the highest value for women. However, due to the industrialization, economic growth, access to education, implementation of the state social support for families and children, women became more independent and started to endeavor to self-actualization equally with men, at least in modern societies (Vishnevsky, 2009). Family formation and transition to parenthood has moved to older ages for representatives of both genders, however, some women still undergo the pressure from the society concerning their social roles of mothers and wives (Isupova, 2015). They leave parental home and get married earlier than men do (Eurostat, 2017). In other words, the normative aspect of age is gendered (Nilsen et al., 2012). In turn, the concept of cohorts is an accurate reference to the historical context of individuals' lives and the effects of social changes on their lives (Nilsen et al., 2012). Belonging of an individual to particular cohort reflects the relationships between determinants of four subsystems described above. Birth period and hence the socialization period relate to particular attitudes towards matrimonial and reproductive behavior.

The next section of this work presents the context of family formation and transition to parenthood trajectories for general population and care leavers in Portugal from the perspectives of the introduced multilevel analytical model.

## 2.3. The Case of Portugal

### 2.3.1. Chrono-level Subsystem

The modernization of Portuguese society in the dimensions of economic growth, urbanization, increase in the educational level of the population, gender equality is inextricably connected with political development of the country in previous century (Costa Pinto, 2011). Non-democratic dictatorial corporative political regime (Estado Novo or New State) existed in the country for 48 years from 1926 and until the 'Carnation Revolution' of April 1974 (Guerreiro, 2014). Those years, the government was not working hard on improvement of healthcare,

increasing the level of education of the citizens or on diminishing poverty and social inequality, including gender one.

In the beginning of 1930s, despite the measures of the New State on reinforcing monetary and financial stability, high levels of economic growth did not come true presumably because of agrarian and industrial policies that transferred resources towards wrong sectors and did not contribute to poverty reduction or increasing the level of literacy of the population (in fact, about 75% of the population was illiterate those years) (Capucha, 2000; Costa Pinto, 2011). The same years, Portuguese law established men the head of the family. Wives and children were ordered to be obedient members of families. The constitution adopted in 1933 proclaimed the equality of all citizens except for women as it could disrupt the order and well-being of families (Costa Pinto, 2011).

In 1940, the Catholic marriage was recognized, a civil ceremony became unnecessary and divorce was prohibited in religious marriage (Costa Pinto, 2011). Wives were obliged to provide the wellbeing to the family that had to be large. Usage of contraception was banned. This situation was winning for the existed dictatorship that did not support the families though, having assigned this duty to private charitable institutions (Guerreiro, 2014). High fertility rate and lack of the state assistance aggravated the issue of poor families that tried to survive with the help of extended family members. The post-World War II period's growth in the economy did not bring high standards of living to the citizens though (Viegas, Costa, 2000). Urbanization wave began only in the 1960s and until that, many women, in addition to domestic work, were busy on family farms, some of them worked in underdeveloped industrial and service areas, public administration. Due to limited prospects for the future in the countryside, younger cohorts of that time were searching for a better life in the cities on the coastal areas or in other European countries.

In the period between 1961 and 1974, Portugal was engaged in a colonial war in Africa. As any other war, it left traces in the life courses of young cohorts of that time (Guerreiro, 2014). Many men were pulled out of their lives for several years, while others preferred to escape military conscription and asked for asylum in other countries. It led to women's employment in the male occupational areas: in factories and services. However, it did not mean that women got more rights and freedoms. The civil code of 1967 actually turned women into subject of their husbands' authorization, husbands could dissolve working contracts of the wives. It also concerned other aspects of life. For instance, women could leave neither conjugal home nor the country without the consent of the male head of the family. In parallel, urban growth took place in the metropolitan areas of Lisbon and Porto these years, bringing new

lifestyles to these big cities (Viegas, Costa, 2000). Concerning the educational level of population, in 1960, only about 30% of the citizens completed, attended or were attending the first six years of school while university education was considered an attribute of elites (Viegas, Costa, 2000). Small changes occurred in the 1960s, while steps towards universalization of free basic education were taken after the Revolution.

1974 became an important milestone in the development of Portuguese society. That year brought the democratic revolution, end of the long dictatorship and the colonial war. On the one hand, after this year, the economic growth slowed down, enterprises and production were nationalized (Costa Pinto, 2011). It was the period of transition characterized by turbulence, uncertainty, unemployment and poverty. Unemployment rate reached its top in the end of the 70s, was declining in the 80s and lowed in the beginning of 90s (Capucha, 2000). On the other hand, it was the period of the spread of schooling to the whole population despite the social strata and the time of thinking about the family role in the changing society. In 1975, divorce and contraception were legalized (Costa Pinto, 2011). In 1979, equality of opportunities for men and women at work were spelled out in legislation that gave a start to a number of legislative initiatives that bereaved women of gendered privileges at work like restrictions on night work or earlier age of retirement. These changes happened in the context of the spread of newer urban centers that attracted people in the 1980s-90s (Viegas, Costa, 2000).

1982 gave privatization of major financial and industrial firms that took place until 1986, when Portugal became a part of the European Union. This important historical event pointed the economy to the right direction and triggered following reflections on the family policy and the gender order in the context of the ideological course of the country and European rhetoric. In 1997, the fourth constitutional revision postulated the state's obligation to maintain the gender equality by means of increasing the participation of women in the political sphere (Costa Pinto, 2011). This progress probably would not be possible without remarkable changes in the education system. In 1990s, the number of the Portuguese with secondary education was over 20%, the proportion of young people at the university from the age group of 20 to 24 year-old was close to 30% (Viegas, Costa, 2000). This percent even if growing did not increased as much as it was expected by the 1990's, still near 30% of young population do not progress more than secondary education and many do not study, neither work. Another important aspect is the share of female university students who made up 55% of the total in 1991. Thus, the primacy of overcoming the traditional male prevalence in higher education in the European Union belongs to Portugal. All these changes accompanying modernization kept pace with demographical changes in the country.

The first demographic transition is associated with the changes in the process of generations reproduction due to transformation of mortality and fertility levels, while the second demographic transition refers to changes in family formation patterns due to individuals' aspiration to autonomy and personal realization (Vishnevsky 2009). As other Mediterranean countries, Portugal demonstrated comparatively late first demographic transition and atypical second transition. South European model of SDT repeats the trends of family formation and childbearing postponement and extremely low fertility level. However, experts notice that the motivation for this behavior was to provide children with as better life conditions as possible rather than self-realization (Nogueira, 2015).

In 1991, the birth rate and the fertility rate dropped significantly (Viegas, Costa, 2000). If in 1960, TFR was equal to 3.2 births per woman, in the beginning of 1990s this coefficient decreased to 1.6, and the decline continued resulting to 1.2 births per woman in 2015 (World Bank, 2015). In this indicator, Portugal has reached quite quickly the level of other European countries where demographic transition started earlier. Other evidences of the demographic transition were also observed in Portugal over the past decades: a drop in infant mortality and an increase in life expectancy at birth, transformation of the age structure of population (Viegas, Costa, 2000; Costa Pinto, 2011). In 1950, population of the country was the youngest in Europe (Costa Pinto, 2011). In 1960, experts still could observe a pyramid representing the growth of population (Viegas, Costa, 2000). Nowadays Portugal has the population that is aging very fast due to mentioned fall in fertility rate.

Portugal is quite heterogeneous in the rate of new trends spread. The Northern regions of the country demonstrated lower fertility decline than Southern ones (Viegas, Costa, 2000; Nogueira, 2015). This lag can be connected to the delay in the modernization of Northern regions and their rural areas where people did not invest a lot in education and enter the labor market earlier in life than citizens from more prosperous regions. However, the differences are becoming more and more blurred. The modern trend to uniformity in matrimonial and reproductive behavior is coming to Portugal (Viegas, Costa, 2000). The prediction of Ferrão about normalization of Portuguese society and diminishing its regional diversity mentioned by Viegas and Costa (2000) begins to come true, reminding of the unification of social spaces of advanced societies.

The branchy path of political, social and demographic changes described above led to emergence of new generation of modern young men and women who are voters, workers, consumers, and producers (Costa Pinto, 2011). They can be considered ambivalent in terms of the life experience of their parents with their traditional way of looking at the reality and new



realities of modern European societies where great variety of opportunities and risks (that let them see rather little sense in long term planning about parenthood) exists (Brannen, Nilsen, 2002).

### 2.3.2. Macro-level Subsystem

This section contextualizes a specific conflicts between the past (historically formed type of marriage and old values) and the present (new values, welfare state support, and policies on de-institutionalization of children at risk) that young people have to face and use as landmarks on the way to adulthood.

#### 2.3.2.1. Historically Formed Type of Marriage and Its Transformation

Researchers considered Portuguese historical pattern of marriage and household formation as ‘Mediterranean’ (Kertzer, Brettell, 1987). Probably the main indicator that is commonly used in classifying historical family systems is the age at first marital union. Mediterranean Europe was distinguished by the low female age at marriage and a significant age gap between a husband and a wife. In some areas of the Iberia of sixteenth and seventeenth centuries, women’s age at the first marriage did not exceed 21 while other areas demonstrated ‘western’ family formation pattern with late nuptiality of both men and women by the nineteenth century. Portugal was a country of early marriage and parenthood until the 1970s, due to being a traditional Catholic society (Guerreiro, Torres, Capucha, 2009). However, sharp contrasts could be noticed when comparing north mini-property peasant society where patrilocal residence after delayed marriages for women existed with the south “latifundio” of large land owners and poor rural season workers dispossessed of land lived in simple family households (Rowland, 1986). Another indicator is the rate of permanent female celibacy. In Portugal, this proportion was high by the latter part of the nineteenth century, and constituted 27% (Kertzer, Brettell, 1987). In the first half of the twentieth century, it increased to 32%.

The historically formed type of family formation is important because it can explain early and modern trends in demographic behavior of Portuguese people.

#### 2.3.2.2. Values Profile

The country’s modernization and democratisation caused changes in cultural and family values. It concerns equality between partners, new educational values, access to contraception, greater

accent on the individual and a smaller extent of obedience of the young partnership to the extended family (Viegas, Costa, 2000; Guerreiro, 2014).

The most famous data source about changes in values and motivations of people around the world and the influence of values on social and political life is the World Values Survey<sup>2</sup>. Portugal was included in the global map of values several times (World Values Survey, 2015). In 1996, the country was located in the square ‘Traditional – Self-expression’ values. According to Inglehart and Welzel (2005; 2010), it means that that year, the population of Portugal mainly emphasized the importance of religion, parent-child relationships, respect to authority and traditional family values, refused divorce and abortion. At the same time, Portuguese people demonstrated tolerance for sex minorities, gender equality, and growing request for participation in decision-making in economic and political life of the country. It can be explained by cultural heritage of the country that continues to shape the values system of the society. Long period of living under dictatorship and later distrust in country’s parliament (Casanova, 2018) gave birth to the desire for freedom but the traditional views were still alive.

The measurement of 2014 showed that Portugal stands at a crossroads since it moved to the center of the map – almost to the intersection of axes. However, taking into account the changes in the country, it has the potential to move in the direction of ‘Rational – Self-expression’ square where religion, traditional family values and authority are not in the priority. Portuguese people now live longer, marry and re-marry, plan their life calendars, give birth to fewer children, and live in single households (Viegas, Costa, 2000; Guerreiro, 2014).

Research based on the data of European Social Survey (2006) confirmed these changes. In minds of Portuguese modern generations, the importance of loving relationships, personal development, gender equality replaced the value of the traditional authoritarian, patriarchal family. The country experiences the advanced modernity (Guerreiro, Torres, Capucha, 2009).

#### 2.3.2.3. Welfare State Regime

Portugal can be referred to the Mediterranean welfare regime “with a social protection system that is underdeveloped or has shortcomings” (Guerreiro, 2014: 195). It is usually criticized for quite modest benefits and the distance between the welfare systems and potential recipients, many people due to the lack of information cannot receive benefits (Capucha, 2000).

Carolo and Pereirinha (2010) wrote that in Portugal, modest welfare expenditure (the percent of GDP) grew slowly but steadily during the New State period until 1973 with the

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<sup>2</sup> <http://www.worldvaluessurvey.org/wvs.jsp>

greatest growth rate at the end of the 1960s. Their statistical analysis revealed four stages (or phases) of welfare spending growth in the New State period and one more stage observed after the Revolution (Carolo, Pereirinha, 2010).

The first stage, existed from the creation of social insurance in 1935 till the end of the Second World War, was characterized by very basic coverage of the major classical social risks and social transfers for the working population (for instance, old age, incapacity and survival income transfers), people mainly relied on the so-called family welfare. The second stage that lasted until the early 1960s reflected the influence of generosity on the increase in social spending, expansion of material welfare coverage concerning the family and health. In the third stage, the Social Welfare Reform of 1962 nationalized occupational pension schemes. In 1969, old age pensions and family benefits for rural workers were introduced. The state made steps to provide population (including rural workers) with incapacity-related benefits, old age pensions, death and funeral benefits, family allowance and the complementary benefits connected with birth and breast-feeding. The fourth stage existed during the last several years of the New State filled the gaps in social protection and offered support to the rural population. Over the first and the second stages, responsibility for taking care of children was placed mainly on mothers, illegitimate children were less protected than those who were born inside the wedlock, extended family remained the main source of support for a person. Over the third and fourth stages, the state started giving modest support to the families.

The fifth stage of welfare spending growth went on until the early 1980s and was marked by the comparative universalization of the system. Carolo and Pereirinha called it the period of relative containment in comparison with the previous stages before democratization of the state. Health care coverage of nearly one-third of total social expenditure in 1973 formed the basis of the creation of the National Health Service in 1979. After the EU integration in 1986, the large-scale extension of welfare policy took place in Portugal (Carolo, Pereirinha, 2010). In parallel with these very briefly described changes, the family policy was transforming too. The modification of the Civil Code made in 1977 expelled the discrimination against children born outside marriage (Costa Pinto, 2011). Constitution of 1976 declared the indispensable role of the mother in rearing children, while the revision of 1982 highlighted equal obligations of men and women to their children that resulted in debates on professional participation of mothers and fathers (Costa Pinto, 2011). In 2001, cohabitations were made equal to marriages in terms of social support that partners and their children can get from the state (Guerreiro, 2014). The improved economic situation observed in this stage allowed new family support measures such as “the expansion of care services for children, the elderly and the handicapped, the incentives

allowing better work-family conciliation and the granting of fathers new paternity rights” (Costa Pinto, 2011: 178). In 2009, fathers were given ten days of leave paid by the social security system during the first month after the childbirth and ten more days of unpaid leave at any time of their partners’ maternity leave. These measures were implemented to stimulate the transition to parenthood and support children. Another set of social policy measures was introduced to protect children at risk.

#### 2.3.2.3. Policy of de-institutionalization of children at risk

There are some historical evidences on abandoned children in church-run founding homes in Portugal mainly under the guidance of priests or nuns (Kertzer, Brettell, 1987). Many of these children were offsprings of poor parents or women who had breastmilk run dry. In 1860s, the largeness of the problem of founding homes caused a general outcry against them, hence people were sure that foundling homes encouraged the practice of abandonment. Despite the interest in the topic, many details about life in residential care homes of the past remain unknown.

Historically, Santa Casa da Misericórdia de Lisboa, and the Casa Pia de Lisboa from the monarchic period of XV and XVIII centuries were responsible for many child care facilities in the Lisbon Metropolitan Area that is in the focus of this research (Rodrigues, Barbosa-Ducharne, 2017). Casa Pia de Lisboa was the largest institution aimed to support minors in risk by providing children with education from its foundation after the 1755 Lisbon earthquake. This support was particularly important along the XX century when the educational system of the country left much to be desired and the level of poverty was high. Casa Pia de Lisboa provided children from vulnerable families with opportunities to get secondary vocational or even university education with specializations of high demand that gave them an advantage over the peers. Research about three generations of Casa Pia students mentioned above showed that the organization brought up many outstanding people for Portuguese society and gave good life chances to children at risk (Maia et al., 2012). However, the social context of the country has changed, children are placed in residential care today for other reasons, and international experience shows that the institutions are not able to replace a family in childrearing (Aldgate, 1994; Mulheir, Browne, 2007).

In 1986, the Act was established to advocate that children had to be placed in family settings (Rodrigues, Barbosa-Ducharne, 2017). It has claimed that the care facilities must be small and place boys and girls together in urban areas for accelerating their integration. Later in 1990, Portugal became one of the first countries to ratify the United Nations Convention on

the Rights of the Child and included to the Constitution ensuring “special protection for children who are orphaned, abandoned or in any way deprived of a normal family environment” (Rodrigues, Barbosa-Ducharne, 2017: 357).

In 2008, Portuguese Minister for labor and Social Solidarity ran the DOM plan (Portuguese acronym for challenges, opportunities and changes) (Council of Europe, 2010). This project aimed to promote the rights of children and young people, contribute them with a safe and familiar environment ensured security, health, education, wellbeing, personal and social development needed for independent life (Institute of Social Security, 2007). The set of responses of care and social support for children and young people in danger includes Family Support and Parental Counseling Center (CAFAP- Centro de Apoio Familiar e Aconselhamento Parental), Street Team to Support Children and Youth (Equipa de Rua de Apoio a Crianças e Jovens), Family Accommodation (Acolhimento Familiar), Temporary Reception Center (Centro de Acolhimento Temporário), Home for Children and Youth (Lar de Infância e Juventude), and Autonomization Apartment (Apartamento de Autonomização) (Instituto da Segurança Social, 2018).

In 2011, 345 residential care institutions existed in mainland Portugal (Rodrigues, Ducharne, Del Valle, 2014). These institutions were distributed in 207 Homes for Children and Youth, 127 Temporary Reception Centers, 8 Autonomization Apartments, and 3 specialized shelters. These institutions work to protect almost 8000 children (ISS, IP, 2013). The distinctive feature of residential care institutions in Portugal is that 48% of them are still segregated by gender (Rodrigues, Ducharne, Del Valle, 2014). According to more recent data, the number of Residential Care facilities exceed 400 centers in 2016 (Rodrigues, Barbosa-Ducharne, 2017).

Researchers reported that contemporary Portuguese residential care homes follow the DOM plan and base their services on a family model with therapeutic elements (Rodrigues, Ducharne, Del Valle, 2014). Their characteristics are respect for each child, personalized care, close (attached and significant) relationships between caregivers and service users, assistance with integration into society, less than 12 children per house and an optimal number of caregivers. The review of the Portuguese Child Protection Law of 2015 changed the term “institutional care” into “residential care” for the linguistic reinforcement of the de-institutionalization process.

The dimensions of chrono- and macro-level subsystems illustrate the context for changes in matrimonial and reproductive behavior and differences between representatives of different generations of Portuguese society rather than distinctions in individual choices in life transitions (they are presented on the Line of the Portuguese society development, Appendix1). The

chances of an unproblematic transition to adult life and parenthood can vary depending on determinants of meso-level and micro-level subsystems.

### 2.3.3. Meso-level Subsystem

This section presents dimensions of the meso-level subsystem enabling a better understanding of Portuguese social context.

#### 2.3.3.1. Educational and Occupational structure

As it was mentioned above, the long years of dictatorship left Portugal with a comparatively high illiteracy rate equal to 25.6% in 1970; it decreased to 11% in 1991 (Nilsen et al., 2012). Due to these circumstances, education was a rather new experience for many families in the end of previous century since most young people's parents and grandparents had not had access to it.

Portuguese school system aimed to defeat social inequalities but became a mechanism that exacerbated regional inequalities by pushing the rural population towards the city because of closing schools or because rural education provided skills useless for local needs (Viegas, Costa, 2000). Those who did not move to urban areas, could simply leave school. In fact, the highest drop-out rates existed in the rural population. In addition to that, researchers noticed that education was socially selective at the turn of the XX and XXI centuries. For many social groups like poor, migrants (mainly Africans), and those who are less familiar with the culture of schooling, the education process became disturbing. Gradually, these shortcomings were levelled.

