Research Design:
The Social Exclusion of Vulnerable Youth

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1. Introduction

The objective of the research is to conduct a longer-term study on the social exclusion of vulnerable youth. Vulnerable youth in this study is defined as youth in and from alternative/informal care settings (beyond SOS Children’s Villages) and in vulnerable families at risk of losing parental care. There is a notion that this category of youth is outside the scope and statistics of SOS Children's Villages and most other organizations and institutions, yet they deserve attention since they seem to suffer from psychological problems and face constrained opportunities later on in life when seeking higher education, employment, access to social and professional networks, and building a family life.

The underlying approach of the research aligns with the new Sustainable Development Goals 'Leave no one behind' mission and resonates with donor interests. The UN Guideline for the Alternative Care of Children (2010) follow a Human Rights-based approach, which remains key to the mission goal of SOS Children's Villages. At the same time, a more comprehensive approach to child ‘wellbeing’ (social and emotional) and sustainability (of care, livelihood, etc.) is currently advocated under an Inclusive Development approach. This research builds upon both approaches in an integrated and well-focused manner.

This research focuses on vulnerable youth, specifically on young people who have lost or are at risk of losing parental care. The social exclusion of vulnerable youth is a context specific problem, but the mechanisms underlying the problem show resemblance across different countries and locations. Social exclusion of vulnerable youth occurs in poverty-struck, developing countries, but is also experienced in rich countries. If youth is not faring well, this poses present and future challenges to social, political and economic performance and stability.

In the scant literature that is available on the topic of social exclusion of vulnerable youth, the following knowledge gaps have been identified:

1. Empirical evidence on vulnerable youth (i) in and from an alternative/informal care setting and (ii) in vulnerable families at risk of losing parental care, being actually socially excluded and marginalized

2. A deeper understanding of how, why and by whom social exclusion/self-exclusion of vulnerable youth takes place, and to what extent

3. Lack of knowledge on how vulnerable youth are faring later on in life after leaving care – in terms of their employability, income, social status, family building, access to social institutions and networks and social/psychological skills (self-esteem etc).

4. How (2) and (3) differ across (1.i) and (1.ii).

Based on these knowledge gaps, the main research question is:

How are vulnerable youth affected by social exclusion in terms of their human wellbeing, employability and social acceptance?
2. Theoretical Framework

2.1 Introduction
This chapter explains the theoretical framework that will guide the overall research project. The theoretical framework highlights the epistemological and theoretical approach, the key concepts used, and the inter-relationships studied to answer the research questions. In section 2.2 the relational approach is explained as the overarching epistemology for understanding the complex interactions between structure, agency and human wellbeing. In section 2.3, we zoom in on the key concepts that feature most prominently in this research: vulnerable youth, social in- and exclusion, self-exclusion, relational images, and wellbeing. Finally, in section 2.4 the conceptual model is presented in Figure 1, visualizing the theoretical focus of this research.

2.2 Taking a Relational Approach
The epistemological perspective that informs this study is a relational approach to structure, agency and human wellbeing. Structure is defined as the systemic arrangements that influence or limit the choices and opportunities available. Agency is defined in broad terms as the capacity of individuals to act on their own behalf and make free choices (Barker, 2005). Human wellbeing is defined in line with McGregor (2007) and WeD (2007) as "the state of being with others, where human needs are met, and where one can act meaningfully to pursue one’s goals, and where one enjoys a satisfactory quality of life". Human wellbeing is broken down in a material, social-relational and subjective dimension (McGregor 2007). This provides room for bringing in subjective evaluations of what a person is able to have, be and do in life. Structure and agency interact when determining human wellbeing. Human wellbeing and ill-being are two sides of the same coin and social exclusion can be considered a form of 'ill-being', caused by an individual (or groups of individuals) feeling disconnected from their relational environment (see also Walker 2002).