The continuing increase in the share of young people engaged in education and the following growth of the average qualification levels led to changes in occupational structure of Portuguese society. The percent of better qualified specialists (top managers, self-employed professionals, intellectual and scientific professions, technicians and middle management) in the occupational structure increased significantly from 1960s (Viegas, Costa, 2000). The contribution to this trend was also made by the state and private training programmes presented in the 1980s and involved both people who had already been in the market and young people in search of the first job. However, resources for family formation are considered difficult to obtain in Portugal even having stable job, so cohabitations as unions that require less responsibilities than marriages are more accepted among well-educated representatives of the society and urban settlements (Nogueira, 2015).

Described changes in education and occupation affected both men and women; they transformed transition to adulthood patterns (entry into labor market was delayed and demographic events were postponed) and some aspects of family life. If in the 1960s, the age-range for the most intensive participation of women in work was 15-19 years (before marrying and having children), the last census of previous century showed that this peak shifted to the age-range of 25-29 years (presumably, because of deferred responsibilities of mother and limited welfare benefits) (Viegas, Costa, 2000). It is worth mentioning here that the percentage of women in active employment nowadays remains high up to a relatively late age and the highest in Europe (Nilsen et al., 2012). In this regard, Portuguese families, and especially female representatives of families, need a balance between work and family, which can be promoted by an extended family or the state.

#### 2.3.3.2. Family Support or State Support

Due to traditions and economic situation of previous century, the majority of young Portuguese people preferred to live with parents until relatively late age, enjoying the benefits of so-called welfare family system that they left mostly for entering marital union (Guerreiro, Torres, Capucha, 2009). Young generations of the Portuguese are considered more innovative and open for leaving parental home for sharing housing with friends or a sexual partner. However, many of them still choose traditional way of initiating independent living after reaching the age of 29 years and still not because of educational purposes (Furlong, Cartmel, 2007; Eurostat, 2017). In rural areas, living as a couple in parental home is still common (Nogueira, 2015). Even after leaving family home and becoming parents, the Portuguese can rely on the support of extended family, including financial assistance. Support with care work is traditionally a female responsibility in the country. Researchers emphasized that these female kin networks function across generations and social classes in the Portuguese social reality (Nilsen et al., 2012).

In this sense, young people who for one reason or another are lacked extended family, cannot rely on comprehensive childcare support (Nilsen et al., 2012). Lone-parent households without kin network can find themselves in even more difficult situations. According to Capucha, increase in the overall numbers of lone-parent families corresponds to an increase in poverty amongst these families (2000). It raises the question about the circumstances of parenthood for the Portuguese with living in residential care background.

Contemporary system of Portuguese children at risk protection and their support in adult ages includes several steps. Mainly Homes for Children and Youth and Autonomization

Apartments can be considered as the instruments aiming to prepare youngsters for adult life and working on getting safe support network (Instituto da Segurança Social, 2018). Before the January of 2018, young people could rely on the state support until the age of 21 years; nowadays, this age is equal to 25 years (Instituto da Segurança Social, 2018). Youngsters have the right to use this support only during the duration of the educational or vocational training processes.

The specific objectives of Homes for Children and Youth are to satisfy the basic needs of children and young people, promote their overall development in conditions as close as possible to those of a family structure, ensure the necessary resources for personal progress in the dimension of education in cooperation with family, school, vocational training structures and communities (Instituto da Segurança Social, 2018). The research of Alves (2007) who monitored seven Homes for Children and Youth demonstrated that some of them could respond quite effectively to the needs of minors in terms of access to a sufficient training and education, and were close to the ideal of intervention. However, none of institutions could be considered totally adequate in terms of individualized intervention at the moment of her study. Recent research demonstrated that situation is improving, especially in terms of positive interactions between children and caregivers who guarantee a secure attachment (Rodrigues, Barbosa-Ducharne, 2017). Although work on exploring the voices of children at all stages of the alternative care process and implementation of mandatory initial professional training for caregivers is still required.

Autonomization Apartments, in their turn, give young people who reached the age of 15 years housing spaces to share with other young people and work on mobilization of responsibility, skills and potential to use available resources to enable them acquiring autonomy of life. Educators, social workers and psychologists accompany their young clients in the process of autonomization to minimize risks of social exclusion, provide support, including material and information one, for entry into the labor market, and organize specific training programs for all life occasions (Instituto da Segurança Social, 2018).

### 2.3.3. Micro-level Subsystem

Before describing the context of Portuguese society in micro-level subsystem, it is important to understand the role of other life course events in shaping family formation and transition to parenthood. In the discourse of Lahire, the sociological biography is the only instrument to grasp “the successive or combined effect of the different socialization frameworks frequented



by individuals” and “the experiences in the chronological order of their effects” (2017: 1). Biography involves more than just the basic facts like education, work, relationships, etc.; it portrays a person's experience of these life events. Here is its difference from trajectory that in its formal demographical meaning contains information only about life events, their sequences and timing. In this sense, the biography remodels connections between individual and other members of society, institutions and social contexts; it speaks for itself, while the trajectory usually requires more interpretations from the researcher.

All three subsystems described in previous subsections give to an individual the contexts for actions, for shaping his/her biography (or, in more narrow and simplified version, the trajectory). Socializing in these contexts, individual makes choices about the life events and time of their occurrence that, it turn, influences later events.

In Portugal, the typical sequence of transition to adulthood implies that the childbearing comes after finishing education, starting job and leaving parents (Nilsen et al., 2012). It means that professional, academic or lifestyle circumstances form conjugality and parenthood plans. Many Portuguese make family plans for the time in the future when they finally settle down (Guerreiro, Torres, Capucha, 2009). This settling down nowadays seems difficult without education, while previous generations, massively deprived of access to school, still could find job and become economically secure. Experts emphasized that “formal education or its absence has never had such a great influence on the trajectories, daily lives and projects of Portuguese youth as it does today” (Guerreiro, Torres, Capucha, 2009: 232). For example, dropping out of school and entering the labor market in early ages not only reinforce exclusion processes from institutions and modern authorities but also steals the opportunity to get high qualification, rely on better salary in future and plan family formation in a stable environment.

The system of education in Portugal does not offer study loan scheme (Nilsen et al., 2012). The decision to continue studying in this context is seen to be crucial since it shapes future life. The opportunity to get higher education depends on parental income and parents' attitudes towards studying. In case if parents are ready to pay, a young person usually lives with them until getting paid job of even until matrimonial union. If parents do not have an opportunity to pay but a youngster still wants to study, he or she can take evening classes and have a full-time job to afford the tuition fees. If a youngster does not want to attend university, he or she generally leaves home as far as finds employment in quite young age. These options obviously lead to different outcomes in terms of ages at family formation and transition to parenthood events. With a high degree of probability those who follow the first (long period of youth) and the second (early adulthood since they need to begin earning money quite early)

options would start the family later than those who choose the third one (early adulthood pattern).

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Nowadays Portugal is an example of a modern risk society with the pronounced features of SDT, deinstitutionalized life courses, Mediterranean historic marriage pattern, “Rationality – Self-expression” values profile (at least it moves in this direction), relatively modest in resources welfare regime, launched in 2008 children at risk de-institutionalization program, tradition to postpone leaving parental home. At the same time, Portugal in previous century looked quite different. It faced several decades of dictatorship, structured life with minimum opportunities for maneuvers, poverty, lack of a universal education system and welfare support, wars. This information gives grounds to assume that care leavers organize their transition to parenthood differently than the Portuguese without such background. From generation to generation and depending on social and economic context, as well as on policy, the role of residential care in the lives of care leavers was different. At the same time, more global trends like modernization of the society and SDT might influence all Portuguese resulting in a situation when family is a dismissed priority for all representatives of young cohorts until they reach a certain level of life stability not depending on where they grew up: in the family of origin or in the residential care.

## 3. Methodology

### 3.1. Research Design and Strategy

The aim of this research is to indicate the role of living in residential care in family formation and transition to parenthood trajectories of the Portuguese and evaluate the process of care leavers preparation for independent life. This aim is detailed in objectives: revealing normative and non-normative trajectories of Portuguese people using quantitative and qualitative data and methods of analysis; collating trajectories to find out problematic point and the factors of care leavers' better life outcomes; analyzing the process of young cohort of the Portuguese preparation for leaving care.

This research is conducted using the tradition of life course approach devoted to study of the order and the interrelations between different socio-demographic events (Mayer, 2004). Specialists in this research sphere work with both qualitative and quantitative methods (Giele, Elder, 1998). The research design includes several steps:

1. the research interest appeared as a synthesis of researcher's background in the life course sociology and observations during MFamily programme first semester internships in Centro de Acolhimento Quinta de São Miguel and residential care homes of Casa Pia de Lisboa;
2. during the course "Children in adverse life situations. Social work with children at risk and their families" in the University of Gothenburg, the research idea was fully formed under the influence of the lectures, course literature and independent immersion in the research topic;
3. a research project, plan and schedule were developed and proposed to the supervisor in the beginning of the fourth semester;
4. the theoretical base for the study was developed based on the resources of electronic libraries of ISCTE-IUL and the University of Gothenburg, works provided by the professors of ISCTE-IUL, University of Stavanger, the University of Gothenburg, and representatives of Santa Casa da Misericórdia de Lisboa and the library of the Centro Cultural Casapiano;
5. the database of the third round of European Social Survey for the quantitative part of the research was downloaded from the official website of the ESS-programme<sup>3</sup>;

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<sup>3</sup> <http://www.europeansocialsurvey.org/>

6. the method of qualitative data collection, sampling and guidelines for the interviews were chosen and amplified with advices of the supervisor;
7. after explaining the interests, design and research aim to the representatives of Santa Casa da Misericórdia de Lisboa and Casa Pia de Lisboa who became the key gatekeepers and authorization process in both organizations, the access to educators and several care leavers from young cohorts was gained. The access to the members of Associação Casapiana de Solidariedade (casapianos<sup>4</sup>) who represent older cohorts of the population was given without authorization process with the researcher's guarantees of respect to participants' confidentiality;
8. the qualitative interviews with care leavers and educators were collected in the end of January –beginning of May, consistent of 3 pilot interviews with male care leavers from older cohorts, 7 main biographical in-depth semi-structured interviews with men and women from older and young cohorts, 3 pairs of educators of Autonomization Apartments (one pair from Santa Casa da Misericórdia de Lisboa and two pairs from Casa Pia de Lisboa) engaged in the project of Autonomization Apartments; 1 informal interview with the representative of Associação Casapiana de Solidariedade who works in the association and was studying in Casa Pia de Lisboa and 1 additional informal interview with young man who was also studying in Casa Pia de Lisboa. Translator's services were used when it was necessary;
9. the information database of this research included quantitative data of the third round of European Social Survey harmonised by the researcher, observations on functioning of several residential care homes, qualitative interviews with educators, care leavers and eyewitnesses of life of children in the residential care transcribed by the researcher;
10. the quantitative data were analysed using cluster analysis and descriptive statistics methods while qualitative data were analysed using the method of lifeline analysis and content thematic analysis;
11. two dissertation seminars (in February and April) with the faculty representatives and regular meetings with the supervisor were held where the research progress was discussed.

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<sup>4</sup> Casapiano is a (former) student of Casa Pia de Lisboa.

## 3.2. Population

The population of Portugal is equal to 10,32 million inhabitants (World Bank, 2015). About 2 million are children and young people under the age of 19, of which 8,000 are growing up in residential care homes (Rodrigues, Barbosa-Ducharne, 2017). Recent data demonstrated that there are narrowly more boys (52%) than girls, and more children aged 12 or older (69%) in residential care homes (Rodrigues, Barbosa-Ducharne, 2017). Part of these young people annually leave care centers for independent life and some of them go to the autonomization apartments where they are allowed to live at the age of 15-21 years. In 2016, 4088 youngsters at these ages were living in residential care facilities and only 63 of them participated in the Autonomization project (in previous years this number fluctuated at the level of 31-56 participants) while others organized their lives independently (Instituto da Segurança Social, 2017).

The general population was achieved through the quantitative data of European Social Survey-Round 3, representative for all persons aged 15 and over (ESS Round 3, 2006). As it was mentioned before, Santa Casa da Misericórdia de Lisboa, and the Casa Pia de Lisboa are historically responsible for many child care centers in Lisbon region and both institutions offer the Autonomization housing and services that made them the most suitable gatekeepers for access to two specific groups of population of this research: care leavers and educators. Another organization where older representatives of studied population could be found was Associação Casapiana de Solidariedade that ensures social services to support the elderly including former students of Casa Pia de Lisboa.

## 3.3. Data

### 3.3.1. Objective 1

The first research objective referred to typical family formation and transition to parenthood trajectories of Portuguese population. It means that quantitative representative data were required. The only suitable accessible survey about life course events where Portugal took part was the European Social Survey (ESS Round, 3). This academically driven multi-country survey's main goal was to interpret changing values within Europe (ESS Round 3, 2006). The survey had several rounds but only the third one conducted in 2006 included questions about the organization of the life course in Europe. The third round covered 25 countries and involved random probability sampling, a minimum target response rate of 70% and strict translated

protocols (ESS Round 3, 2006). The one hour-long face-to-face interviews included retrospective questions on timing of life events, personal and social well-being and socio-demographic characteristics that made it usable for this research despite the year of fieldworks.

Initial database for Portugal contained 2222 cases. The years of birth varied from 1912 to 1991. As the second objective of this research concentrates on different generations of Portuguese men and women who lived in care and could tell their stories, it was decided to exclude respondents born before 1930. Attention was paid to respondents born between 1930 and 1989 (six cohorts: 1930-39, 1940-49, 1950-59, 1960-69, 1970-79, and 1980-89, consequently, six age groups at the moment of survey in 2006: 67-76, 57-66, 47-56, 37-46, 27-36 and 17-26 years old). Conclusions about the behavior of the youngest cohort were made with caution, since its representatives did not have the opportunity to complete the transition to parenthood by the time of the survey. The data from the reports of the Institute of National Statistics<sup>5</sup> of Portugal were used to complement the obtained estimates.

In the process of harmonization, respondents with missing dates of events and those who never lived with parents were excluded. The final working database included 1825 cases. The characteristics of the database and frequencies of men and women in different cohorts are presented in the Table below.

Table 3.1. Characteristics of the Working Database: ESS Round 3

<b>Cohort</b>	<b>Percent (%)</b>	<b>Gender</b>	<b>Percent (%) in Each Cohort</b>
<b>1930-1939</b>	16,4	Men	40,3
		Women	59,7
<b>1940-1949</b>	18,2	Men	36,3
		Women	63,7
<b>1950-1959</b>	14,5	Men	35,6
		Women	64,4
<b>1960-1969</b>	19	Men	41
		Women	59
<b>1970-1979</b>	19	Men	39,9
		Women	60,1
<b>1980-1989</b>	12,9	Men	46,2
		Women	53,8
<b>Total</b>	<b>1825 cases: 39,7% of men and 60,3 % of women</b>		

<sup>5</sup> <https://www.ine.pt/>

### 3.3.2. Objectives 2 and 3

#### 3.3.2.1. Sample Strategy

The second and third objectives of the research refer to family formation and transition to parenthood trajectories of people grew up in childcare homes, difficulties they face and factors of better life outcomes. As it was impossible to collect quantitative data comparable with data of ESS, the best option was to analyze the family formation and transition to parenthood trajectories of people belonging to this specific group of vulnerable population using biographical interviews. It helped to make an assumption about link between growing up in residential care institutions and life course events, their timing.

The interviews were collected using the method of the non-probability purposive sampling that referred to achieving people with characteristics relevant to the research questions in a strategic way (Bryman, 2012). In case of this research, the key characteristic was an experience of living in residential care for at least 3 years. Interviews with men and women from all six cohorts represented in the ESS-Round 3 were planned to be conducted with an assistance of the residential care homes professionals according to the life course approach Principle of Linked Lives with an assumption that for different cohorts the role of residential care varied due to different social contexts (theoretical sampling).

In the first step, the organizations were selected that potentially could provide the researcher with an access to informants: Santa Casa da Misericórdia de Lisboa and the Casa Pia de Lisboa. After the consultation with the representatives of the Casa Pia de Lisboa, it was decided to refer to Associação Casapiana de Solidariedade as an organization where the care leavers from older population could be found. In the second step, the researcher reached people whose contacts were obtained through the organizations. In the third step, the snowball principle started functioning and more care leavers were found through the network of participants.

In the process of the data collection, it became clear that care leavers from the three younger cohorts presented in the ESS-Round 3 could not be reached through the gatekeepers from mentioned organizations and the networks of informants that were already interviewed. It corrected the research strategy and, after discussing this issue with the supervisor, it was concluded to focus on the analysis of two groups of care leavers: from older (1930-59) and young (1990-99) cohorts.

### 3.3.2.2. Data Collection Method

It was decided to use the technique of the individual biographical semi-structured in-depth interview with accent on time of transition to parenthood trajectory events among care leavers from mentioned cohorts, as it was the best way to see the situation through the eyes of people of interest (Bryman, 2012). The interview guideline for care leavers (Appendix 2.1) includes six sections:

1. Identification information: pseudonym, sex, year of birth (data from the Micro-level Subsystem);
2. Childhood and years in the residential care: brief description of childhood, reason to live in care, years spent there, contacts with family members while being in residential care and their frequency (data from the Chrono-, Macro-, Meso-, and Micro-level Subsystems);
3. Education: level of education, timing of finishing education; specialization, help of residential care professionals with education (data from the Meso- and Micro-level Subsystems);
4. Job: first job and its timing, work trajectory, difficulties with getting job, help of residential care professionals with getting job (data from the Meso- and Micro-level Subsystems);
5. Family and Children: partnership; timing of first matrimonial union, parenthood, timing of the first childbearing, fears to start a family, experience of divorce (data from the Micro-level Subsystem);
6. Preparation for independence: preparation and support regarding education, job, partnership and parenting, gained skills for the independent life, feeling of being prepared for leaving care, advantages/ disadvantages of living in care, discrimination based on living in care, contacts with friends and professionals from care, frequency of contacts (data from the Chrono-, Macro-, Meso-, and Micro-level Subsystems).

The interviews duration varied from 40 to 70 minutes. All main interviews were recorded with a permission of participants.

### 3.3.2.3. Sample Overview

The sample of the care leavers consisted of 10 people (Table 3.2). The older male cohorts were represented by 5 men at the age of 63-80 years at the moment of data collection who spent in Casa Pia de Lisboa from 7 to 16 years living and studying. The older cohorts of female care



leavers were represented by 2 women at the age of 62-64 years who were living and studying in residential care homes (that also belonged to Casa Pia de Lisboa) from 8 to 15 years. Young cohort of care leavers was represented by 2 men and 1 woman at the age of 25-26 years who spent from 8 to 21 years (including 5-6 years of living in Autonomization apartments of Santa Casa da Misericórdia de Lisboa) in different residential care homes of Lisbon Metropolitan Area.

Table 3.2. Key Information about the Participants

Informant	Year of Birth	Period in Care	Ever Had a Partner/ Spouse	Matrimonial Status	Has at least 1 Child	Number of Children
<b>Lived and Studied in Care</b>						
Alberte (pilot int.*)	1938	7 years	Yes	Married	Yes	2
Jorge	1942	13 years	Yes	Married	Yes	2
Filipe	1948	9 years	Yes	Married	Yes	2
Julian (pilot int.)	1950	10 years	Yes	Married	Yes	3
Madalena	1954	15 years	Yes	Divorced	Yes	1
Eduardo (pilot int.)	1955	16 years	No	Single	No	-
Catarina	1956	8 years	Yes	Single	No	-
Marco	1992	16+5 (aut. ap.**)	Yes	Single	No	-
Sara	1992	2+7 (aut. ap.)	Yes	Cohabited	Yes	1
Jose	1993	12+6 (aut. ap.)	Yes	Cohabited	No	-
<b>Only Studied in Casa Pia</b>						
Pedro (pilot int.)	1956	10 years	Yes	Married	Yes	2
Antonio	1992	12 years	Yes	Dating	No	-
* - pilot interview; ** - years spent in the autonomization apartment						

Interviews with men from older and young cohorts who only studied in Casa Pia together with institutionalized children gave additional perspectives on lives of people from this specific group of population.