Social exclusion is both a process and outcome leading to disempowerment. Beall and Piron (2005) define social exclusion as "... a process and a state that prevents individuals or groups from full participation in social, economic and political life and from asserting their rights. It derives from exclusionary relationships based on power." (p. 9). Human beings move through different relations over a life-time. This movement is referred to as "relational movement", which is "the process of moving through connections, disconnections and back into new connections"(Comstock et al. 2014). Relational movement can be positive (strengthening existing relations, establishing new relations) or negative (breaking down (positive) relationships, avoiding new relationships, forming negative relationships). In anticipation of relational movement, people construct self-images of relationships (expectations of how they will be treated) and develop images of others in that relationship (Comstock et al. 2014, p. 284). These are referred to as relational images, which are individual expectations of how youth will be treated (self-images), based on previous treatment (e.g. parental neglect during childhood may cause young people to believe they will not be loved, or they feel frightened, inferior or ashamed), and images that others hold as to how the individual will act and who is to blame for their exclusion (caregivers, teachers, future employers, etc. For example, teachers may expect a student from care to be “troublesome” and/or blame the student for their personal situation). Inter-personal relations are enacted, based on these self-images and images of others. Understanding this enactment of youth in inter-relationship to their caregivers, peers and future employers, forms a central focus of this study.
Social structures and self-exclusion

Walker (2002) emphasizes the importance of every individual to feel ‘connected’ over the lifetime. Chronic experiences of disconnection lead to feelings of condemned isolation and ongoing disempowerment (Miller and Stiver 1997). From a broader, societal perspective scholars have argued that is important to recognise the contextual factors and social injustices which cause exclusionary and discriminatory experiences (e.g. Fraser 1995, 1997, 2005; Walker 2002). Social exclusion, they argue, illustrates the “myth of meritocracy” which leads to “condemned isolation”. Here, people blame themselves for failing to achieve in life rather than recognising the structural factors working against them under the surface (Comstock et al., 2008, p. 282). Exclusion and oppression are thus institutionalised at the societal level, however are also necessarily enacted in interpersonal relationships (e.g. between youth and caregivers, peers and society).

Taking a relational approach to the study of ‘social exclusion of vulnerable youth means that ‘social exclusion’ can only be understood if the research subjects, i.e. ‘vulnerable youth’, are considered in connection to other people and the relevant structures around them. In this way, we can begin to understand social exclusion as a relative problem, more than an absolute problem (see also Colley, 2001, p. 8). Social exclusion of vulnerable youth boils down to the problem of being ‘relationally disconnected’ from other people, and from the social, political and economic structures around them. Social exclusion of vulnerable youth, therefore, cannot be understood by looking at circumstantial factors alone (Alston and Kent, 2009; Beall and Piron, 2005; Colley, 2003; Gaetz, 2004; Thompson, 2011). Moreover, relationships to people and structures are culturally laden; some relationships are considered more valuable than others. It is therefore important to take personal and social-cultural values into account when trying to understand why youth is (dis)satisfied with what they are able to achieve in life (or not).

Psychological health and emotional maturity are subjective elements of human wellbeing that can be negatively affected by the experience of social exclusion.¹ Although, this study will not venture into a psychological investigation, it does recognize subjective wellbeing as an important aspect of youth wellbeing and therefore will provide room for subjective data (feelings, opinions).

Social exclusion can create social inequalities that are passed on from one generation to another (Susinos, 2007, p. 118). Cultural oppression, marginalisation and social isolation leads to further isolation, shame and humiliation – and, in turn, to self-exclusion. Those who are socially excluded share similar social, economic and political barriers and constraints, and lack security, justice and economic opportunities in life in general (Berkman, 2007). This means that there are two sides to the story and social exclusion may lead to self-exclusion and vice versa (Chirwa, 2002). Where social exclusion of particular groups of people is systematic and persistent over time, studies speak of ‘discrimination’ (e.g. DfID, 2005, p.3), or marginalisation of specific population sub-groups.

¹ Psychological studies, such as Comstock et al. (2008) adopt a relational-cultural theory to the study of social justice counseling competencies, and emphasize how inter-personal relations (‘growth-fostering relationships’) can either foster or impede relational connectedness.
Social exclusion of youth as an emergent problem

There is a growing awareness in the recent literature that the social exclusion of vulnerable youth is an emergent problem, arising out of the relationship between broad-based societal change and social inequality (Savelsberg and Martin-Giles, 2008, p. 21; Paolini, 2013) and ideology (Thompson, 2011). The myth of meritocracy leads to self-blame and self-exclusion (Comstock et al. 2008) of young people who are in an important identity building phase of their life.

Youth is defined as a transition phase between childhood and adulthood, which is also described as “waithood” by Honwana (2014). Waithood represents a period of suspension between childhood and adulthood, in which young people’s access to adulthood is delayed or denied. While their chronological age may define them as adults, they have not been able to attain the social markers of adulthood: earning a living by being in training or in a job, becoming independent, establishing families, providing for their offspring and other relatives, and becoming taxpayers. (Honwana, 2014). Such disturbances, barriers and denials of social relationship building during this transition phase can lead youth to adopt alternative coping strategies, which sometimes deepen their social exclusion further (e.g. conflict, crime, exploitation, drug use, homelessness, opting out and non-participation).

Special attention needs to go to vulnerable youth in society, who have experienced, or are at risk of, losing parental care and experiencing disconnection, abandonment, or isolation. In this study, we will zoom in on vulnerable youth who are in or come from alternative/informal care settings, and in vulnerable families at risk of losing care. There is little known about this population of ‘vulnerable youth’, who tend to be largely invisible in institutional records and statistics. Careleavers form a special sub-group among vulnerable youth, having lived within a care institution for some period of their life. When they reach the age when they must leave the care institution, the transition phase from childhood into adulthood is typically very short, as careleavers must immediately find accommodation and earn an income. Moreover, during this transition they often lack the financial and emotional support that their peers tend to receive from their families, and which they can fall back upon in case of need, mistakes or failure (Frimpong Manso, 2012; HM Government, 2013, p.4; Stein, 2006, p.3). As a result, careleavers are more likely than their peers to not achieve in education and employment, and they are vulnerable to homelessness, drug use, crime and exploitation (Berkman, 2007; HM Government 2013, p.16).

The employability of vulnerable youth is at stake due to social exclusion; yet, at the same time, being employed is a key factor of becoming socially accepted as an adult in present-day societies. Employability refers to “a set of achievements – skills, understandings and personal attributes – that make graduates more likely to gain employment and be successful in their chosen occupations, which benefits themselves, the workforce, the community and the economy.” (Yorke and Knight, 2006, p. 3).

Vulnerable youth, in general, pose multiple challenges to present and future social, economic and political stability and social cohesion, especially in populations that are changing rapidly – for example, in the rapidly growing cities of Africa where there is a lot of un- and underemployment.
Drivers and outcomes of social exclusion

Drivers of social exclusion of vulnerable youth are complex and context specific. From the literature review (Pouw and Hodgkinson, 2016) and expanding on Bynner 2001, we recognize the following drivers of social exclusion:

- Childhood risks (disability, illness, malnutrition, poverty, poor school attendance)
- Family risks (broken families, uneducated parents, low aspirations of parents, neglect, absence, loss of parents)
- Economic risks (poverty, overcrowding, poor accommodation, deprived area, jobless parent(s))
- Social risks (inequality and marginalization, breaking away from social ties when moving into city, discrimination/stigmatization (ethnicity/caste/religion), lack of preschool education and socializing)
- Political risks (voiceless, not involved in decision making, disempowered, violence/conflict settings)

The outcomes of social exclusion are causal to a new/deeper process of social exclusion themselves. Driving forces of social exclusion (or risks thereof) are mutually reinforcing and can lead to a vicious circle (downward spiral) (Berkman 2007). Early experiences in life of social exclusion affect later ones, making social acceptance more and more difficult (Bynner 2001). Social exclusion leads to internalization of the problem itself which results in self-exclusion (Alston and Kent, 2009. P.93; Paolini, 2013, p.7; Ucembe, 2013, p.31).

The literature review (Pouw and Hodgkinson, 2016) recognised the following (intermediate) outcomes of social exclusion of vulnerable youth in the literature:

- Hampering/frustrating the transition to adulthood in such a way that social markers of adulthood cannot be attained
- Not being socially accepted
- Self-blame and internalization of ‘failure’ (not recognizing structural factors)
- “No-one to turn to” (personal, institutional, financial)
- Improvised livelihoods (coping by alternatives)
- Unemployment, underemployment or exploitation
- Psychological and health damages accumulated over a life-time
2.3 Key Concepts and Relationships studied

From the literature review (Pouw and Hodgkinson, 2016) the following ten key concepts that will feature in this empirical study were identified and defined.

(i) Social Exclusion

Social exclusion is seen as a process and outcome at the same time. It is defined as a process and state that prevents individuals or groups from full participation in social, economic and political life and from asserting their rights. It derives from exclusionary relationships based on power (Beall and Piron, 2005: p. 9).