### 3.3.3. Objective 4

The last objective of the research was to bring the light on the process of the young Portuguese preparation for leaving care through Autonomization apartments. Semi-structured interviews with educators who are engaged in this process were chosen as a method of data collection. Santa Casa da Misericórdia de Lisboa and Casa Pia de Lisboa recruited participants from their employees. The sample included 2 professionals from the former institution and 4 from the latter one. The interviews were organized as discussions in small groups that lasted 60-120 minutes. Strengths, weaknesses, opportunities and threats of practices used in the organizations where professionals work were revealed (Stoecker, 2013). In addition to this, educators were

asked about the general life outcomes of care leavers in the dimensions of education, job, partnership and parenthood (Appendix 2.2).

### 3.4. Methods of Analysis

#### 3.4.1. Objective 1

In recent years, there has been a growing interest in the study of life course trajectories and classifying individuals according to them by using cluster analysis method (Mayer, 2004). ESS-Round 3 contains the years of such events from respondents' life trajectories as parental home leaving, first job, first cohabitation, first marriage, giving birth to the first child, it is also possible to trace the educational paths of respondents. The same events and their timing were in focus of the qualitative part of the research.

To reveal family formation and transition to parenthood trajectories of Portuguese people, cluster analysis with the ages at such family formation events as first cohabitation, marriage, childbearing as variables was applied. 16 possible scenarios of family formation and transition to parenthood trajectories (or absence of starting a partnership and giving birth/ fathering a child) are presented in the Table 3.3.

Table 3.3. Scenarios of Family Formation and Transition to Parenthood Trajectories

<b>Nº</b>	<b>Combination</b>	<b>Explanation</b>
1	0	Nether matrimonial, nor reproductive events
2	Coh	Only cohabitation, no children
3	Mar	Only marriage, no children
4	Chi	No unions, childbearing
5	CohMar	Cohabitation, marriage, no children
6	MarCoh	Marriage, cohabitation, no children
7	CohChi	Cohabitation, childbearing
8	ChiCoh	Childbearing, cohabitation
9	MarChi	Marriage, childbearing
10	ChiMar	Childbearing, marriage
11	CohMarChi	Cohabitation, marriage, childbearing
12	CohChiMar	Cohabitation, childbearing, marriage
13	MarCohChi	Marriage, cohabitation, childbearing
14	MarChiCoh	Marriage, childbearing, cohabitation
15	ChiCohMar	Childbearing, cohabitation, marriage
16	ChiMarCoh	Childbearing, marriage, cohabitation

However, according to the Principle of Timing of the life-course approach, this number of trajectories is not final, since it is important to take into account the ages at analyzed events (Elder, 1998). In other words, the trajectory “Early marriage, childbearing” with a minimal

protogenetic interval is not equal to “Late marriage, delayed childbirth”, since these trajectories represent different social contexts. It is worth reminding that these combinations of family formation events worked as the frameworks for other transition to adulthood events (leaving parental home, first job, finishing education). For each cluster, the mean and median ages of every event were calculated to visualize the typical trajectories of family formation and transition to parenthood or lifelines (Nilsen et al., 2012). Lifeline has been chosen as a technique that reflects sequencing and timing of the key events in the trajectories.

The next step of the analysis was to trace the distribution of the trajectories among men and women from 6 cohorts using descriptive statistics in order to reveal the differences.

### 3.4.2. Objectives 2 and 3

The qualitative data were visualized as lifelines for all participants. For this purpose, each informant was offered to answer the questions about the years of key life events. Obviously, it is impossible to compare transition to parenthood trajectories of Portuguese people with and without leaving residential care experience in statistical way in this study. However, it is possible to reveal problematic transition points for care leavers, finding out what trajectories care leavers follow, what meaning they give to the key life events. In addition to the lifeline analysis, the narratives of Portuguese care leavers were analyzed using thematic content analysis. This method was considered useful for examining the perspectives of informants to distinguish similarities and differences in obtained information (Nowell et al., 2017). This moment was vital for this research since the information about the life outcomes of care leavers was collected from both care leavers and educators.

In addition to dimensions that were identified by the author on the stage of the guideline development, other dimensions appeared from narratives (Table 3.4).

Table 3.4. Dimensions of Analysis Included in Guideline and Emerged during the Interviews with Care Leavers

<b>Dimensions</b>	<b>Categories</b>	<b>Level of analytical model</b>
<b>Planned and included in guideline</b>		
Childhood and years in the residential care	Place of birth Family composition Reasons to enter residential care Years spent in residential care Contacts with family members while living in residential care	Meso- and Micro
Education	Level of education Specialization Years in education Support of residential care professionals with education	Meso- and Micro
Job	First job Work trajectory Difficulties with getting job Support of residential care professionals with job	Meso- and Micro
Family and Childbearing	Partnership formation Entry into cohabitation/ marriage Childbearing Number of children Fears to start family and giving birth/ fathering Union dissolution/ divorce	Micro-
Preparation to leave care	Practices for preparation for leaving care Skills for independence Feeling prepared for independent life Advantages of living in care	Meso-
Contacts with people from residential care	Contacts with other care leavers Contacts with residential care professionals Frequency of contacts	Meso-
Other people's perception of children in care	Discrimination Stereotypes Positive distinguishing among others	Meso-
<b>Appeared naturally</b>		
Social context	Situation in Portugal and going to residential care Impact of historical events on participant's decisions	Chrono- and Macro-
Resilience	Participant's strength Obstacles participants faced and overcoming these obstacles	Micro-
Children's success	Children's education Children's place of living	Micro-

Conclusions about the problems that care leavers face were triangulated with the observations of educators about the life outcomes of their service users.

### 3.4.3. Objective 4

Data collected from educators was interpreted using basic SWOT analysis technique (strengths, weaknesses, opportunities, and threats) (Stoecker, 2013). Information about organizations'

activities on preparing vulnerable groups of adolescents for leaving care and their life outcomes was in the focus. In addition to four SWOT dimensions, such topics as factors of care leavers' better life outcomes, general trends in care leavers' education, occupation, family formation and childbearing were discussed.

### 3.5. Ethical Considerations

The main ethical problem arose because of sensitive questions about years spent in residential care homes. Obviously, they could remind the participants of unhappy years of their lives and difficulties they faced (Hydén 2013; Munro, Holmes, Ward, 2005). It required delicacy and efforts on convincing them in the importance of the information they own for the well-being of future generations of vulnerable children in order to prevent them from feeling stigmatized or ashamed (Liamputtong, 2011). As it was hard to avoid introduction to their lives, their peace of mind and well-being were safeguarded and respect was expressed. Some researchers notice that talking about a traumatic experience has the potential to heal (Hydén, 2013) so there was a hope that the interviewees could get some moral benefits participating in this study.

The second ethical consideration concerned the confidentiality and risks to professionals from organizations working with vulnerable groups of population (Liamputtong, 2011). Their answers were anonymized to protect them from being harmed and exploited (Bryman, 2012).

The research interviews deserve to be discussed in terms of a power relation between informants and the researchers. Despite the common point of view that informants in social research, and in social work ones in particular, giving consent to be interviewed find themselves in vulnerable position, situation can be quite the reverse (Hydén, 2013). In this study, the informants were in the dominant position. Understanding this circumstance together with ensuring absolute confidentiality by giving them to sign informed consent forms helped participants feel more secure and confident (Bryman, 2012). The fact that researcher was a foreigner and did not speak Portuguese consolidated these positions. Informants also expressed their surprise in the foreign researcher's interest in the topic. They saw the research useful, admitted the access to informants was difficult to gain, admired researcher's insistence and tried to help with advice. In addition to that, they gave thick description of the historical and cultural context of their lives to give the researcher an idea of what happened in Portugal in different important moments of their lives (Geertz, 1973).

The importance of physical spaces in offering different discursive spaces is also worth mentioning (Hydén, 2013). One-on-one interviews were taken in places where participants felt

safe and scheduled at their convenience. Some interviews required the help of the translator who also guaranteed full confidentiality to informants. Pilot interviews took place in the Associação Casapiana de Solidariedade, two interviews were conducted at participants' homes (one of them in the presence of the informant's wife who helped to remember biography details), three more participants chose cafes for conversations. The rest of informants expressed a desire to come to ISCTE-IUL and one of them mentioned that he preferred to avoid discussing the years spent in care in the presence of family members. Group discussions with social workers took place in their organizations.

### 3.6. Difficulties and Limitations of the Study

As the majority research in social science, this research had some limitations. First one concerned the year of ESS-3 data collection that is the most recent one about life course events of Portuguese people that the researcher could gain an access to. This round of the survey was conducted more than ten years ago. Some representatives of the youngest cohort could not complete transition to parenthood to 2006. It caused a need to work with censored data and lacked an opportunity to evaluate changes in transition to parenthood trajectories among cohorts. Moreover, it complicated the comparison of trajectories of the Portuguese with and without living in residential care history as the qualitative interviews were collected 12 years after the quantitative ones.

Second one was language barrier that limited one-on-one interviews with some participants. The only solution was to work with a translator. It could create bias for the research and lead to missing information. It particularly concerned the quality of life course interviews interpretation that was supposed to touch the factual events in the care leavers' lives, the meaning these events had for them, and the way the stories were told (Nilsen et al., 2012). Obviously, translation could not reflect all three elements.

Third one applied to time. As only five months were given for this research, interviews with 10 care leavers and 3 group interviews with educators were collected and analyzed.

Fourth, complications were faced in getting access to participants: both care leavers and educators. Despite the fact that organizations are associated partners of MFamily programme, the authorization process for research support took several weeks. The initial research plan was to recruit informants from different cohorts of the population. However, studied reality made its own adjustments. As informant from older cohorts mentioned, young people immediately after leaving care prefer to avoid contacts with the representatives of their lives in care,

concentrate on shaping their trajectories in the dimensions of education, employment and identity. Later, often at the age of 50, achieving some stability, they start to analyze their life courses, the role of residential care, and think about contacts from childhood:

Care leavers start their life projects and it creates an age gap between 16-17 when they have nothing and 50 when they reach stability and gain something to be proud of. Casa Pia helped a lot but it's important to demonstrate what a person did by himself, what he won. If a person didn't achieve a lot, he prefers not to show up (Pedro, 62 y.o., studied in Casa Pia for 10 years, works in Associação Casapiana de Solidariedade).

This behavior pattern revealed by the informant, who works in the Associação Casapiana de Solidariedade, made it impossible for the researcher to gain the access to informants at the age of 30-50 years. Before this age-range, care leavers are visible for educators (who are quite young and had time to work only with young cohorts) and after they appear in the organizations of former residential care students.

Fifth limitation concerned the biases in the sample. As it was mentioned in previous paragraph, care leavers appear in the organizations like the Associação Casapiana de Solidariedade if they achieve something they can be proud of:

People in Associação Casapiana are those who reached a certain degree of success. Some of them who had difficulties never show up. There are also another kind of former casapianos. Typical representatives who can be characterized as cases of middle difficulty. They did not have the luck and don't feel easy to compare themselves with others (Eduardo, 63 y.o., 16 years in residential care).

It means that people from older cohorts in the sample are those who were successful in life. They cannot be considered typical representatives of the studied group of population. Another bias concerned the accessibility of aged female care leavers. It was said that women were more traumatized in residential care institutions in previous century:

The life of girls in Casa Pia was hard, even harder than of boys. I can tell you that my mother bought some clothes for my sister and she was not allowed to wear it there. She doesn't like to speak about it, it was very traumatic. We speak about everything but not about that period, not even at home (Filipe, 70 y.o., 9 years in residential care).

Moreover, institutions of that time were segregated by gender and Associação Casapiana de Solidariedade is the place where mainly men appear:

Last Sunday it was a big party in the restaurant. One former casapiano who is about 80, who lived in the US and became very rich, he invited us. We were maybe 90 previous

students and he invited us to lunch. (...) Among these 90 people, we were only 2 girls from my school (Catarina, 62 y.o., 8 years in residential care).

Collecting interviews with female care leavers from young cohort was also problematic. Interviews with 2 young women were arranged, but they did not appear at the appointed time and stopped answering calls and messages. The author is not aware of the reasons of such behavior.

This research reported the experiences of 10 care leavers and 6 professionals that is not enough to generalize the findings to the general population of care leavers and educators from Autonomization apartments in Lisbon Metropolitan Area. The research questions could be deeply investigated through a quantitative approach with random sampling. However, the research sketched a quite comprehensive picture of the studied piece of social reality from the perspectives of different actors involved such as young people themselves and professionals. This picture is presented in the next chapter of this work.



## 4. Findings and Analyses

This chapter gives the answers to research questions and is organized in accordance with them. First, the typical trajectories of Portuguese people without the experience of living in residential care are presented. Second, the lifelines of care leavers are given. Third, the model of informants' transition from childhood to adulthood is shown. Fourth, strengths, weaknesses, opportunities, and threats to the preparation of young care leavers who participate in the project of Autonomization Apartments are analyzed.

### 4.1. Normative Family Formation and Transition to Parenthood Trajectories in Portugal

#### 4.1.1. General Description of the Trajectories

To identify family formation and transition to parenthood trajectories of Portuguese people, cluster analysis with the ages at the first cohabitation, marriage, childbearing as variables ('0' if no event) was applied. The author used hierarchical method of inter-group relations with the square of the Euclidean distance for determining the optimal number of clusters and the K-means method at the end of the procedure. As a result, 9 groups of the Portuguese according to trajectories they chose were revealed (Table 4.1).

Trajectories "Early marriage, childbearing" (38%) where the average ages at first marriage and first childbearing are equal to 20,5 and 22,7 years respectively, and "Late marriage, childbearing" (21%) where these ages are equal to 27,5 and 30,3 years became the most common. 59% of the respondents of ESS-Round 3 chose them (Table 4.1, Figure 4.1). 17% of respondents followed the trajectory "No family formation events". Such a high percent can be explained by the behavior of the youngest cohort representatives who did not have time to start matrimonial and reproductive events by the moment of data collection in 2006.

Next two comparatively common trajectories are "Early cohabitation, marriage, childbearing" (6%) and "Late cohabitation, marriage, childbearing" (5%). They have identical sequence of events, but differ in the time of their occurrence. Due to the limited data (the question about the partner was not asked in the process of ESS-Round 3 data collection), it is impossible to say exactly whether a marriage was made with the same partner as the previous cohabitation or with another one.

5% of respondents followed the trajectory "Marriage, no children" where an average age at marriage was equal to 26,8 years. The remaining trajectories received a response less than

5% each: “Cohabitation, childbearing” (4%), “Cohabitation, no children” (3%), “Cohabitation, marriage, no children” (1%). These results do not contradict the conclusions about limited pluralization of family trajectories in Portugal obtained by Ramos on the data of another survey (2016). In general, 64% of the sample preferred to start family life with marriage as more traditional matrimonial event, while 19% formed the family in a more modern way living together in a cohabitation (63,1% of them entered marriage afterwards though).

Analysis of occurrence of other transition to adulthood events in the context of described trajectories confirmed that Portuguese people preferred to enter first matrimonial union of any type and give birth to the first child after entering the labor market (Table 4.1, Figure 4.1). They started the first job quite early in their lives. The representatives of two dominant trajectories and the trajectory “Early cohabitation, marriage, childbearing” demonstrated quite short intervals between leaving parents and first matrimonial union which can mean adherence to a more institutionalist ideology of the passage to conjugality, while the dilation of the transition that is observed in case of other trajectories reveals flexibility and de-standardization of conjugal paths. (Ramos, 2016).

The respondents declared rather diverse number of years of full-time education completed from median of 4 years for those who followed the first and the second trajectories to 11-12 years for those who chose the trajectory “No family formation events” and two last trajectories. It can be an indicator of prevalence of these trajectories in different cohorts since, as it was mentioned in the second chapter, older cohorts had less opportunities for getting education than younger ones did. The intergenerational analysis clarifies the situation. One way or another, the following pattern that exists in many European countries is traced in Portugal: the longer is a period of education, the later in life the transition to parenthood tends to occur (Nilsen et al., 2012).

Table 4.1. Normative Family formation and Transition to Parenthood Trajectories of Portuguese People

	Age at first cohabitation	Age at first marriage	Age at first childbearing	Age at leaving parents	Age at first paid job	Years of full-time education completed	Number of cases	Percent
	Mean (Median), years							
Early marriage, childbearing	-	20,5 (21)	22,7 (23)	18,9 (20)	14,1 (14)	6,1 (4)	690	38%
Late marriage, childbearing	-	27,5 (26)	30,3 (29)	22,8 (25)	16,2 (16)	7,2 (4)	387	21%
No family formation events	-	-	-	-	11,7 (16)	10,4 (11)	308	17%
Early cohabitation, marriage, childbearing	20,0 (20)	20,6 (21)	21,5 (22)	18,3 (19)	14 (15)	7,2 (6)	109	6%
Late cohabitation, marriage, childbearing	25,9 (26)	28,0 (26)	29,6 (29)	22 (23)	16 (17)	8 (8)	96	5%
Marriage, no children	-	26,8 (25)	-	22,8 (23)	15,3 (17)	9,2 (9)	85	5%
Cohabitation, childbearing	23,8 (23)	-	24,5 (24)	19,6 (21)	17,7 (18)	9,2 (9)	66	4%
Cohabitation, no children	24,8 (25)	-	-	21,4 (23)	14,9 (18)	12,3 (12)	58	3%
Cohabitation, marriage, no children	25,4 (26)	27,2 (27)	-	21,8 (21)	14,1 (17)	10,8 (12)	26	1%

**Source:** the calculations and the design of the trajectories were made by the author based on ESS-Round 3

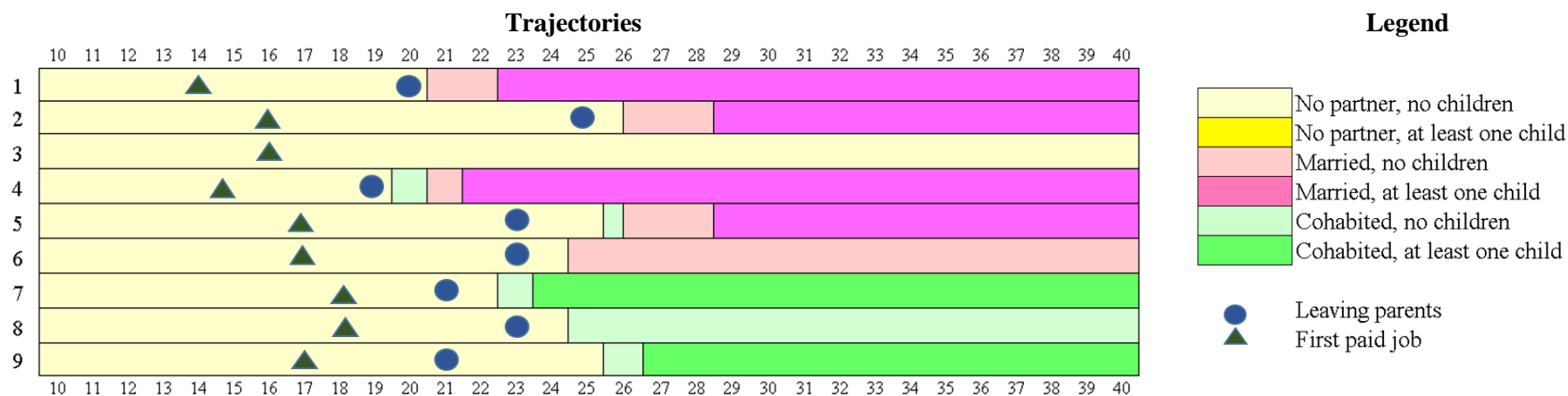


Figure 4.1. Family Formation and Transition to Parenthood Trajectories in the Context Other Markers of Adulthood

**Source:** the calculations and the design of the trajectories were made by the author based on ESS-Round 3

### 4.1.2. Family Formation and Transition to parenthood Trajectories: Intergenerational and Gender Perspectives

Trajectories "Early marriage, childbearing" and "Late marriage, childbearing" were prevalent in three older cohorts where more than 70% of men and women followed them (Figure 4.2). The difference was that men preferred to start family formation later than women did. This trend was also preserved for trajectories started with cohabitation that were not that rare: late start was an attribute of males' trajectories while earlier entry into matrimonial union of any type was more often chosen by female population in the ESS-Round 3 sample. This finding is consistent with the description of 'Mediterranean' type of marriage (Kertzer, Brettell, 1987) historically formed in the country and mentioned in the second chapter of this work.