(ii) Vulnerable Youth

In this study, vulnerable youth is defined as youth in and from alternative/informal care settings and in vulnerable families at risk of losing care (also ‘disadvantaged’ or ‘marginalised’ youth). Youth in general is defined as a transition phase between childhood and adulthood (see for example Barnardos, 2006; Bynner and Parsons, 2002; Frimpong Manso, 2012; HM Government, 2013; Johnston et al, 2000; Raffo and Reeves, 2000; Stein, 2006). What is defined as ‘vulnerable youth’ differs a lot across country and location. Context specific definitions will have to be developed during the research process.

(iii) Self-Exclusion

Self-exclusion is the process of excluding one-self from a social relation or activity, often induced by self-blame, shame and mistrust vis à vis the expected outcome and present or expected exclusion by society.

(iv) Connectedness

Connectedness refers to being and feeling connected to others in a social-relational environment. This concept can thus be operationalized in objective and subjective ways (Comstock et al 2008).

(v) Relational images

Relational images are individual expectations of youth of how they will be treated (self-images), based on previous treatment, and images of others as to how youth will act and who is to blame for their exclusion (Comstock et al 2008).

(vi) Relational movement

Relational movement is the process of moving through connections, disconnections and back into new connections. Relational movement of vulnerable youth can be positive or negative – the latter due to disturbances, barriers and delays in the transition phase from childhood to adulthood (Comstock et al 2008).

(vii) Drivers of Social Exclusion

Social, cultural, political and/or economic factors embedded within the institutional context that cause and sustain the process of social exclusion and self-exclusion.
(viii) **Employability**

“A set of achievements – skills, understandings and personal attributes – that make graduates more likely to gain employment and be successful in their chosen occupations, which benefits themselves, the workforce, the community and the economy” (Yorke and Knight, 2006, p. 3).

(ix) **Social Acceptance**

Social acceptance is defined as the acceptance of a person (or group of persons) into a group or society as a whole.

(x) **Human Wellbeing**

Feeling satisfied with what one can have, be and achieve in life.

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Figure 1 – Conceptual Scheme
2.4 Conceptual Scheme: Vulnerable Youth in Transition

These ten key concepts and their inter-relationships are presented in the conceptual scheme (Figure 1). If vulnerable youth, during their transition from childhood into adulthood, experience barriers, disturbances or delays, due to childhood disadvantages in the social, cultural, political or economic domain, this may lead to social exclusion and/or self-exclusion because of negative relational movement. Negative relational movement consists of increased levels of disconnectedness, negative self-images and images of others, and the breakdown/loss of social relations. Positive relational movements may help vulnerable youth to overcome experiences and feelings of social and self-exclusion and develop counter strategies. Ultimately, this will affect their level of social acceptance, employability and human wellbeing.

3. Research Context

3.1 Introduction

In this section the four selected research countries are introduced, as well as the SOS programmes and activities and an initial listing of vulnerable youth characteristics. The selected countries are geographically spread over four continents and cover both low-income and high income countries: Côte d’Ivoir, Guatemala, Indonesia and the Netherlands. In the first three countries, SOS Children’s Villages has a long-standing presence (since 1971 in Côte d’Ivoir) and multiple programmes running in different locations. The Netherlands was included to compare and contrast some of the mechanisms underlying the social exclusion of youth between a relatively affluent country and deprived countries. Such an approach follows from the new Sustainable Development Goals that aim to create collaborative partnerships between countries (United Nations 2015).

3.2 Research Countries

- **Côte d’Ivoir**

In Côte d’Ivoir, SOS Children’s Villages runs programmes in three locations: Abobo (since 1971), Aboisso (since 1983) and in Yamoussoukro (since 2014). The activities range from taking care of children in SOS Families, in transit homes and in Family Strengthening Programmes (FSP). Other activities include health (life skills and reproductive health care) and education (schools and vocational training). Youth specific activities include: integration into biological families, socio-professional training, income generating activities and support in job search by youth.

Over the year 2015, SOS Children’s Village Côte d’Ivoire has taken care of 449 children in SOS Families, 33 children in transit homes and 1,650 children in the FS programmes. In addition, the Abobo health facility and the Yamoussoukro Life skills and reproductive health center have provided preventive cares to 8,773 clients and curative cares to 3,536 clients. Finally, access to education to 966 children has been provided at primary and secondary level (SOS Côte d’Ivoir, 2015, p.6).

Youth, on average, leave the parental care programmes at age 21. Reasons for leaving vary from having become independent and self-sufficient, reunification with biological family, personal
choice, or death. A summary overview of the number of youth reached through their activities in 2015 in Abobo, Aboisso and Yamoussoukro is shown in Table 2 below.