As it was expected, the high percent of those who followed the trajectory with no matrimonial and reproductive events was a result of calendar effect for young cohorts. For respondents from three older cohorts the proportion of people who had never had a family did not exceed 7%. This share in the oldest cohort of men is equal to 0 in the sample that can be explained as the aftermath of the Overseas War of 1961-74 when the proportion of men presented in the country decreased caused by the request to go to Portugal's African colonies and all remained found partners or as a survivorship bias.

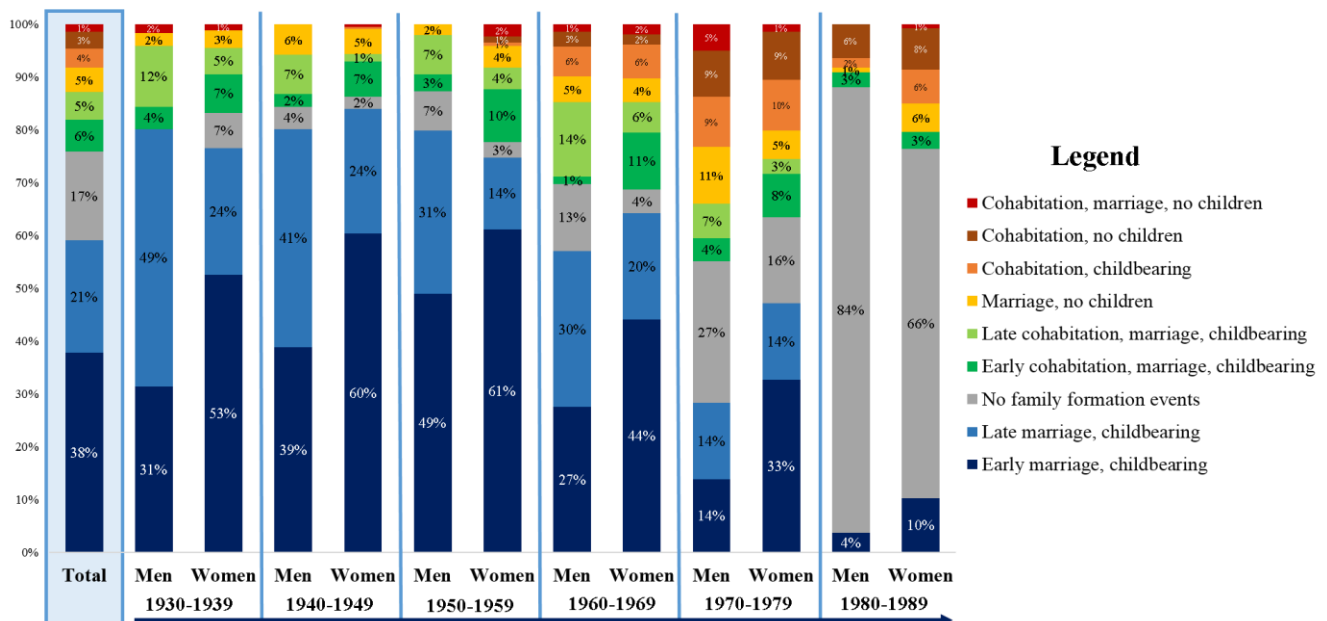


Figure 4.2. Family Formation and Transition to Parenthood Trajectories in the Context of Gender and Cohort

Source: the calculations were made by the author based on ESS-Round 3

The family formation and transition to parenthood trajectories of three younger cohorts look more diverse comparing to older cohorts: alternative trajectories crowd out the traditional ones. Trajectories started with cohabitation that worked as the first stage before official marriage or as an independent union with giving birth to a first child, were becoming more prominent. This trend can be the result of recognition of children born outside the wedlock and shifts in values of the population from Traditions to Rationality and from Surviving to Self-expression.

The intergenerational distribution of family formation and transition to parenthood trajectories of the Portuguese is connected with the distribution of revealed trajectories among different educational groups of population because of the profound changes in the educational structure of society along analyzed cohorts. The trajectory “Early marriage, childbearing” is more common for people with less than lower secondary education and less common for people with Tertiary education completed (Appendix 4.1). The trajectory “Late marriage, childbearing” is least common for people with Upper secondary education completed. The trajectory “No family formation events” that mainly representatives of young cohort followed, since they did not have enough time to start family by the moment of ESS-Round 3 data collection, was more common for people with Lower secondary education completed or higher and less common for people with Less than lower secondary education. As it was presented in the second chapter, men and the representatives of young cohorts had more opportunities to get higher education and became highly-qualified employees than their predecessors, especially female ones, did. This fact explains association between the level of education and chosen trajectory where the gender and belonging to cohort act as mediators and indicators of social changes.

The revealed trends in matrimonial and reproductive behavior could be relevant for all groups of Portuguese population including care leavers since they were socializing in the same social space as people without similar experience. The next section of this chapter gives an overview of trajectories of this study participants.

## 4.2. Non-normative Family Formation and Transition to Parenthood Trajectories in Portugal: an Overview

A sample for this part of the research consisted of 10 informants: 7 men (3 of them were participants of the pilot part of the study) at the age of 25-80 years at the moment of data collection and 3 women at the age of 26-64 years. This subsection aims to provide the reader

with details about the informants’ trajectories to adulthood with childbearing as its main marker. Informants’ narrations were summarized, visualized in the form of lifelines, and presented bellow (Figures 4.3-4.12). The lifelines of care leavers from older cohorts were observed through the age window of 0-40 years, while the lifelines of young participants were presented entirely. For contextualizing the trajectories of the gender-cohort groups that informants from older cohorts belong to, the most common trajectories (that received at least 10% support) were provided in the Appendix 4.2.

Alberte was born in Algarve area in 1938. Because his family was big and very poor, he was sent to residential care of Casa Pia de Lisboa when he was 10 years old. That time, there were only boys in the institution, about 500 of them. He was living in the residential care for 5 years and studied accountancy in Casa Pia for 4 more years. Contacts with the family were rare. After that, he went to the university but did not finish it because could not obtain classification and had to search for a job. He was first employed at the age of 21 and since then never had problems with employment. From 1959 to 1961, he was in the military services in Africa, in the north of Angola. He became a captain and was commanding the army in an isolated place for 2 years. After coming back, he got married at the age of 23, has never been divorced. In a year after marriage, his first child was born. Alberte has 2 children and 4 grandchildren. He maintains relationships with people from Casa Pia. They still have meetings every year.

Alberte’s family formation and transition to parenthood trajectory looks very similar to the most common for his gender-cohort group trajectory “Early marriage, childbearing” (61% of men born in 1930-39 presented in ESS-Round 3 followed it) (Appendix 4.2). However, Alberte spent more years on education and started his first job later than male representatives of his age group did (on average, they had 4 years of full-time education and started the first job at the age of 14).

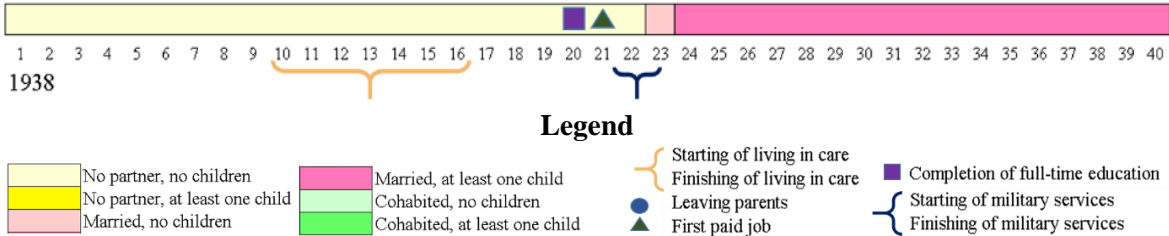


Figure 4.3. The Lifeline of Alberte

Jorge was born in 1942 in Lisbon area. He entered the institutional care of Casa Pia de Lisboa at the age of 3 because his parents were the victims of tuberculosis. He went through different homes of Casa Pia. His father died when he was 6 and the mother died when he was 20 years old. Jorge has a brother who was 5 when they were institutionalized. They resumed the contacts with the mother when Jorge was 14 but could not see her very often. However, his mother’s friends supported him during years he spent in care and after it. When he was 20, his father’s family appeared in his life and they are still very close. Within the school years in the process of getting a professional education, he got the profession of a carpenter but had to change to metal work. When he left school at the age of 16, he worked in the airline company. He had a direct transition from Casa Pia to the first job because his professor had contacts in the company where he worked and helped Jorge with employment. He always felt supported by the institution representatives and friends from that time in terms of employment. He was sent to Africa but as a worker rather than a soldier. In Kenia, Jorge got a disease, had to come back to Portuguese hospital where he met his now-wife. They got married when he was 28 and gave birth to 2 children, the first one was born a year after marriage. He still keeps in touch with friends from Casa Pia, they meet quite often.

Jorge’s family formation trajectory that can be called “Late marriage, childbearing” is quite typical for his gender-cohort group, 28% of men born in 1940-49 followed it. As well as Alberte, Jorge spent more years in education and started his first job later than male representatives of his age group did but the differences are more modest than in Alberte’s case.

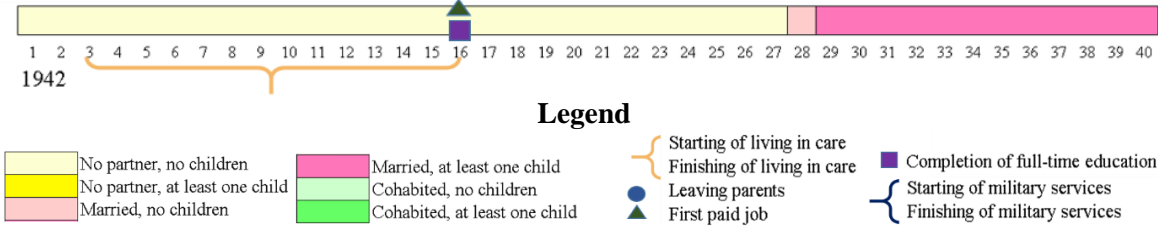


Figure 4.4. The Lifeline of Jorge

Filipe was born in 1948 in a countryside. His father died when the boy was 3 years old and the family came to Lisbon. He entered Casa Pia because, after the war, people were poor and his mother could not afford raising Filipe and his sisters alone. There were only two places in Casa Pia, so his mother had to choose who she could send to residential care. Filipe was institutionalized at the age of 7 and spent 9 year in care. He did not like living there because of punishments and constant control. The mother visited him every weekend. He spent every

summer with the sisters and grandparents in the countryside. Filipe decided to study hard in order to leave Casa Pia as soon as possible and mastered the curriculum in 5 years, while other boys needed 9 years for that. Psychological tests helped him to choose the profile of education; Filipe took the course in accounting. He left Casa Pia immediately after the graduation. Due to his good results, Casa Pia offered him a scholarship but he refused it because of unwillingness to stay in the institution. He finished Casa Pia on the 31st of July of 1964 and, on the 1st of August, he started working in an accounting company without the support of people from the institution. He worked 8 hours per weekdays, 4 hours per Saturday and combined work with evening classes in the university where he was specialized in economics. Filipe spent 2,5 years in Africa, Angola. He finished his military services in March of 1974, on the 25th of April, the Revolution happened and the war finished. After coming back to Portugal, he started the career in IT. In 2 years, he met the future wife during vacations at the place where he was born. He was 28, they got married immediately. His life was stable and he was happy to have a family. 2 years after, his first son was born and, in 7 years, he fathered the second one. Filipe keeps in touch with friends from Casa Pia.

Filipe’s trajectory can be characterized as “Late marriage, childbearing” that 28% of his gender-cohort group representatives followed. However, he entered marital union and fathered the first child 2 years later than average men followed the same trajectory. Filipe was first employed later than his peers, continued his education in parallel with working and became more educated than the majority of Portuguese men of that time.

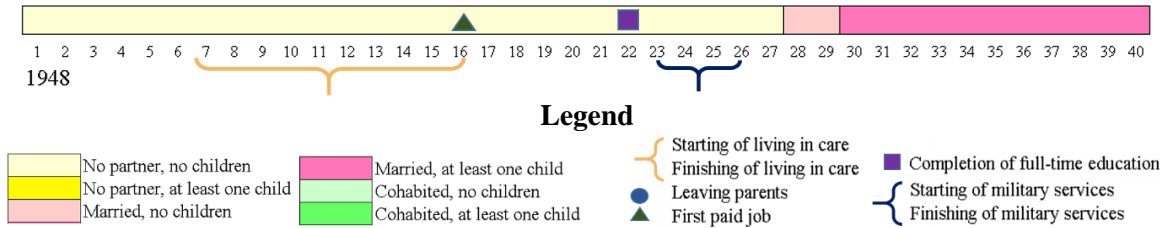


Figure 4.5. The Lifeline of Filipe

Julian was born in 1950 in a small poor village several kilometres from Lisbon. His mother worked for the local priest and he sent Julian and his brother to Casa Pia. That time, children went to Casa Pia because they did not have families, because their families were poor or because the village authorities saw the potential in them. Julian did not know what was the real reason of sending him to the institution. He jokes that the priest wanted to give their village a chance to live in a piece without him and his brother. He started Casa Pia at the age of 9 and spent there



10 years. These years, their mother visited them from time to time. Then he was in the army for 3.5 years at the age 20-23 years. In parallel, he got married at the age of 22 and his first child was born when he was 23. He met the wife at a dance party. Young people of that time took the advantage of the war in Africa and lack of men in the country. They had more options and chances in the marriage market. Julian is still married. Although he has 3 children and his wife is not the mother of all of them. He studied electronics and thermodynamics in 1974-79. The first job that he found without any help from Casa Pia professionals was in the area of his specialization. Julian keeps in touch with casapianos friends.

The trajectory of Julian can be classified as “Early marriage, childbearing” that got 33% support among men born in 1950-59 without an experience of living in residential care. In contrast to them, Julian finished the full-time education and started the first job after first matrimonial and reproductive events. In his case, this unusual sequence of transition to adulthood events was the result of years spent in the military services after leaving Casa Pia (he served in the army intermittently). As well as other casapianos, he got better education than the majority of his peers.

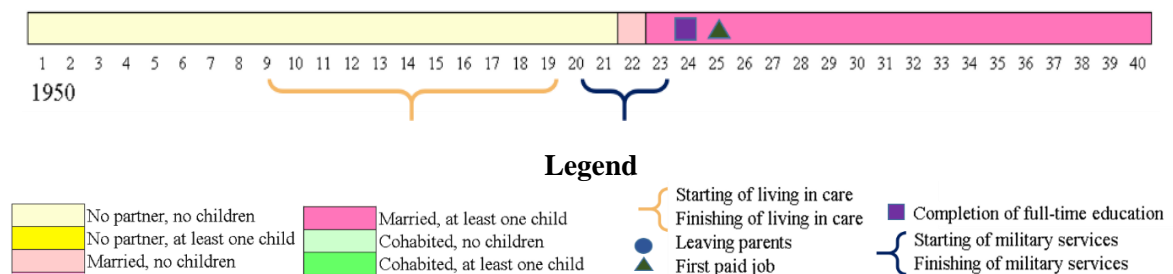


Figure 4.6. The Lifeline of Julian

Madalena was born in 1954 in the Lisbon area. She was sent to residential care at the age of 2 years because of the epidemic illness in Portugal that made her mother go to the special hospital in the North of the country. She has a brother and sisters. During the years in the institution, her mother came to see her at least once a month. When Madalena turned 16, she escaped from the institution. She decided to go home to live with her mother, stepfather, brother and sisters. Over a short period of time, she realized that she wanted to live by her own, have her own house. For 16 years old girl of that time, the only solution was to get married. It was not easy but finally her parents gave a permission. She got married at the age of 17 and got divorced at 18, because she wanted to work, have home rather than to be married. For the first year of marriage, her

husband was at the African war, she felt free and could start working at the age of 17 with the help of the teacher from residential care who she treated as the father. After the husband’s coming back, she asked for the divorce. However, they met from time to time and, when Madalena was 20, her daughter was born. The elder sister, with whom Madalena has special emotional connection, helped her with childrearing. Until the age of 15, Madalena’s daughter was living with aunt and grandmother, because Madalena was always at work. She was working at one organization all her life and rose from a nurse to the high administrative position. For several years, she combined parental responsibilities with studying in nights and working. She finished upper-secondary education in finance and accountability at the age of 22. At the age of 24-25, Madalena got married again and the marriage was lasting for 7 years. They got divorced because she was too independent and did not want to have more children. Later, she had several romantic relationships without living together. Madalena keeps in touch with her friends from residential care institution; she treats them as family members.

The “inconsistent” trajectory of Madalena can be hardly called common. She got married quite early with the only goal: to be independent, and her transition to motherhood that happened after the divorced was not planned or desired. Madalena could deal with motherhood only because of her female kin network. She got education and made a successful career not typical for Portuguese women of that time.

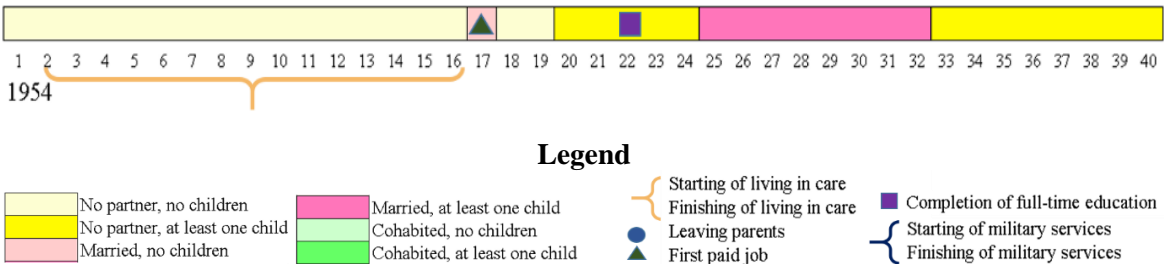


Figure 4.7. The Lifeline of Madalena

Eduardo was born in Cape Verde in 1955. It was not his decision to move to Portugal. He came with religious people who took responsibility for him and wanted him to study. He lived in Casa Pia since he turned 9 years. He did not keep contacts with people from Cape Verde and considered Portugal his home country. Eduardo finished commercial school, technical institute and got university degree in economics. He was not in a hurry to start working and Casa Pia paid for the education. He left Casa Pia at the age of 25 years and immediately started the first

job there as a teacher. In a year, he got a job in the Ministry of Education, where their team planned the future of education system in Portugal. After that, he moved to Azores to work in the local Ministry of Education and spent 4 years there. Later, Eduardo worked in different countries and in different spheres. He does not have a family or children because all his life he moved a lot and changed many places. He admitted that there were no room in his life for stability and family. Eduardo keeps in touch with casapianos.

The trajectory of Eduardo is not typical in many aspects. Firstly, only 7% of men born in 1950-59 from the ESS-Round 3 sample did not have matrimonial and reproductive events. Secondly, he finished education and was first employed quite late. Eduardo is an example of men who fully dedicate their lives to career.

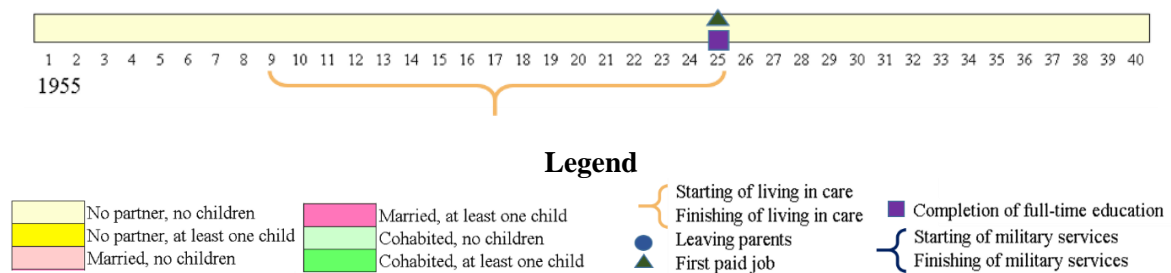


Figure 4.8. The Lifeline of Eduardo

Catarina was born in 1956 in the North of Portugal in a small village where everybody was very poor. She has seven siblings. Her father died when she was six. Because of that, her mother decided to move to Lisbon with all children. When they arrived, she found a job and almost immediately got ill, went to the hospital and had to stay there for several months. Because of that emergency situation, Catarina and her sister went to residential care institution. Catarina was 6 when she started to live there. She spent 8 years in the institution: first 4 years studying in primary school and 4 more of studying in secondary school. While all her friends attended secondary school in Santa Clara, Catarina had to go to another school alone since there were not enough places in Santa Clara. It was the problem for her because she was 12, very shy and did not know anyone in new school. After the secondary school, Catarina and other girls were obliged to leave the residential care. She left it at the age of 15. During these years there, she did not see her mother because she had no money to come and take her daughters home. It was a shock for her when she came back home and the mother forced her to work in a clothing store in the center of Lisbon. She cried every day because this job was not for a shy person. One year

later, she found a job connected with architecture, started to study in the evenings. It lasted two years, during which she finished the second level of secondary school. That time, it was a problem to find well-paid job in Portugal and she never received any help from the residential care authorities. That time, Brazil was considered a place where people could improve their financial situation. Catarina left for Brazil by a cruise, alone, without money. First week, she lived at friends' place and then found job and a room. Brazil disappointed her very quickly but she came back to Portugal only in 5 years. In Portugal, she went to the university to study languages and literature. In 1986, Portugal joined the EU; Catarina applied for a position in EU, passed a competition, and moved to Brussels at the age of 30. She had not have relationships until that year because she moved between different places and was determined to build a career and protect herself from being poor again; family and children could interfere with her plans. Almost immediately after moving to Brussels, she met a man and they were dating for ten years but could not create a family because he did not want it. When they broke up, Catarina was 40 and found herself too old to have a husband and children, she dated with men after but it was not serious. Catarina did not keep contacts with friends from the residential care.

The trajectory of Catarina, like the one of Eduardo, is not typical. Only 3% of women from the same ESS-Round 3 cohort did not have matrimonial and reproductive events. After leaving the institution, Catarina was combining work and studying to have better life and started to think about family and children after achieving stability that, however, was not sufficient for her.

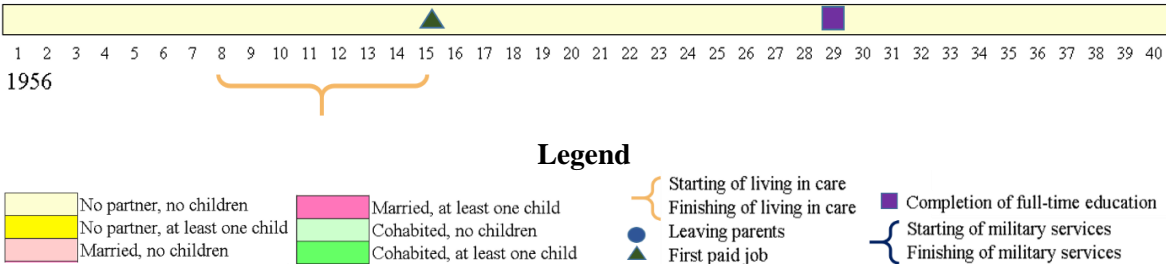


Figure 4.9. The Lifeline of Catarina

Marco was born in 1992 in Lisbon area. His father died when he was 1 year old, the mother was not ready to take care of them and, because of that, he was institutionalized together with the younger brother. They went through many residential care homes. The mother reappeared in their lives when Marco was 10. He has never felt close to her but liked her. When he turned

19, he entered the Autonomization Apartments project directly from the last care home. He has high school education that he finished at the age of 18. After graduation, he started the special 2 years long professional course in social animation. Marco plans to go to the university when saves money. He even went working to England for 2 years to earn money for studying; it happened after leaving the autonomy flat when he was 21 after thorough preparation with the help of educators. He entered the labor market in London the same year. He had a friend in England who he met in the last foster care home. He helped Marco to find the first job in a food factory. The first week, Marco was living with the friend and then moved to another place since he had money saved in the autonomization apartment. He currently lives in Lisbon and has two jobs. He was engaged in several romantic relationships, some of them lasted longer than three months but he has never cohabited with a partner yet. He explains it by absence of right person next to him. Marco is ready to serious relationships and parenthood. His dream is to be a father. He was single in the moment of the interview. Marco’s brother is in prison. He also has an elder sister but she lives in Paris and they do not communicate. He keeps in touch with friends from care and they help each other in difficult periods of lives.

There are no personalized data directly comparable with the information about care leavers from young cohort of this research. The only solution to contextualize the trajectories of young informants was to use official statistics from INE and Eurostat. The recent data demonstrate that young people in Portugal on average get married after 30, spent at least 12 years on compulsory education, enter the labor market after finishing the education , women became mothers at the age of 29,6 years. In this context, the trajectory of Marco seems linear and quite typical. He still has time to create family and become a father.

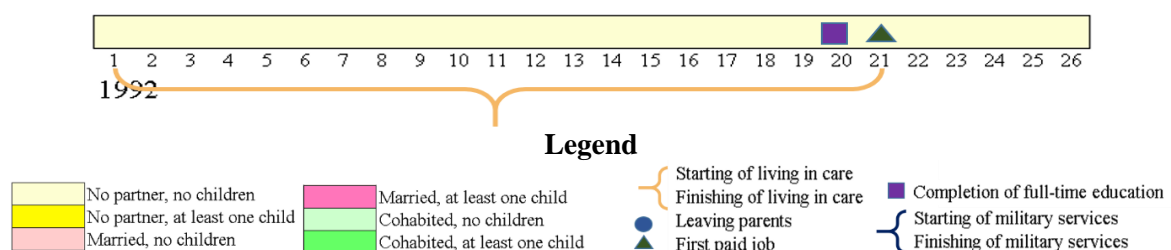


Figure 4.10. The Lifeline of Marco

Sara was born in 1972 in Cape Verde. Her mother thought the life is better in Portugal and sent Sara to Lisbon to live with an aunt when she was 7. The aunt treated her cruelly, beat her and forced to work for her in taking care of babies. Sometimes, she had to miss school for working.

The neighbors called the police and went to court but the aunt urged Sara to convince everyone that she was happy. When Sara contacted her mother, she always said that everything is good because the aunt made her do it. When she was 15, she told the truth to the classroom teacher who advised her to apply for living in residential care home. Sara followed the advice and moved to the residential care where people were very kind to her. During that time, she visited her mother in Cape Verde, told her about everything and started sending her money to support siblings. In 2 years, she entered the Automization Apartment project and spent 7 years living there. After graduation from high school, she started professional course in taking care of children and became the best student of the year. Because of that, the school authorities helped her to find the first job in the private college when she was 20. People from the college always helped her with employment. At the age of 21, she started bachelor programme, completed it in three years and thought about the master’s degree. When she graduated, she realized that the master classes were not time-consuming and, since she always wanted to be a mother, she got pregnant, left autonomy apartment for her partner’s house with whom she started dating at the age of 18. They moved in when she was 24 and since then they live together and plan to get married soon. Their son was born when she started the master programme. Her future husband has a daughter who treats Sara as a mother. Sara keeps in touch with several friends from residential care.

Sara initiated first matrimonial and reproductive events earlier than women in Portugal do nowadays. At the same time, she did it after achieving stability. She effectively combine her parental responsibilities, career, studying. An early desire to be a mother can be explained by her background of taking care of children from her own childhood and, presumably, social norms in the community of people from Cape Verde.

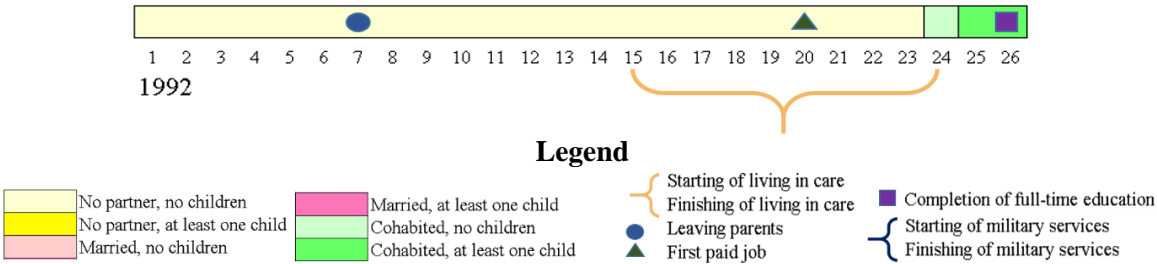


Figure 4.11. The Lifeline of Sara

Jose was born in 1993 in the west-north side of Lisbon, in social housing. This area was famous for drug problems and crime. Before entering the residential care home, Jose and his stepbrothers lived in poverty, neglect, their house burned several times because they were

abandoned. When he was 5, the social services sent him to residential care. Jose maintains relationships with 2 brothers because his mother never had responsibility, gave birth to many babies and left them with their fathers, so he does not remember the majority of siblings. Jose was living in different residential care homes until his eldest brother, who remembered Jose and their younger brother, asked social services to allow them live in one home. Their mother never visited them, while Jose’s father appeared regularly. At the age of 16, Jose moved to autonomy apartment and lived there until the age of 23. He was living there for so long because of studying: Jose finished the bachelor and started the master’s degree when he was 21. He was the first one in the history of the Autonomization Apartments project of SCML who went to the university. He studied physical therapy. Jose wants to finish his master but currently do not have enough money. His first job was not permanent, he worked as a therapist in the football club for a month and the wage was very low. Then Jose became self-employed, got patients gradually. He was 21 when he started working. In the moment of the interview, he was working on the business plan of his own practice. Jose has a girlfriend and they live together. They met in 2014, and started to cohabit in the same year. They do not plan to get married because Jose does not believe in the institution of marriage. However, he plans to have children later to start new chapter of happy family life like his other brothers did. He maintains contacts with friends from the last residential care home and educators from the autonomization apartment.

The linear trajectory of Jose seems very typical for modern general population. As many young people nowadays who tend to get higher education, Jose completed his bachelor, started the master, entered cohabitation and plans to have children outside the wedlock in future.

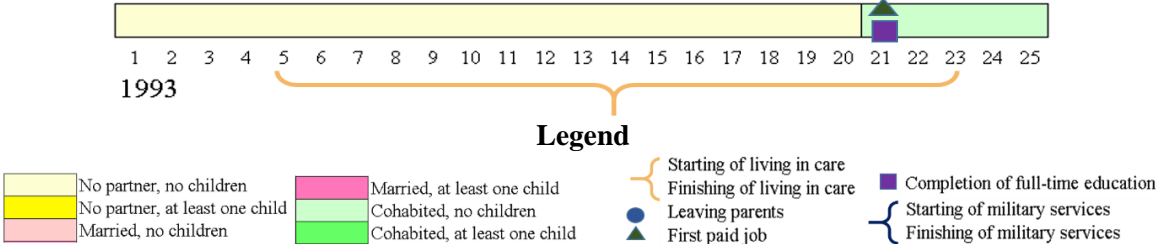


Figure 4.12. The Lifeline of Jose

At first sight, family formation and transition to parenthood trajectories of male care leavers in the sample of this research look more similar to normative trajectories of general population than the trajectories of female care leavers. Informants from older cohorts are distinguished by a higher level of education and later entry into the labor market than their peers

who grew up in biological families. The representatives of young cohort of care leavers seem to lose this advantage of better education over their peers from the general population since nowadays all Portuguese people have an access to education.

The next subsection portrays the model of informants' life stages beginning with period before entry into residential care until after-care period when they finalize transition to adulthood.

### 4.3. The Model of Care Leavers' Stages of Lives

In the process of analysis of the interview data obtained from both care leavers and educators, several themes were selected and combined into the following model, describing life transitions of care leavers (Figure 4.13). The model includes 3 stages or periods of informants' lives: pre-care, in-care, and after-care. The last stage was divided into 1) getting education and making a career, and 2) family formation and transition to parenthood. As it was demonstrated in the previous section, the order presented in the model does not mean that matrimonial and reproductive events always follow finishing education and entry into job market. However, more than a half of the informants kept this sequence of events or did not start family and, as Guerreiro and Abrantes (2005) noticed, the transition to adulthood nowadays is seen as diphasic journey: the first phase is devoted to experiences and probes; the second one is about stability and family responsibilities.



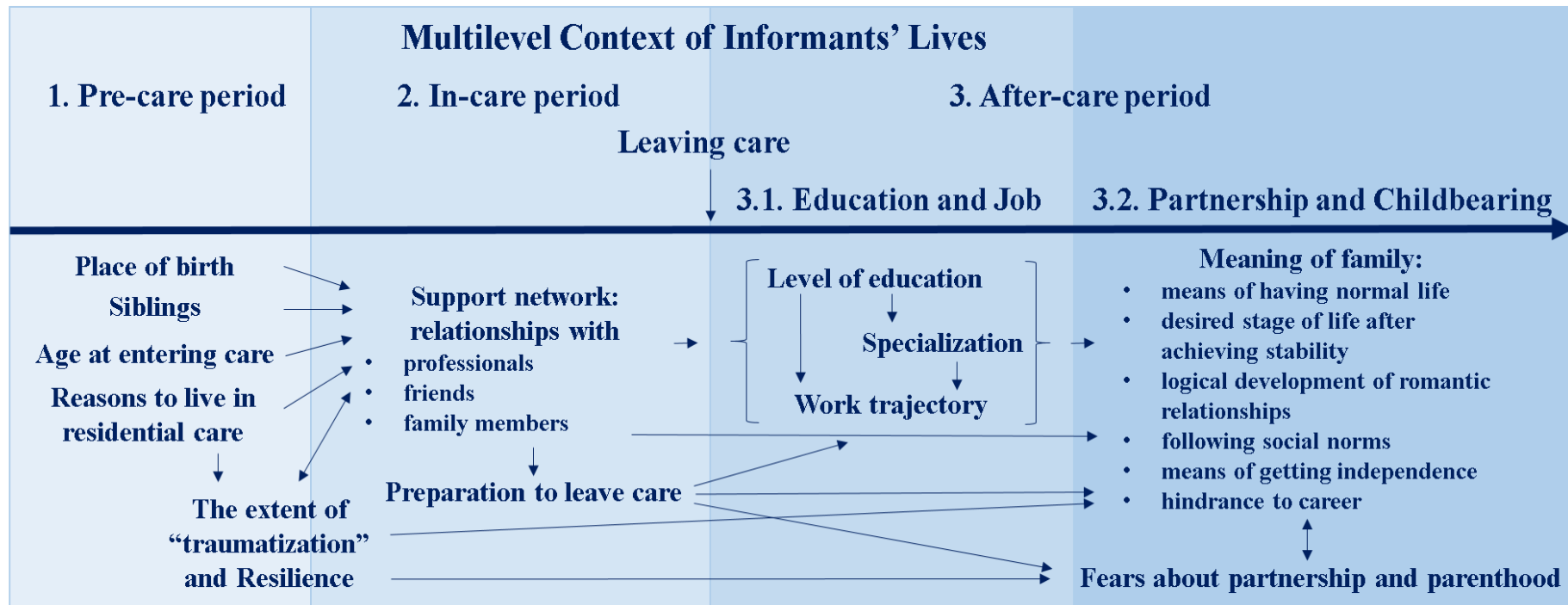


Figure 4.13. Thematic Map: the Model of Informants' Life Stages from Childhood to Adulthood

Each stage is inscribed in the multilevel context of the Portuguese society development. At each stage, the set of themes and subthemes illustrates the situations of informants. Together, these themes also indicate the factors of care leavers' better life outcomes that were noticed by educators of Santa Casa da Misericórdia de Lisboa and the representative of Associação Casapiana de Solidariedade who works in the association and was studying in Casa Pia de Lisboa for 10 years. These factors are healthy attachment pattern (that is formed at pre- and in-care stages), support network (or an analogue of family welfare that mainly accumulates at in-care stage and can work later in life) and education (that results in job trajectory and usually finishes at after-care stage). Because of impossibility of accessing attachment patterns of informants in this study, this concept was replaced by the combination of such themes as the extent of "traumatization" and resilience that appeared from the data naturally.

According to interviews data, pre-care stage explains where and in what family a child was born, why and at what age he/she was institutionalized. These indicators, and the reason of living in care in particular, can be connected to the extent of traumatization of a child. The last mentioned can have two-way link with the support network. A less traumatized child easier establishes relations with professionals, peers, and family members than a more traumatized one. In turn, bad relations with professionals, peers, and family members aggravate the situation of a child while good relations tend to promote better adaptation. In the same way, the extent of traumatization can be connected with fears about family formation that also involves building relationships with a partner and the meaning of these relationships for a care leaver. Preparation for leaving care plays a decisive role in improving the situation of a young person. Together with accumulated contacts, they provide a person with the safety pillow that he/she might use at the after-care stage. They can be used in the form of advice about education, specialization, contacts of potential employer in the beginning of the career or in case of unemployment. The concept of preparation for leaving is important in terms of family formation and childbearing. Effective preparation can protect a young person from fears about partnership and parenthood or shape his/her meaning of creating a family. The education and job can create the strong base for family formation and parenthood but, without this base, a person can feel insecure to take responsibility in the form of family and children.

The illustrations of this scheme functioning are presented below.

#### 4.3.1. Multilevel Context of Informants' Lives

The first important component that frames three stages of transition from childhood to adulthood is the multilevel context of people's lives. The following table presents the brief

description of contexts where the representatives of older and young cohorts of care leavers accomplish their life passages. The summarized information was extracted from the second chapter of this work and the informants related to some of these social, political, cultural, and historical conditions of their lives, reflexing on the life choices they made.

Table 4.2. Context of Care Leavers' Family Formation and Transition to Parenthood Trajectories

Subsystem		Older Cohorts (1930-59)	Young Cohorts (1990-99)
Chrono-	Modernization of lifestyles	Institutionalized life course	De-institutionalized life course
	SDT	Early stage of SDT	Late stage of SDT
	Modernization of family policy and gender order	Women's obligation to provide the wellbeing to the family, obey fathers or husbands; insecurity of illegitimate children; traditional patriarchal relationships, gender-segregated residential care institutions	Equality of men and women in the family; legal protection of children born outside the wedlock; declared gender equality, mainly mixed residential care homes
Macro-	Type of Marriage	Mediterranean marriage pattern: low female age at marriage and a significant age gap between a husband and a wife, childbearing inside the wedlock	Modern marriage pattern: late union formation, premarital cohabitation, childbearing outside the wedlock
	Values Profile	Traditional – Self-expression: value of the traditional authoritarian, patriarchal family, refused divorce and abortion	Rational – Self-expression: the importance of loving relationships, personal development, gender equality, acceptance of cohabitation, contraception and divorce
	Welfare State Regime	Mediterranean regime, modest state support, family welfare	Universalization of the system
	Policy of de-institutionalization of children at risk	Institutionalized type of child care facilities	De-institutionalized child care homes (DOM-plan 2008)
Meso-	Educational and Occupational structure	High illiteracy rate, high rate of low-qualified specialists (especially among women)	Growing rate of highly educated and qualified specialists (among both men and women)
	Family Support / State Support	Tradition to live with parents until relatively late age and leave mostly for entering marital union; Leaving residential care after certain age (legal age of adulthood) or finishing secondary education	Openness for leaving parental home for sharing housing with friends or sexual partners; Opportunity to stay in residential care while studying or even working, Autonomization programme

The readers will be asked to return to this table in the course of the analysis of different life situations mentioned by the informants.

#### 4.3.2. Pre-care Stage

The informants of this study were born in different parts of Portugal, 2 of them even came from abroad but all entered the residential care in Lisbon. They were not the only children in their families (except for Eduardo who did not give the information about his family composition). Age of entering residential care facilities varies from 1 to 15 years.