Table 2: Côte d'Ivoire: SOS Children's Villages Locations, Activities and Outreach, 2015

<table>
<thead>
<tr>
<th>Location</th>
<th>Activities</th>
<th>Number of youth* reached</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abobo-Gare</td>
<td>- Integration into biological families</td>
<td>28</td>
</tr>
<tr>
<td></td>
<td>- Socio-professional training</td>
<td>80</td>
</tr>
<tr>
<td></td>
<td>- Income generating activities</td>
<td>38</td>
</tr>
<tr>
<td></td>
<td>- Support youth in job search</td>
<td>30</td>
</tr>
<tr>
<td>Aboisso</td>
<td>- Integration into biological families</td>
<td>28</td>
</tr>
<tr>
<td></td>
<td>- Socio-professional training</td>
<td>80</td>
</tr>
<tr>
<td></td>
<td>- Income generating activities</td>
<td>38</td>
</tr>
<tr>
<td></td>
<td>- Support youth in job search</td>
<td>30</td>
</tr>
<tr>
<td>Yamoussoukro</td>
<td>- Reproductive health and life skills</td>
<td>377</td>
</tr>
</tbody>
</table>

*The same youth may have been involved in multiple activities.
Source: SOS Children's Villages Côte d'Ivoir (2015).

SOS Côte d'Ivoire remains in contact with children/youth whom have left, and keep records of them; 18 youth have left in 2015. Over the past five years, the following number of children/youth have left the care programmes:

⇒ From Family Based Care (FBC): 123 children/youth
⇒ From Family Strengthening Programme (FSP): 62 children/youth

Guatemala
SOS Children's Villages has a longstanding presence in Guatemala, since 1976, and is running programmes in five different locations: San Christóbal, Jocathán, San Jéronimo, Quetzaltenango and Retalhuleu. At present in Guatemala there are five SOS Children's Villages, five SOS Youth Facilities, one SOS Vocational Training Centre and ten SOS Social Centers. One SOS Children's Village is under construction (in Santa Cruz del Quiché). Since 2005, SOS has been running family strengthening programmes in Guatemala.

Guatemala is a conflict-affected country, with high levels of poverty, violence, social exclusion of the indigenous population, many widows and orphans, a high rate of child labour, school dropouts, early marriage among girls, and problems of child abuse and dysfunctional families.
Table 3: Guatemala: SOS Children’s Villages Locations, Activities and Outreach, 2015

<table>
<thead>
<tr>
<th>Location</th>
<th>Activities</th>
<th>Number of youth* reached</th>
</tr>
</thead>
<tbody>
<tr>
<td>San Christóbal</td>
<td>- 13 SOS Families&lt;br&gt;- Vocational Training Centre&lt;br&gt;- Youth Facilities&lt;br&gt;- Assisted living</td>
<td>19&lt;br&gt;12</td>
</tr>
<tr>
<td>Jocathán</td>
<td>- Youth Facilities&lt;br&gt;- Assisted living</td>
<td>23&lt;br&gt;13</td>
</tr>
<tr>
<td>San Jéronimo</td>
<td>- Youth homes&lt;br&gt;- Assisted living</td>
<td>18&lt;br&gt;8</td>
</tr>
<tr>
<td>Quetzaltenango</td>
<td>- Youth Facilities&lt;br&gt;- Assisted living</td>
<td>16&lt;br&gt;10</td>
</tr>
<tr>
<td>Retalhuleu</td>
<td>- Youth Facilities&lt;br&gt;- Assisted living</td>
<td>10&lt;br&gt;14</td>
</tr>
</tbody>
</table>

*The same youth may have been involved in multiple activities.

**Indonesia**

In Indonesia, SOS Children’s Villages works in eight locations: Bali, Banda Aceh, Flores, Jakarta, Lembang, Medan, Meulaboh and Semarang, running the Family Based Care (FBC) programme and Family Strengthening Programme (FSP). Within the FBC programme, different care arrangements are offered: family-care, foster care, short-term care, kinship care and youth programmes. The care can be either formal, arranged by a child welfare authority, or (as in most cases) informal or arranged privately. The FSP supports families at risk of breaking down. Family strengthening can also include a wider set of services provided for the community, such as kindergartens, mobile play groups, day-care for children of working mothers, support for young people experiencing the death or loss of an ill parent, legal advice (e.g. rights under the law and government or authority benefit entitlements). Programme interventions are directed at three areas: care, education and health.