Table 4.3. The Characterization of Care Leavers at the Pre-care Stage

Informant	Place of Birth	Siblings	Age at Entering Care (years)	Reason to Enter the Residential Care
Alberte (p. int.)	Algarve area	Yes, no information	10	Big family, poverty
Jorge	Lisbon area	1 brother	3	Parents were the victims of tuberculous, the father died and the mother could not take care of children alone
Filipe	Province	2 sisters	7	Father died, they moved to Lisbon but mother could not afford raising Filipe and two his sisters alone
Julian (p. int.)	Small village several kilometers from Lisbon	1 brother	9	Poverty, the village priest helped to get a place in Casa Pia because the mother was working for him in a church
Madalena	Lisbon area	1 brother and 2 sisters	2	Epidemic illness made her mother go to the special hospital in the North of the country, father, who was casapiano, could not take care of all children
Eduardo (p. int.)	Cape Verde	-	9	Came to Portugal with religious people to study in Casa Pia
Catarina	Small village in the North of Portugal	2 sisters and 5 brothers	6	Poverty, father died when she was 6. The family moved to Lisbon. In Lisbon, her mother got seriously ill, and had to stay in hospital for several months
Marco	Lisbon area	1 brother and 1 sister	1	Father died and, his mother disappeared
Sara	Cape Verde	3 brothers	15	Her mother thought the life is better in Portugal and sent Sara to Lisbon to live with an aunt who treated the girl cruelly
Jose	West-north side of Lisbon	8 brothers	5	Poverty, neglect, danger to life in the absence of caregivers (his mother had no responsibility, abandoned Jose and his brothers)

A half of informants were institutionalized because of poverty, because their families lost the breadwinners or had to go to the hospitals to be treated. In the circumstances of lacked state support and limited opportunities of widowed women to satisfy at least very basic needs of their children, especially in rural areas, mothers of several representatives of older cohorts had to move with their children to Lisbon. However, as it came from the data, even working in the city did not improve the situation in a sufficient way and children went to residential care. For some families, it was a good solution; one of the informants mentioned that his family was taught how to get to Casa Pia de Lisboa:

There were people who checked if a child was in conditions. A child had to be dirty, without good food. So, we were advised that when these people were coming, we were ready. It was a trick to go there (Filipe, 70 y.o., 9 years in residential care).

Care leavers from young cohort mentioned such reasons of living in care as neglect and danger to their lives:

I spent some years of childhood in poverty, neglect, my house burned several times. We almost died in the time they stopped fire (Jose, 25 y.o., 12 years in residential care and 6 years in the Autonomization Apartments of SCML);

The aunt was very bad to me, she was always beating me (Sara, 26 y.o., 2 years in residential care and 7 years in the Autonomization Apartments of SCML).

#### 4.3.3. In-care Stage

Almost all informants maintained at least rare contacts with the family members or parents' friends during the years they spent in care. The only exception is Eduardo who came from Cape Verde. Sara, who has the same origins, could call her mother and brothers while in Eduardo's childhood years, the opportunities to contact people in other countries were very limited. Distance from Lisbon and poverty were the factors of rare visits the informants received. While Filipe could spend holidays with his family, Catarina, who was in similar situation and also had her family in Lisbon area, was living constantly in the institution:

During the summers, we had holidays, three months of summer. What we did for those months was to go to countryside. We spent three months together, my sisters and me (Filipe, 70 y.o., 9 years in residential care);

We didn't go home because my mother had no money to come and take us (Catarina, 62 y.o., 8 years in residential care).

Madalena, in turn, could refuse the contacts with the mother when she came with visits:

During the years in childcare, my mother came to see me but sometimes I did not want to see mom because I did not feel special connection with her (Madalena, 64 y.o., 15 years in residential care).

Table 4.4. The Characterization of Care Leavers at the In-care Stage

Informant	Support Network: Relationship with			Preparation for Leaving Care	
	Family Members	Peers	Institution Representatives	Aspects of preparation	Feeling of being prepared
Alberte (p. int.)	Rare contacts	Had good relationship with peers and professionals, got network of casapianos during years in Casa Pia, still have meetings with them every year		-	Did not have problems in transition to independent life
Jorge	Rare contacts with the mother, but frequent contacts with her friends	Had good relationships with peers and professionals, got network of casapianos during years in Casa Pia, consider Casa Pia his family, still have often meetings with “brothers”		Education, job, citizenship	Felt prepared for adult life
Filipe	Mother visited him every weekend. He spent every summer with his sisters and grandparents in the countryside	Had good relationship with peers, still in touch with casapianos friends	Did not like Casa Pia and its professionals, wanted to leave as soon as possible	Education	Felt prepared because of his family
Julian (p. int.)	Mother visited him from time to time	Considers all casapianos brothers, still in touch with casapianos friends	-	Education	Felt prepared for adult life
Madalena	Mother came to see her at least once a month but sometimes Madalena did not want to see her	Got friends who became a part of her family, they have been keeping together since childhood	Hated the majority of professionals in care but treated one professor as a father, he helped her a lot	Education, human rights	Did not feel prepared for real life
Eduardo (p. int.)	Did not keep contacts with people from Cape Verde	Had good relationships with peers and professionals, got network of casapianos during years in Casa Pia, still have meetings with them every year		Education	Did not have problems in transition to independent life
Catarina	Mother could not visit her, but she communicated with the sister who was also institutionalized	Did not get friends; did not keep in touch with peers from the institution	Did not have special connections with professionals in the institution	Housekeeping, cooking, sewing	Did not feel prepared for real life
Marco	The mother reappeared in his life when Marco was 10 and visited him from time to time; the brother lived in one residential care home with Marco	Got friends in the residential care and they still meet and help each other in difficult periods of lives	Changed many residential care homes and could develop good relationships only with the team from the autonomization apartment	Searching for job, manage money, paying the bills	Not sure about his feeling
Sara	Sara keeps in touch with her mother on the phone; she went to visit the family in Cape Verde	Got friends in the residential care home and in the autonomy apartment, meets them quite often	Developed friendly relations with the professionals from the residential care home and the autonomy apartment, treats the educator from the apartment as the second mom	Contraception, housekeeping, money management	Felt prepared for adult life
Jose	The father visited him, also communicates with two brothers with whom he lived in the residential care homes	Got friends in the residential care home but not in the autonomy apartment; meets them friends from care often	Developed friendly relations with the professionals from the residential care home and the autonomy apartment, considers the educator from the apartment a friend, keeps contact with him	Money management	Always was very organized, did not have problems in transition to independent life

For some informants, people who they met in residential care, became their support network, even replaced family members:

The first message from Casa Pia was that we met mates that had to be our family and it had to be in that way for the end of our lives. My mother was Casa Pia and I respect the institution (Jorge, 74 y.o., 13 years in residence care);

We were equal and we were brothers in mind (Julian, 68 y.o., 10 years in residential care);

When I started to live in the residential care, people were very kind to me. They said I was special (Sara, 26 y.o., 2 years in residential care and 6 years in the Autonomization Apartments of SCML).

Other care leavers, like Filipe and Madalena, wanted to leave as soon as possible. Madalena tended to express her protest by creating problems for educators and was not expelled from the residential care thanks to support of the professor who saw her potential and helped in many ways in the future by replacing her father. Catarina found maintaining special connections with peers or professionals very difficult, she felt lonely and the decision of professionals to send her alone to another school aggravated the situation, left an imprint on the her life course:

When I started secondary school, every day I was going there alone and coming back, I felt very unhappy because I was alone... It was too much for me to be alone. And I was alone all these years. I was so shy that it did not help me to feel more comfortable with people (Catarina, 62 y.o., 8 years in residential care).

The case of Jose seems important in this sense. He was able to develop strong friendship with not only peers and educators from residential care, but also with a boy and his family who lived on the other side of the street:

I went to the residential care and I got a friend. He lived in a regular family. I spent some vocations with his family, visited him every day, the family knew me. I was with them in Algarve, I know their relatives and I was more in touch with his family than with mine (Jose, 25 y.o., 12 years in residential care and 6 years in the Autonomization Apartments of SCML).

Special connections with educators in residential care also helped him to gain the information about the Autonomization Apartments project and became its participant. Marco, in turn, changed many residential care homes that did not facilitate establishing contacts with professionals. However, he has two reliable connections with peers from his last home: one of them helped him to find a job in England; the other informed him about the Autonomization Apartments project and sheltered him after coming back to Portugal. It illustrates the

importance of support network and the skill of communication for children in care, their future well-being. Another example of the importance of safe support network for a child in a vulnerable situation is the observation of the informant, who studied in Casa Pia together with children in care:

From my experience and also from the experience of my friends, there can be advantages of living in Casa Pia in case of not good family situation. Sometimes, it's better to live with friends. If young people who lived in Casa Pia needed something, professors always helped them. They were more like friends for them, not just teachers (Antonio, 26 y.o., 12 years of studying in Casa Pia de Lisboa).

One more important concept of in-care stage of the model is preparation for leaving care. Women from older cohorts said that they were not prepared to face the “real world”. They also mentioned that it was common for female care leavers of that time:

I know that many of the girls who left the same time as me, they didn't have good life after that. I heard that some of girls, when they left school, because they were alone, not prepared, they just went to prostitution (Catarina, 62 y.o., 8 years in residential care).

All male informants and Sara, who represents young cohort of care leavers, reported the readiness to independent life. The exception is Marco who was not sure about his feelings but demonstrated quite successful transition. Catarina touched the issue of difference between institutionalized boys and girls of her time. Boys received a profession in Casa Pia, after leaving the institution, they could go to the university and became highly demanded in the labor market while women were not expected to make careers and were given basic education without specialization (Table 4.2). This note, illustrated by the table column with spheres where care leavers felt prepared (Table 4.4), refers to three factors of better life outcomes of care leavers mentioned above. It is noteworthy that the representatives of older and young cohorts mentioned different aspects of preparation for after-care stage they got. While older care leavers mainly referred to preparation in terms of education, job, citizenship, human rights, younger ones recalled more practical skills like money management, contraception usage, payment of bills, applying for jobs.

#### 4.3.4. After-care Stage

At after-care stage, young people concentrate on their education, career, and family formation. This subsection describes how care leavers organized their adult lives from their own



perspectives and the perspectives of educators who worked with the representatives of this vulnerable group of population.

#### 4.3.4.1. Education and Job

As it is summarized in the following Table (4.5), more than a half of the informants have higher or not finished higher education. Three others received upper-secondary or secondary professional education. Casapianos were specialized in accountancy, economics, informatics, electronics, metalwork. At least a half of them were first employed in their areas of specialization. Young cohort representatives received education in child education, physiotherapy, social animations.

Table 4.5. The Characterization of Care Leavers at the After-care Stage: Education and Job

<b>Informant</b>	<b>Level of Education</b>	<b>Specialization</b>	<b>First Job (in the area of specialization or not)</b>	<b>Ever Had Problems with Finding Job</b>	<b>Residential Care Representatives' Support for Education and Job</b>
Alberte (p. int.)	Not finished higher	Accountancy and Informatics	Accounting company (yes)	No	No
Jorge	Secondary professional	Work with metal	Airplanes company (yes)	No	Yes
Filipe	Higher	Accountancy and economics	Accounting company (yes)	No	No
Julian (p. int.)	Higher	Electronics and thermodynamics	Engineering company (yes)	No	No
Madalena	Upper-secondary	Accountancy	Social services Association (no)	No	Yes
Eduardo (p. int.)	Higher	Economics	Casa Pia de Lisboa (no)	No	Yes
Catarina	Not finished higher	Languages and literature	A clothing store (no)	No	No
Marco	Secondary professional	Social animation	Food factory (no)	No	No
Sara	Higher	Child education	Private college (yes)	No	No
Jose	Higher	Physical therapy	Football club and self-employment (yes)	No	No

None of informants had problems with finding job. Only 3 of them got support from the residential care representatives. Sara used another thread of her network's ties, weak ones (Granovetter, 1973). In this aspect of life, her teachers from the professional courses supported her:

I started professional course on taking care of children and I was a good student there. When I finished it, I won the award of the best student of the year. Because of that, the

school helped me to find the first job in the private college. I was always working and if I lost the job, the school always gave me other job options (Sara, 26 y.o., 2 years in residential care and 6 years in the Autonomization Apartments of SCML).

However, the real situation of care leavers can be very different from the situation represented by the informants. In his narrative, Eduardo touched the problem of invisibility of “unsuccessful” casapianos who prefer to deny contacts with their peers because they did not achieved anything to be proud of. He connects it with different educational paths they could follow that time:

After the primary school, casapianos could chose technical school that led to university. It gave more chances to become successful. These people usually show up. The other path was professional education that was a kind of stigmatized. I met my peers who chose this path in the streets and saw their bad situations. These people were more likely to go down and never show up. It could happen also because, in the process of modernization, the need in their professions disappeared and they couldn't find job anywhere (Eduardo, 63 y.o., 16 years in residential care).

Maia et al. (2012) found out that only 23,5% and 32.4% of former wards of Casa Pia de Lisboa that belong to the generation of Eduardo got higher and secondary education respectively, while 37,2% received primary education. In the generation of Alberte, this proportion of casapianos was even higher (51,9%). Reasoning of Eduardo and these figures give the ground to assume that not all casapianos had never faced problems with employment. However, the majority of them still were very competitive in the labor market, especially taking into account the existed support network of casapianos in Portugal.

Nowadays, according to educators from the Automization Apartments project of Casa Pia de Lisboa and Santa Casa da Misericórdia de Lisboa, the tendency in education for care leavers in their services is to choose secondary vocational education (while a decade ago, they preferred to continue studying at the university level). Trend they observed is not very stable though. They hope that more care leavers will choose higher education, especially since all their university fees either in public or in private universities can be paid by the Portuguese government. The employment trends of modern care leavers reflect their educational profiles. The tendency is to work in restaurants, pubs, supermarkets, and other branches of the service industry. Sometimes they struggle with finding job. The waste majority of them have low wages around 600 euros per month. Those with higher education have better salaries.

The role of education as a factor of better life outcomes looks obvious. The informants from Casa Pia de Lisboa generalized a theory about the importance of education that they

received in the institution. The theory describes the role of education in different contexts. Before the Revolution, Casa Pia de Lisboa was the key provider of education together with residential care support to Portuguese children from vulnerable groups of population. The employers knew about the excellent training and reliability of former students of Casa Pia and were ready to offer them jobs. It was the way to empower these children and give an advantage over less educated groups of population:

Casa Pia was the tool to provide the country with working force. Mainly in the spheres of accounting, engineering and arts. The situation 50-60 years ago was not the same as it is now. It's mainly because of educational system of the country. That time, Casa Pia was a place to educate children. After the Revolution, democratization of education, the explosion of schools occurred. (Pedro, 62 y.o., studied in Casa Pia for 10 years, works in Associação Casapiana de Solidariedade);

Casapianos were known as very hard-working people, honest and with good skills. People believed we never give up (Julian, 68 y.o., 10 years in residential care).

The informants from older cohorts knew it and used opportunities to study even after leaving care:

I have to say that I wanted to study, so at 16, I worked and started to study in evenings. Always, during my adult life, I went on with my studying. It was the only possibility to get a better job (Catarina, 62 y.o., 8 years in residential care).

After “the explosion of schools”, it became insufficient to have an education, since it was accessible (Table 4.2). To be competitive and have better life outcomes, care leavers from young cohort need higher education:

I didn't go to the university because I was done. But university is university. In my case, I know that if I'm going to compete with someone and if I know I'm better than them with experience, and they have the university degree, I'm automatically behind them (Marco, 16 years in residential care and 5 years in Autonomization Apartments of SCML).

#### 4.3.4.2. Union Formation and Childbearing

The majority of informants of this research sample (9 out of 10) at least once were engaged in romantic relationships: they dated, cohabited or were married (Table 4.6.). One of them went through divorce. The only single male representative of older cohorts reported that he did not enter matrimonial unions because he preferred to avoid living at one place for a long time and prioritized his career and comfort. 6 informants have at least one child. Female care leaver from

older cohorts did not become a mother because she was afraid of being poor, worked hard and did not meet an appropriate man who wanted to create a family with her. Two childless male care leavers from the young cohort plan to become fathers in foreseeable future.

Educators and the representative of Associação Casapiana de Solidariedade were also asked about care leavers' trends in family formation and transition to parenthood they noticed. The latter one mentioned that casapianos get married earlier and get divorced less often than other Portuguese people do. He thinks it happens because they need about 3-5 years after leaving care to understand what they need in lives and keep the lines they chose.

Educators from the Autonomization Apartments of Casa Pia de Lisboa reported that the care leavers, they worked with in the project and before it, were not afraid of having families and children:

They are not afraid of giving birth. They want to give to their new families, to their kids, what they did not have when they were children. Although they recognize it was important in their conditions to live in care, they don't want their families to go through that experience (educators from CPL).

Educators from Santa Casa da Misericórdia de Lisboa, who told only about young people from the project, observed diverse trends. They worked with several youngsters that did not want to create families because of traumatic experience they had. They know young people who created families, became parents and feel happy about it. However, many youngsters they worked with tend to postpone matrimonial and reproductive events. The educators think it is the feature of modern society, result of new values and uncertainty (Table 4.2):

We believe that nowadays in the society, you can go to any group and they all tend to delay everything that creates roots, involves compromise and dependency. Another side of that is that 30 years ago, men in their 20s or women in their 20s had job, income and it was easier to think about that [family and children]. Many our youngsters don't have that stability. You can go to other groups here in Portugal and you have people that have children later and later in life. Lots of youngsters with whom we maintain contact are still in between jobs. They date but their girlfriends or boyfriends are exactly in the same situation (educators from SCML).

Table 4.6. The Characterization of Care Leavers at the After-care Stage:  
Partnership and Parenthood

Informant	Ever Had a Partner/ Spouse	Matrimonial Status	Has at least 1 Child	Number of Children	Fears about partnership and childbearing	Meaning of Family and Children
Alberte (p. int.)	Yes	Married	Yes	2	-	Logical development of romantic relationships
Jorge	Yes	Married	Yes	2	No	Logical development of romantic relationships
Filipe	Yes	Married	Yes	2	Was afraid of bringing a newborn in the world full of uncertainty	Logical development of romantic relationships, desired stage of life after achieving stability, following social norms
Julian (p. int.)	Yes	Married	Yes	3	No	Means of having normal life, logical development of romantic relationships
Madalena	Yes	Divorced	Yes	1	No. But wanted to have an abortion to maintain independence	Means of getting independence
Eduardo (p. int.)	No	Single	No	-	-	Hindrance to career
Catarina	Yes	Single	No	-	Was afraid that children could interfere with the plan to earn enough money	Hindrance to career
Marco	Yes	Single	No	-	No	Desired stage of life after achieving stability, logical development of romantic relationships
Sara	Yes	Cohabited, engaged	Yes	1	No	Logical development of romantic relationships
Jose	Yes	Cohabited	No	-	No	Means of having normal life

#### 4.3.4.3. The Meaning of Partnership and Parenthood for Care Leavers

When the informants shared their stories about union formation and giving birth to the first child, they mentioned different motivations for or against these events. Based on their

responses, a classification of meanings of partnership and parenthood for care leavers was created.

The first meaning can be expressed as “means of having normal life” that implies beginning of own family as something young people were missing during the years spent in residential care. In their answers, the desire to avoid their parents’ mistake or repeat observed successful experience was pronounced:

We were not afraid of having a family. We had a desire to start our own families and write our stories (Julian, 68 y.o., 10 years in residential care);

I want to have children to start new chapter of happy family life like my other brothers. They created their own ecosystems (Jose, 25 y.o., 12 years in residential care and 6 years in the Autonomization Apartments of SCML).

The next meaning is “(desired) stage of life after achieving stability” that, in case of this research informants, goes together with “logical development of romantic relationships”. Therefore, it involves feelings and finding right person in addition to conditions necessary for family life and childrearing:

I had my girlfriends... We didn’t live together. I will do it when I find someone (...) My dream is to be a father. For my children, I don’t want the same life as I had, so I don’t have right age for family. If you think you need good life for your baby, you never would have good enough life, specially in Portugal. If you’re gonna wait for a good job, better salary, you would never have children (Marco, 26 y.o., 16 years in residential care and 5 years in Autonomization Apartments of SCML);

I met my wife on the vacations in the place where I was born. I had never seen her before. We got married immediately. In those years, if you’re not married until 30, you wouldn’t get married at all... I spent a period in military services, finished my studies, had good position in a company, so I got married (Filipe, 70 y.o., 9 years in residential care).

In case of Filipe, it was the constellation of three meanings. He also touched the motivation of “following social norms” existed in the period of his young ages, when social roles were fixed, and life courses standardized. In the same sense, the actions of Madalena in matrimonial sphere were representative for describing gender order and social norms existed in Portugal before the Revolution (Table 4.2). For her, the marriage became “the mean of getting independence”:

I wanted to live by my own, have my own house. For 16 years old girl of that time, the only way to have it was to get married. I did that (Madalena, 64 y.o., 15 years in residential care).

Catarina, who found herself in a similar position, chose another path. Because of her family situation, she was afraid of being poor and wanted to earn enough money to protect herself, so for her, family was “a hindrance to career”:

For me to have a family was secondary. I needed to have a security of a job. And also, I had a vision of difficult life that people have, my mother who has eight children. And when finally I was sure in financial stability, I found the man but I spent my time between 30 and 40 – this period when people can think about having a family, but he didn’t want to have a family with me. It was a bad decision but maybe in mind, I was not very interested, otherwise, I would go somewhere to find somebody else (Catarina, 62 y.o., 8 years in residential care).

These meanings were partially formed as a result of experiences at different stages of informants’ lives. Some of the meanings can be considered more common for people without the experience of living in care than others. In previous subsections, such factors of care leavers’ better life outcomes and wellbeing as social network and education were discussed, while the next subsection aims to open the discourse on traumatization of care leavers and their resilience.

#### 4.3.5. The Extent of “Traumatization” and Resilience of Care Leavers

The extent of “traumatization” and resilience are not the easiest concepts to extract from data. These two themes were not included in the interview guide and appeared from the narratives and nonverbal signals (sad smiles, concentration, tears, etc.) naturally. These themes seem interrelated. The extent of traumatization does not just list adversities that care leavers from the sample faced. It also explains how they mitigated them. In this vein, it is seen as a result of a collision between traumatic events in the lives of informants and their resilience power as “a dynamic process encompassing positive adaptation within the context of significant adversity” (Luthar et al., 2000: 1). The less the degree of traumatization, the better can be life outcomes of a care leaver.

Many male informants from older cohorts told about years in Casa Pia as about an adventure (they described in details football matches they watched, the visits of the president of Portugal to Casa Pia, their work in the magazine of the institution). Female informants described that period in care as something very difficult. Even stories about punishments in the institutions sounded differently. Men mainly told funny stories and women, in turn, described what they felt. Catarina always felt abandoned, lonely, and later was always afraid of losing control over life situations; Madalena had several attempts at suicide, did not feel attached to

her mother. They both applied for psychological support at after-care stage because of depressions. They could feel better after the therapy. Finally, women took some advantages from their situations. Catarina is sure that the strength she has, came from years in the institution and her loneliness. She learned to be alone, independent, hardworking, achieved a lot. Madalena developed warm relationships with her friends, sister and the daughter, could make a career. This research does not have resources to clarify, if different perceptions of life in care and its impact that male and female informants reported appeared because of different types of reflexivity on the life experiences (Caetano, 2017), higher resilience of men to institutionalization, or different conditions of living in state care for boys and girls. Marco mentioned though that serious depressions happened with his male friends and the brother. He stressed the danger in case of lack of resilience:

There're two kinds of people in care: like me and like my brother who is in jail. We realized earlier that we have a situation where we cannot risk too much. Very early, we define priorities. We have this group where we're people who finished high school, we made our life, we knew we needed that for the future, at least a base. While others were doing crazy things. That's why some of them are in jail, including my brother. They couldn't handle that depression, they just started doing stupid things (Marco, 26 y.o., 16 years in residential care and 5 years in Autonomization Apartments of SCML).

Another adversity, that only men from the young cohort reported, was discrimination against them at school and in the neighborhoods where they lived. Jose is sure that Portuguese people are conservative and still full of stereotypes about children in care as "poor and badly educated". It made children either react or demonstrate that they are from ordinary families:

Sometimes we had to do cultural activities, like going to the museums or cinema, and always people saw these institution kids and treated us differently. We don't mind, we behave according to that. People shouldn't do that to kids. People treated us differently and kids reacted, people didn't like kids, new kids came and people treated differently because in the past, they behaved badly and it's a cycle (Jose, 25 y.o., 12 years in residential care and 6 years in the Autonomization Apartments of SCML).

I was trying to hide my situation. Imagine, my colleagues say, "ohh, this holidays, I'm going to France..." and I was like "yees, my mother and I are going too", you know? I was lying. But I think it's normal for people like us (Marco, 26 y.o., 16 years in residential care and 5 years in Autonomization Apartments of SCML).

The representative of casapianos mentioned that he had never faced discrimination. He connects it with close friendship between his "brothers":



I never experienced any kind of discrimination because we were many, very united, if something happened, we protected each other and acted together. We were very strong (Jorge, 74 y.o., 13 years in residence care).

These intergenerational distinctions seem interesting. Male informants of this research lived in different conditions. Older cohorts representatives lived in in huge institution where boys were brothers who “live, sleep and eat together”, protected each other. Younger cohort representatives lived in de-institutionalized environment with educators who are not afraid of developing attached and significant relationships with kids, as it was described in the research (Rodrigues, Ducharne, Del Valle, 2014) and observed by the author of this study during internships in residential care homes. In both type of conditions boys could be resilient.

Despite the difficulties the informants of this study faced, they achieved a lot in their lives and gained something they can be proud of. For Catarina and Madalena it is their careers, for Marco and Jose it is their education, Filipe is proud of his “courage, even something crazy” and broad view of the world that, as he thinks, distinguished him from other casapianos and helped to became successful, for other men from older cohorts it is “being a deserving part of Casa Pia”. In addition, care leavers are proud of overcoming difficulties they faced:

I feel good when my friends nowadays, if they have some problems, call me and say that they have problems but then think about my life and realize that their problems are not serious. I am happy in these moments (Sara, 26 y.o., 2 years in residential care and 6 years in the Autonomization Apartments of SCML).

The next section is devoted to revealing the process of preparing young cohorts of care leavers for independent life from the perspectives of educators and service users.

## 4.4. Process of Young Portuguese Preparation for Leaving Care in Autonomization Apartments: SWOT-analysis

### 4.4.1. An Overview of the Autonomization Apartments Project

The Autonomization or Empowerment Apartments project was created 10 years ago as a social response to the need of support of youngsters in vulnerable situations in their passages to independent life. In Lisbon Metropolitan Area, Santa Casa da Misericórdia de Lisboa and Casa Pia de Lisboa are the key participants of the programme. The former manages 9 Autonomization Apartments and the latter patronages 7 Apartments. The Apartments in both organizations are gender-segregated accommodations of typology T2, T3 and T4, with an organization of spaces identical to a normal house and with capacity to welcome 2-4 young

people in single rooms. The technical teams that usually include social workers, educators, and psychologists assist the young service users. Autonomy Apartments' educators, who had been engaged in the project for at least 5 years, became the main informants for this part of the study.

According to the educators, the target group of SCML Apartments are residential care leavers and youngsters in dangerous situations at the age of 15-25 years who are studying or working. Casa Pia de Lisboa accepts mainly leavers of its own residential care homes and, less often, from other institutions at the age of 17-25 years who are studying. When youngsters in vulnerable situation turn 15, they can apply to the court for staying in the apartments and give the reasons why they think they need to participate in the project. Knowing what services can be offered and what approaches can be applied to empower young people, professionals decide if an applicant can find needed support in their facilities.

The next subsection opens the SWOT-analysis part stating from strong sides that the educators see in their work with young people from vulnerable groups of population.

#### 4.4.2. Strengths

The main strengths of the project, mentioned by educators, are opportunity to give individual and group support, huge variety of skills that they offer young people to gain, work in the multiprofessional team, psychological counselling.

Both organizations use group and individual approaches for intervention but combine them in different proportions. They encourage young people to act independently:

Our intervention is mainly individual; each youngster has an individual plan with detailed goals and actions towards those goals. But we have group intervention in the apartments. And we do it on the relational basis, sometimes we go with them to the services for training, and when we think that they have a certain degree of competence on the skill, then we start to make some experiments. If it didn't go well, we accompany again and try again (educators from SCML);

Young people always ask us to help with solving their problems, and sometimes we encourage them to solve the problems themselves. If it goes wrong, we schedule meetings, can discuss it in groups (educators from CPL).

The strategy of educators from SCML involves flexible way of discussing issues with the service users, they prefer unplanned discussions on "what is present", while the representatives of Casa Pia promote planned sessions with occasional unplanned discussions; in preparing youngsters for independence, they move from one step to another:

In our services, we are giving what they need. We don't talk about job search while they're in school, we don't talk about CVs while they're in school. We tend to organize them in what is present. Sometimes youngsters have the projects to live on their own even with friends or with family and we discuss a lot of thematics with our youngsters. We tend to see what is actual, and in groups, we discuss the things that are present in the life of this youngster (educators from SCML);

All the activities are planned and scheduled in the calendar. Although some issues appear and they need to be answered immediately during informal meetings. We have thematic sessions in the apartments where we speak about sexuality and so on. There are other ways to discuss the issue that young people meet. Phone call can be an option because some issues cannot be discussed personally, in face-to-face conversations (educators from CPL).

As the professionals from SCML mentioned, they tried different approaches and found optimal one:

Lots of years ago, we had an experience of making at each apartment the group of seminars through thematics and it was not enriching because it was too theoretical. I mean that if they are not leaving the theme that we are talking about, it does not work. We learned from that experience (educators from SCML).

One more important aspect is formality of relationships between professionals and service users. Educators from both organizations reported that these relationships are close, with "the certain degree of informality"; since their job is doing for young people "what parents usually do for their children" while working on gaining the skills that can be useful in life. Young people who participated in the programme confirmed the importance of these close relationships:

I was lucky because my educator was like the second mother to me and helped me with everything (Sara, 26 y.o., 2 years in residential care and 7 years in the Autonomization Apartments of SCML);

In the autonomy apartment, educators became friends, I never looked at them like at authoritarians and they never looked at me like at a kid who they needed to teach about life, we always were like friends (Jose, 25 y.o., 12 years in residential care and 6 years in the Autonomization Apartments of SCML).

After evaluation of every youngster's situation, the technical teams in both SCML and CPL develop the individual plans and navigate young people through their plans from one goal to another to acquire the big variety of skills for, when leaving, being able to be independent.

Goals in the plan embrace getting education, taking care of health, including sexual one, personal development, domestic skills, financial skills, using social services, searching for a job, preparing CVs, arranging interviews, being able to stay by their own but living and negotiating with others. The last two skills from the list are considered very important:

One thing that we work on with them, one of our goals, is to develop their relationship skills within the group because if they go and live in rented room, it's important for them to understand how to respect other's space and being able to talk about what they need and want (educators from SCML).

Another skill that interviewed educators and care leavers consider one of the most important is money management. All young people in the Autonomization Apartments project get money from the state. In the beginning of each month, they receive particular amount of money that they have to manage throughout the month. In the beginning, youngsters get more support to make all the payments, but the goal for them is to learn how to control their finances independently in time:

There is an example of youngsters who asked for assistance in going shopping for grocery and all that stuff because they thought that they were spending too much money. We went with them and they managed to spend less (educators from CPL).

Educators consider the given amount of money sufficient for paying symbolic accommodation rent, all life expenses that are organized by categories (transport, mobile phone, rent, food, clothes, leisure etc.) and making savings. In other words, they create the social meaning of money that young people receive (Zelizer, 1994). The concept of savings deserves special attention in this context:

They must have savings, the amount is different from youngster to youngster according to their expenses and needs, some save more, other save less but it's mandatory to have some kind of savings. Can be 20 euros. They have to gain the habit of saving to be able to understand the savings are for an emergency, health issues that they might have and need to resolve quickly, for educational courses that they want to attend, English course, something (educators from SCML).

Youngsters find that skill of making savings very useful, since they could use saved money for something they consider important:

As I started to earn money when I was young, I got money from both Santa Casa and my job. I had quite a lot of money and didn't know how to manage it. The educators were very helpful with it. I got pregnant and started living with my husband, we could make

repairs in the house, prepare it to welcome a baby. I bought everything [spending saved money]. (Sara, 26 y.o., 2 years in residential care and 7 years in the Autonomization Apartments of SCML);

When I was saving for the trip to England, I was given 500 euros or something and I had to save. Imagine you agree with your assistants and you need to put some sum of money away, your savings. And they control, after a few months, they look at your receipt and they need to, otherwise... it was really nice (Marco, 26 y.o., 16 years in residential care and 5 years in the Autonomization Apartments of SCML).

Another important strength of the services offered in the Autonomization Apartments that was reported by educators from CPL is a complex team assessment of clients' needs. The team discussion is an important tool in solving problems since the team includes educators, psychologists, and social workers:

Imagine there is a paint in your house and for you it can be always the same, but your guests can see something different. The same is with youngsters' problems and looking at them from different perspectives (educators from CPL).

Educators from SCML also mentioned the importance of help from different specialists in their everyday work. Youngsters in their Apartments can be directed to the psychological counselling any time they need special support. SCML can easily provide this help.

However, despite such a powerful support that can be offered to young people in this project, and resources that teams dispose, educators see a crucial obstacle to sufficient preparation of service users for independent life.

#### 4.4.3. Weaknesses

The central obstacle is the unwillingness of young people to cooperate. Professionals interpret their behavior as an attribute of beginning new stage of life in unfamiliar environment where young people do not have enough orientations:

The majority of problems in our work are connected with new students when they adopt to a new reality. It's probably the first time when they're alone, have to relate to other people in the apartment, it's a completely new experience. Sometimes they refuse to be there and this is the obstacle that we face (educators from CPL).

There are cases when young people continue to deny cooperation with educators and, in these cases, professionals have to admit the fact that not everyone is able to go successfully through their programme:

If they [young people] do not fulfil their individual plans, or do it in a rather awful way, there is no other way... because...since the majority of the youngsters are 18 or older and, as adults, they have full liberty and full responsibility for being in this process. If they don't go to school, search for work, don't do domestic tasks, if they're getting to serious conflicts with other residents, then we have to think that this is not the best answer for them (educators from SCML).

One of the informants, who took part in the project, also mentioned that not every youngster is ready to live in autonomy apartments:

They give you a house and money and just that meeting once per week but none is there, none sleeps there, so you do whatever you want. But many guys in the autonomy flat did the things that were crazy, it didn't make sense for them to live there (Marco, 26 y.o., 16 years in residential care and 5 years in Autonomization Apartments of SCML).

It raises the need in test system for filtering those who cannot adapt to unfamiliar environment and have a potential to interfere with flat mates. Such youngsters probably need an alternative programme with extra support.

#### 4.4.4. Opportunities

The openness of the organizations to innovative ways of intervention and assistance facilitates the programme to take advantage of opportunities to improve the services offered to users. For instance, Casa Pia de Lisboa develops the related project on giving assistance to young mothers in vulnerable situations.

Another opportunity relates to the new law on extension of the period that young people can stay in residential care to the age of 25 years. This initiative can stimulate young people to study and stay in the Autonomization Apartments longer to gain more skills for adult life. However, even before this law, SCML offered support to young people until they turn 25 due to their financial autonomy that gives them "a little bit more breathing space to organize services". In this context, SCLM seems more flexible than CPL, young people can stay in SCML longer and even if they begin working:

We can give the time. If a youngster is always working on his individual plan, he/ she can be with us for several years, 6, 5 or 7, because he/ she needs that time. Sometimes there are kids that can use this service for one year only (educators from SCML);

Because they start working, they do not want to study anymore, so usually they stay for 2 years. It does not mean that they are not allowed to stay more. They just prefer to leave in 2 years in general (educators from CPL).

It is worth mentioning that after leaving the Autonomization Apartments, young people have an opportunity to continue getting the support of educators. Interviewed professionals mentioned that former clients turn to them for any kind of support:

We have youngsters that left many years ago but still contact us requiring help for this kind of certain [bureaucratic] things. They tend to reserve to us in the moments of difficulties in their lives, even emotional difficulties, when they want to share with us certain difficulties with their parents or their girl-/boyfriend, or their job. Or when they're worrying and need to make decisions and they don't know which decision to make (educators from SCML);

We have examples of people who keep in touch very often because they need support in solving their problems or just to be together (educators from CPL).

Thus, educators became a part of young people's specific "family welfare" or support network that, as it was mentioned before, is one of the factors of care leavers' better life outcomes.

#### 4.4.5. Threats

The main threat that the professionals recalled was educational and occupational situation of their service users. Because of the mentioned above trend of getting mainly secondary professional education, care leavers can remain unemployed for relatively long periods or rely on quite low wages. It, in turn, raises concerns about being able to pay life expenses after leaving the apartments:

What can be improved in our services is support with access to job. Because if you have no job, you don't have money, if you don't have money, you have nothing. Now things are getting better but few years ago, the things were really difficult. We had some youngsters in our services that were out of jobs for months. It's the reality of the labor market and low certifications (educators from SCML).

This aspect of care leavers' lives seems extremely important, since good education and job are the factors of successful dealing with social reality, especially in the circumstances of economic fluctuations.

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Despite the reported weaknesses and threats, the educators declared positive attitudes towards readiness of their service users to independent life after leaving the Apartments:

When they leave care, the majority of them are independent in dealing with health issues, financial issues, and other things that are more bureaucratic like something that has to do with social security system (educators from SCML);

We feel that sometimes our young people are even more prepared to real life and to independent life than other young people [without living in care background] are (educators from CPL).

The histories of interviewed care leavers who participated in the Autonomization Apartments project confirm the positive effect of the programme on their lives.



## 5. Conclusion and Recommendations

This last chapter focusses on the conclusion and recommendations based on the research results; it also includes reflections on used methods, as well as limitations of the work and prospects for further research on the topic.

### 5.1. Conclusion and Discussion

The life course tradition was chosen as the main framework with a focus on social ecology and demographical behavior determinants that were generated in this interdisciplinary study to explain trajectories of the Portuguese with and without the experience of living in residential care facilities. The resulting analytical model offered a set of multilevel subsystems to contextualize transition of Portuguese people to adulthood with childbearing as its key marker. This model demonstrated its potential to explain the choices young people made on the way to independence. However, it did not consider such concepts as the extent of traumatization and resilience that appeared from the narratives of the informants.

The quantitative data of the Portuguese part of ESS-Round 3 and the methods of cluster analysis and descriptive statistics were applied to trace family formation and transition to parenthood trajectories of six cohorts of people (born in 1930-39, 1940-49, 1950-59, 1960-69, 1970-79, and 1980-89) without the experience of living in residential care. The analysis disclosed 9 clusters of the Portuguese according to trajectories they chose. Trajectories "Early marriage, childbearing" (38%) and "Late marriage, childbearing" (21%) were the most common among the respondents of ESS-Round 3. 17% of respondents followed the trajectory "No family formation events". Such a high percent is the result of behavior of the youngest cohort representatives who did not have time to start matrimonial and reproductive events by the moment of data collection in 2006. Other respondents followed the trajectories "Early cohabitation, marriage, childbearing" (6%), "Late cohabitation, marriage, childbearing" (5%), "Marriage, no children" (5%), "Cohabitation, childbearing" (4%), "Cohabitation, no children" (3%), "Cohabitation, marriage, no children" (1%). Portuguese people preferred to enter first matrimonial union of any type and give birth to a first child after finishing full-time education and entering the labor market. First two trajectories were prevalent in three older cohorts where more than 70% of men and women followed them. Men preferred to start family formation later than women did. This trend was also preserved for trajectories started with cohabitation: late start was an attribute of males' trajectories while earlier entry into matrimonial union of any type was more often chosen by female population of the ESS-Round 3 sample. The family

formation and transition to parenthood trajectories of three younger cohorts look more diverse comparing to older cohorts. The weak points of quantitative part of the study are the absence of personalized data about the life courses of Portuguese people born in 1990-99 to contextualize the lifelines of informants from the young cohort and lack of appropriate variables about young ages of ESS-Round 3 respondents to present the social portraits of people from each cluster at the moment when they accomplished their passages. This information could enrich the study.