In 2015, 5,073 children and young people were beneficiaries of the FSP. 38 children were put into the FBC programme in 2015; 37% of these children were put into care because they had only one parent, 15.7% had lost both parents and 52% had parents who were unable to care for the child.

"Youth" in SOS Children’s Villages in Indonesia are targeted with specific projects. These include youth houses (divided according to gender), self-reliance programmes, counseling, education and career guidance and employment support. In 2015, 41 of 45 integrated youths (careleavers) in Indonesia found employment (SOS Children’s Villages Indonesia 2015).

Based on the end of 2015 the number of children in care are:
Table 4: Indonesia: SOS Children’s Villages Locations, Activities and Outreach, 2015

<table>
<thead>
<tr>
<th>Location</th>
<th>Activities</th>
<th>Number of youth reached</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lembang</td>
<td>- FBC: 138 children (65 girls, 73 boys) &lt;br&gt; - FSP Lembang: 322 children (3 communities) &lt;br&gt; - FSP Yogya: 1,310 children (10 communities) &lt;br&gt; - Kindergarten: 41 children (10 SOS; 31 external)</td>
<td>46</td>
</tr>
<tr>
<td>Jakarta</td>
<td>- FBC: 99 children (44 girls, 55 boys) &lt;br&gt; - FSP: 118 children (4 communities) &lt;br&gt; - Kindergarten: 36 children (11 SOS; 25 external)</td>
<td>34</td>
</tr>
<tr>
<td>Semarang</td>
<td>- FBC: 82 children (38 girls, 44 boys) &lt;br&gt; - FSP: 262 children (3 communities) &lt;br&gt; - Kindergarten: 109 children (6 SOS; 103 external)</td>
<td>24</td>
</tr>
<tr>
<td>Bali</td>
<td>- FBC: 87 children (51 girls, 36 boys) &lt;br&gt; - FSP: 186 children (3 communities)</td>
<td>56</td>
</tr>
<tr>
<td>Flores</td>
<td>- FBC: 124 children (74 girls, 50 boys) &lt;br&gt; - FSP: 1,690 children (19 communities) &lt;br&gt; - Kindergarten: 79 children (4 SOS; 75 external)</td>
<td>77</td>
</tr>
<tr>
<td>Meulaboh</td>
<td>- FBC: 109 children (63 girls, 46 boys) &lt;br&gt; - FSP: 208 children (3 communities) &lt;br&gt; - Kindergarten: 23 children (5 SOS; 18 external)</td>
<td>34</td>
</tr>
<tr>
<td>Banda Aceh</td>
<td>- FBC: 82 children (43 girls, 39 boys) &lt;br&gt; - FSP: 294 children (3 communities) &lt;br&gt; - Kindergarten: 43 children (10 SOS; 33 external)</td>
<td>29</td>
</tr>
<tr>
<td>Medan</td>
<td>- FBC: 116 children (53 girls, 63 boys) &lt;br&gt; - FSP: 478 children (4 communities) &lt;br&gt; - Kindergarten: 66 children (5 SOS; 61 external)</td>
<td>26</td>
</tr>
</tbody>
</table>

Source: SOS Children’s Villages Indonesia Annual Report (2015) and local office records

On average, youth leave care at age 20, but the range differs between age 16 and 22. SOS Indonesia tries to keep in contact with care leavers, either in communication, regular reunions, gather information about their job’s condition, or a little support on their economic conditions. Integrated Youth data is periodically updated, at least once a year. Youth care co-workers usually maintain the communication either through social media, direct visits, e-mail, or contact via mobile phone and share directly to the National Office. In the past year (2015) there were 42 young people who left care from 8 locations. In the past five years (2011-2015) there were 268 young people who left care from 8 locations.