The qualitative data of 10 biographical in-depth semi-structured interviews (3 women and 7 men) collected among care leavers from older (born in 1930-59) and young (born in 1990-99) cohorts based on purposeful sampling and snow ball techniques were analysed using lifeline analysis and thematic content analysis methods to trace the trajectories of this specific group of the Portuguese and understand factors of their better life outcomes. The lifeline analysis demonstrated that trajectories of male informants look more “normal” in the context of trajectories of general population than the trajectories of female care leavers. Informants from older cohorts received higher education and enter the labor market later than their peers who grew up in biological families. Timing and sequence of transition to adulthood events of the informants from the young cohort do not seem aberrant. Depending on experiences the informants had, the partnership and parenthood could function for them as “means of having normal life”, “desired stage of life after achieving stability”, “logical development of romantic relationships”, “following social norms”, “means of getting independence”, “hindrance to career”; it also could be the combination of several options. The participants were not afraid of forming a partnership and becoming parents. The content thematic analysis revealed the model of stages that care leavers go through from the childhood to independence. Pre-care stage explains where and in what family a child was born, why and at what age he/she entered residential care. In-care stage summarizes the information about contacts of a child with family members, peers, and educators; it also describes the preparation of a youngster for an adult life. These two stages give the information about the extent of traumatization and resilience of a child in danger, the support network he/she forms before leaving care. After-care stage has been divided into two periods that can occur one after the other (in any order) or in parallel: 1) receiving education and making a career and 2) transition to partnership and parenthood. The factors of care leaver’s better life outcomes, shaped at these three stages, are low traumatization, extended durable support network, and valued education. For older and young cohorts, the role of residential care seem different because of multilevel changes in the country. Care leavers from older cohorts were empowered by means of education that favorably distinguished them from the majority of people in the country. Moreover, male Casa Pia leavers had a powerful

support network in the form of ‘brothers’ and casapianos from other cohorts who could be found in many professional spheres. Women from older cohorts also could get education and support but their experiences in the institution sound to be traumatizing. Young care leavers seem to lose the advantage of better education since the democratization of the education system in the country. They received other advantages though: de-institutionalized environment, opportunity to stay in care longer, gain practical skills for independent living, and use the support of psychologists to deal with adversity.

The qualitative data of interviews with three pairs of educators from autonomization apartments were analyzed using the SWOT technique to examine the process of young cohort of care leavers’ preparation for adulthood. The analysis showed that the Autonomization Apartments project functions as a gender-segregated accommodation for care leavers and other vulnerable youngsters at the age of 15-25 years who are studying. They are trained to start the independent life by the technical teams that include social workers, educators, and psychologists. The main strengths of the project that educators have recalled are the opportunity to give individual and group support, close friendly relationships between the team members and youngsters, huge variety of skills that are offered to young people for developing, multiprofessional team approach to solving each youngster’s problems. The central obstacles to work of educators are the unwillingness of young people to cooperate with them and mental unpreparedness of some service users for living in this type of environment without daily assistance. The opportunity is that even after leaving the autonomization flat, every young person can receive support from professionals in case of need. Another opportunity is given by the newly appeared Law on the Protection of Children and Young People in Danger that extends the period of staying in residential care up to the age of 25 years and potentially will encourage youngsters to study and stay in the apartments longer. The key threat to the work of professionals (that they try to diminish) is educational and occupational situation of service users. Because of the trend of getting mainly secondary professional education, care leavers can remain unemployed for long periods or rely on quite low wages that raise concerns about their ability to pay life expenses after leaving the apartments.

It is worth mentioning that information received from care leavers and educators has been synthesized and used in answering all research questions. The data of main interviews have been supplemented by author’s observations in several residential care facilities during MFamily internships and interviews with the representative of Associação Casapiana de Solidariedade who works in the association and was studying in Casa Pia de Lisboa and a young man who was also studying in Casa Pia de Lisboa. However, women’s perspectives seem underrepresented in this work because of their unwillingness to discuss this sensitive topic. One

more weak point of the qualitative part of this research was an absence of voices of young casapianos who could tell about their trajectories and complement the information received from educators about the process of care leavers preparation for independent life in the Autonomization Apartments programme of Casa Pia de Lisboa. Moreover, the research mainly explored the trajectories of successful care leavers while the histories of those who could not achieve a lot remained unexplored. Despite these limitations, quite comprehensive sketch of the researched social reality was obtained. Research results also make it possible to give recommendations on improving the situation of care leavers and suggest a direction for further research on this topic.

## 5.2. Recommendations and Further Research

Autonomization Apartments programme demonstrates its effectiveness in preparing young people in vulnerable situations for independent life. The fundamental point here is that young people must be mentally prepared for receiving this kind of assistance and cooperate with professionals; otherwise, it would be more appropriate to offer them more comprehensive and regular support. Technical teams of the project work in all three areas of improving the chances of care leavers to have better life outcomes. They offer safe environment and psychological counseling (decrease the extent of traumatization), develop close relationships (expand the support network), motivate to continue studying (increase the educational level). The recommendation here is to apply their practices in all residential care homes to support young people in their transition to adulthood. Another measure is to establish the mechanism of stimulating children in care to continue education and aim for university level. One more possible step is creation of state-supported programmes of interaction between employers and care leavers to engage them in labor market. At the same time, efforts to ensure family reunification where it is possible must be made, since, according to the informants, for a child, it is better if his or her caregivers would receive state support that allows a child “to keep emotional connections with family members”.

For the future research, it will be important to make an additional studies on measuring “extent of traumatization” and resilience of children in danger and care leavers in Portugal; exploring gender aspects of living in residential care facilities; and testing the model of life stages and factors of care leavers’ better life outcomes using quantitative data and Structural Equation Modelling.

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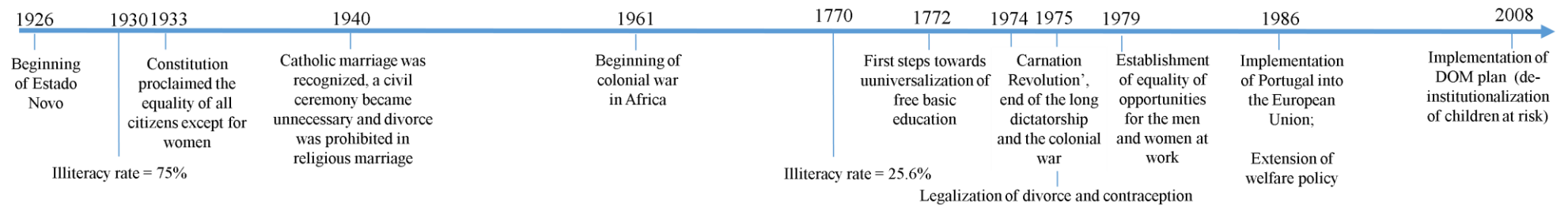


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# Appendix 1: Timeline of Portuguese Society Modernization in XX Century



## Appendix 2: Interview guidelines

This research aims to understand the role of living in residential care in transition to parenthood. It is important to find out what problems care leavers in Portugal face on their way to independent life. Your answers will help young generations of adolescents to have more support after leaving care. All the answers will be analyzed in an anonymous way. Complete confidentiality is guaranteed. However, do not hesitate to take a pseudonym to hide your name.

Do you mind if the interview will be recorded? This makes it easier for me to document what is said during the interview and also helps me in the continuing work with the project. In my analysis, some data may be changed so that no interviewee will be recognized. After finishing the project, the data will be destroyed. The data I collect will only be used in this project.

### 2.1. Interview guidelines for educators

I ask you today to share with me an information about your work on autonomization of young people in care. The goal of this conversation is to examine internal (Strengths and Weaknesses) and external (Opportunities and Threats) elements of preparing young people for leaving care for independent life. In addition to it, I hope you can tell me in general about life outcomes of young people after leaving care: how they organize their educational trajectories, start job, create families.

How long do you work with young people in the process of leaving care?

How do you help young people to become independent? What activities do you have? What skills do you think young people should gain before leaving care? Do you consider your service users ready to independent life at the moment of leaving care? Why?

**Strengths.** What practices do you consider effective? What knowledge and skills do you consider the most important in work of educators?

**Weaknesses.** What practices do not work? What do you think can be improved in the process of preparation?

**Opportunities.** What improvements could be done in near future? What do you need for making it real?

**Threats.** What obstacles do you face in your everyday work? What might cause problems in your work with young people in the future and how?

Do you usually keep in touch with young people after they leave care? Do they ask you for help after leaving? How often? Do you have resources to support them? What problems they usually face after leaving? How they organize their educational trajectories, start job, create families?

**Thank you for your answers!**

## 2.2. Interview guidelines for care leavers

### **Information about the interviewee**

Pseudonym:

Sex:

Year of birth:

### **Childhood and years in the residential care**

Could you please tell briefly about your childhood?

In what year did you first leave your parent(s) for 2 months or more to start living separately from them?

In what year did you start to live in the residence care home?

In how many residence care homes did you live?

In what year did you finish to live in the residence care home?

Did you keep in touch with your parents or other family members while being in residential care? If yes, with whom? How often? Are you still in touch with them?

### **Education**

About how many years of education have you completed, whether full-time or part-time? Please report these in full-time equivalents and include compulsory years of schooling.

What is the highest degree of your education?

What did you study?

How did you choose your specialization?

Did the residential care professionals help you with education? If yes, what kind of help it was?

### **Job**

Have you ever been in paid employment or a paid apprenticeship of 20 hours or more per week for at least 3 months?

In what year did you first start working in a job like this?

Does your work correspond to your education specialization?

Have you ever had difficulties with getting job? Could you please tell about them?

Did the residential care professionals help you with getting job? If yes, what kind of help it was?

### **Family and Children**

Have you ever lived with a spouse or partner for three months or more? In what year did you first live with a spouse or partner for three months or more?

Are you or have you ever been married? In what year did you first marry?

Could you please tell briefly, where and how you met your spouse or partner?

Have you ever given birth to/fathered a child? In what year was your first child born?

How many children have you ever given birth to/fathered?

There were research in several European countries about the life of care leavers. The results showed that after leaving care young people do not want to create family because they are afraid to be partners or parents. Have you ever had these fears? If yes, could you please tell about them?

Are you or have you ever been divorced? In what year did you first divorce?

### **Preparation for leaving care and independent life**

What were the preparation, opportunities and support in residence care regarding education, job, partnership and parenting before leaving?

What were the skills you have been exposed to (family or domestic skills, skills/ life skills/)?

Do you remember if you felt prepared enough for independent life after leaving home? In what spheres did you feel more prepared and in what less prepared?

Do you think youth who lived in residential care in Portugal have the advantages over youth who grew up in their biological families? If yes, could you please specify?

Have you faced any discrimination based on your living in care background? Or maybe stereotypes? If yes, could you please share this information?

Did you meet your residential care friends after leaving? If yes, how often? Are you still in touch with them? Do you know how they organized their lives? What problems they faced?

Did you meet with or talk to your educators after leaving care? If yes, how often? Are you still in touch with them?

Do you think it is a good idea if residential care professionals would follow up care leavers after leaving in order to support them if needed? Since it is quite sensitive process, how should they do it?

**Thank you for your answers!**

# Appendix 3: Informed Consent

## In English

The following is a presentation of how I will use the data collected in the interview.

In order to insure that projects meet the ethical requirements for good research I promise to adhere to the following principles:

- Interviewees in the project will be given information about the purpose of the project.
- Interviewees have the right to decide whether they will participate in the project, even after the interview has been concluded.
- The collected data will be handled confidentially and will be kept in such a way that no unauthorized person can view or access it.

The interview will be recorded as this makes it easier for me to document what is said during the interview and also helps me in the continuing work with the project. In my analysis, some data may be changed so that no interviewee will be recognized. After finishing the project, the data will be destroyed. The data I collect will only be used in this project. All the answers will be analyzed in an anonymous way.

You have the right to decline answering any questions, or terminate the interview without giving an explanation.

You are welcome to contact me or my supervisor in case you have any questions (e-mail addresses below).

**Student:** Alena Artamonova

[Alena.Artamonova@iscte-iul.pt](mailto:Alena.Artamonova@iscte-iul.pt)

**Supervisor:** Maria das Dores Guerreiro

[Maria.Guerreiro@iscte-iul.pt](mailto:Maria.Guerreiro@iscte-iul.pt)

Interviewee

## **In Portuguese**

### **Declaração de Consentimento Informado**

No contexto da presente pesquisa apresenta-se a forma como os dados recolhidos na entrevista serão utilizados.

De forma a garantir os requisitos éticos necessários garanto salvaguardar os seguintes princípios:

- A todos os entrevistados participantes será dada informação suficiente acerca do propósito da pesquisa
- Os entrevistados podem decidir livremente e a qualquer momento acerca da sua participação ou não no projeto, inclusivamente após a entrevista ter sido concluída
- Todos os dados recolhidos serão tratados de forma confidencial, assim como serão manuseados e arquivados de forma a garantir que nenhuma pessoa não autorizada a eles tenha acesso.

A entrevista será gravada uma vez que esse registo é fundamental para permitir o posterior tratamento dos dados e a sua integração no trabalho de pesquisa. No decorrer da análise e apresentação dos dados recolhidos será garantida a anonimidade dos mesmos de forma a que nenhum entrevistado ou entrevistada sejam reconhecidos. Os dados destinam-se a ser usados exclusivamente para este trabalho e não serão utilizados para qualquer outro propósito.

No final da pesquisa todos os registos de dados serão destruídos.

O entrevistado ou entrevistada têm o direito de a qualquer momento decidir não responder a alguma pergunta ou dar por terminada a entrevista sem a necessidade de dar justificações.

Caso haja alguma dúvida ou questão adicional os entrevistados podem entrar em contacto com a aluna ou a orientadora através dos contactos seguintes:

**Aluna:** Alena Artamonova

[Alena\\_Artamonova@iscte-iul.pt](mailto:Alena_Artamonova@iscte-iul.pt)

**Orientadora:** Maria das Dores Guerreiro

[Maria.Guerreiro@iscte-iul.pt](mailto:Maria.Guerreiro@iscte-iul.pt)

Entrevistado/a



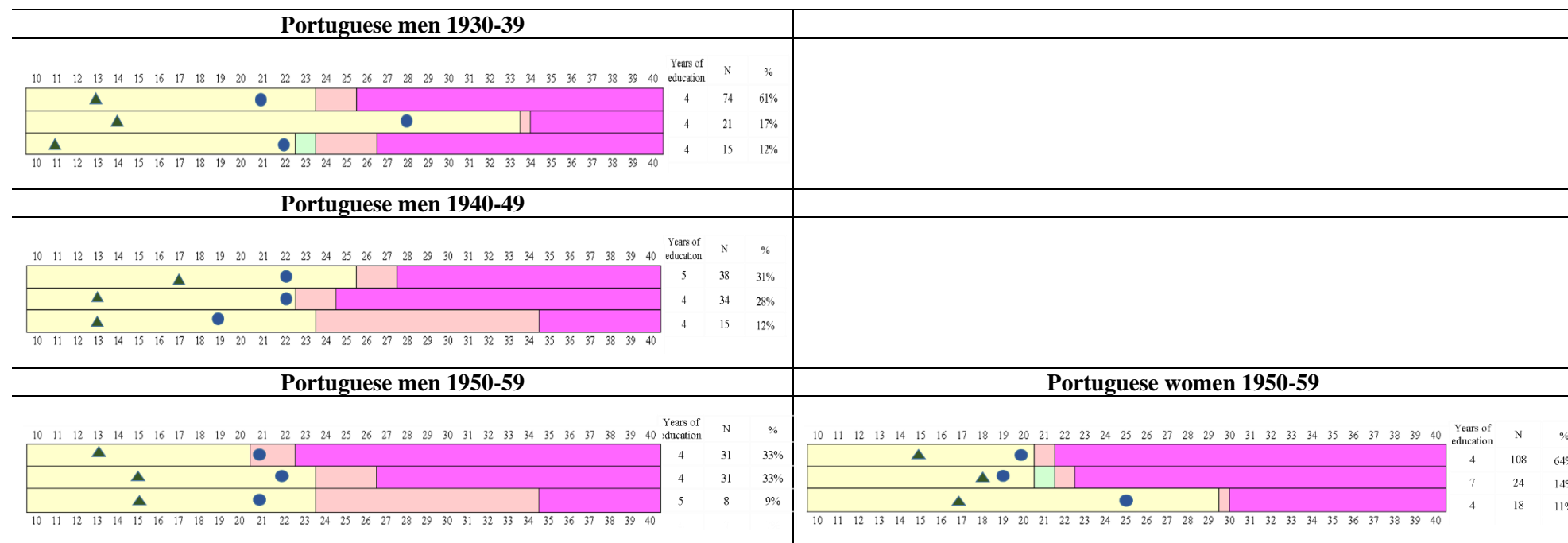
## Appendix 4: Trajectories and Level of Education

### 4.1. Crosstab: Family Formation and Transition to Parenthood Trajectory \* Highest Level of Education

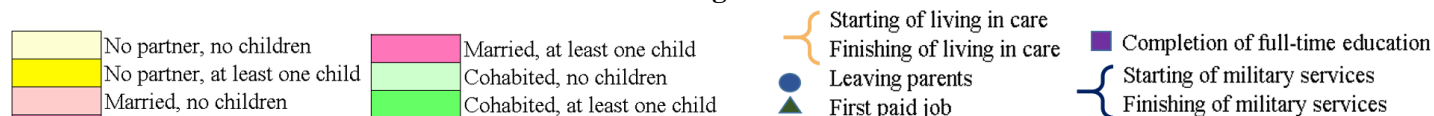
		Highest level of education				Total
		Less than lower secondary education	Lower secondary education completed	Upper secondary education completed	Tertiary education completed	
Early cohabitation, marriage, childbearing	Frequency	66	15	18	10	109
	% в Highest level of education	6,5%	5,7%	5,6%	4,5%	6,0%
	Standardized residual	0,7	-0,2	-0,3	-0,9	
Marriage, no children	Frequency	39	9	21	15	84
	% в Highest level of education	3,8%	3,4%	6,5%	6,8%	4,6%
	Standardized residual	-1,2	-0,9	1,6	1,5	
No family formation events	Frequency	71	78	98	61	308
	% в Highest level of education	7,0%	29,9%	30,2%	27,6%	16,9%
	Standardized residual	-7,7	5,1	5,9	3,9	
Cohabitation, childbearing	Frequency	23	17	13	13	66
	% в Highest level of education	2,3%	6,5%	4,0%	5,9%	3,6%
	Standardized residual	-2,3	2,5	,4	1,8	
Cohabitation, no children	Frequency	6	15	22	15	58
	% в Highest level of education	0,6%	5,7%	6,8%	6,8%	3,2%
	Standardized residual	-4,6	2,3	3,6	3,0	
Late marriage, childbearing	Frequency	241	45	49	52	387
	% в Highest level of education	23,7%	17,2%	15,1%	23,5%	21,2%
	Standardized residual	1,7	-1,4	-2,4	0,7	
Late cohabitation, marriage, childbearing	Frequency	47	18	20	11	96
	% в Highest level of education	4,6%	6,9%	6,2%	5,0%	5,3%
	Standardized residual	-0,9	1,2	0,7	-0,2	
Cohabitation, marriage, no children	Frequency	9	2	7	8	26
	% в Highest level of education	0,9%	0,8%	2,2%	3,6%	1,4%
	Standardized residual	-1,4	-0,9	1,1	2,7	
Early marriage, childbearing	Frequency	516	62	76	36	690
	% в Highest level of education	50,7%	23,8%	23,5%	16,3%	37,8%
	Standardized residual	6,7	-3,7	-4,2	-5,2	
Total	Frequency	1018	261	324	221	1824
	% в Highest level of education	100,0%	100,0%	100,0%	100,0%	100,0%

**Source:** calculations were made by the author based on ESS-Round 3

## 4.2. Normative Trajectories of the Portuguese for Collating with Non-normative Trajectories of Care Leavers from Older Cohorts of the Sample



### Legend



**Source:** calculations and the design of the trajectories were made by the author based on ESS-Round 3