**The Netherlands**

In the Netherlands, SOS Children's Villages does not run any programmes or activities at the moment. Nevertheless, the social exclusion of vulnerable youth is a problem here as well, especially (but not exclusively) in the big cities of Amsterdam, The Hague, Rotterdam, Utrecht, Groningen and Nijmegen where pockets of low-income neighbourhoods prevail and/or where there is a concentration of immigrant communities. A broad range of government and non-governmental initiatives already exist, each with different focus areas, objectives and approaches.
In Amsterdam, youth and elderly are over-represented among ‘vulnerable groups’. The city of Amsterdam uses three indicators to identify vulnerability: (i) inhibited self-supportiveness (ii) socially inactive (iii) socially excluded. Vulnerable groups are over-represented in Bijlmer Centre and Geuzenveld Slotermeer, but are also found in other neighbourhoods. Furthermore, low-educated (or school dropouts) and minority groups (from Moroccan, Suriname and Turkish descent) are relatively over-represented among vulnerable groups. (Factsheet Vulnerable Groups in Amsterdam, 2015)

Within the city of Amsterdam, like in all Dutch cities, the municipality is responsible for Youth Affairs. The municipality has a budget and several initiatives in place to address the problem of youth unemployment, as laid down in the ‘Aanvalsplan Jeugdwerkloosheid 2015-2018’ (Gemeente Amsterdam, 2015). The municipality aims to involve employers, education and training institutions, civil society organizations and youth themselves in designing and implementing these initiatives. Currently, twelve youth help initiatives are running, annually reaching out to 400 vulnerable youth in Amsterdam, in the age group of 18-26 years. Apart from these initiatives, vulnerable youth are directly or indirectly reached by other municipality bureaus, including educational and child/youth and family care services. However, the problem of ‘invisibility’ of vulnerable youth in official records continues to exist in Amsterdam and the Netherlands more broadly, as much remains unknown about what is driving their social exclusion, how they are coping and what works or not, for whom and how.

3.3 Characteristics of Vulnerable Youth
From the literature review (Pouw and Hodgkinson, 2016), we have learned that both the concept of ‘vulnerable youth’ and the social, cultural, political and economic drivers of social exclusion are very context specific –whereas some of the mechanisms (disturbances/contraints/delays in the transition from childhood to adulthood) may be the same. This requires us to adopt a context specific approach that takes into account differences between and within countries in terms of groups of vulnerable youth, their location and the main issues affecting them. Table 1 below provides an initial overview of these country specific characteristics.

From the table and the literature review (Pouw and Hodgkinson, 2016), it emerges that urban settings are especially relevant to vulnerable youth, and therefore this research will focus on urban contexts.

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2 These include the following neighbourhoods: Osdorp, Slotervaart, Bos en Lommer, De Baarsjes Oud West, Westerpark, Oud Oost, Oud Noord, Noord Oost, Bijlmer Noord and Gaasperdam Driemond.
Table 1: Characteristics of Vulnerable Youth in Four Selected Countries

<table>
<thead>
<tr>
<th>Who are vulnerable youth?</th>
<th>Guatemala</th>
<th>Indonesia</th>
<th>Ivory Coast</th>
<th>Netherlands</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• (Former) gang members</td>
<td>• Street youth</td>
<td>• Ex-combatants</td>
<td>• Deprived urban youth</td>
</tr>
<tr>
<td></td>
<td>• Youth from dysfunctional families</td>
<td>• Impoverished/deprived</td>
<td>• Displaced young people</td>
<td>• Ethnic minorities</td>
</tr>
<tr>
<td></td>
<td>• Street youth</td>
<td>• Neglected</td>
<td>• Unemployed and uneducated</td>
<td>• (Illegal) migrants</td>
</tr>
<tr>
<td></td>
<td>• Indigenous youth (especially females)</td>
<td>• Abused</td>
<td>• Impoverished</td>
<td>• Undereducated/unemployed</td>
</tr>
<tr>
<td></td>
<td>• Undocumented youth</td>
<td>• Uneducated/illiterate</td>
<td>• HIV/AIDS prevalence</td>
<td>• Materially deprived</td>
</tr>
<tr>
<td></td>
<td>• Unemployed and uneducated</td>
<td>• Orphans</td>
<td>• Child labour</td>
<td>• Homeless</td>
</tr>
<tr>
<td></td>
<td>• Impoverished</td>
<td>• Child brides</td>
<td>• Abused</td>
<td>• Disabled</td>
</tr>
<tr>
<td></td>
<td>• Spatially excluded</td>
<td>• Child labourers</td>
<td>• Teenage mothers</td>
<td>• Abused</td>
</tr>
<tr>
<td>Location</td>
<td>Urban areas, especially violent neighbourhoods</td>
<td>Urban streets</td>
<td>Exclusion and halted transition to adulthood in rural</td>
<td>Deprived urban neighbourhoods</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Slums</td>
<td>areas leading to youth migration to urban areas</td>
<td>Amsterdam, Rotterdam and The Hague</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>(especially males)</td>
<td>provincial rural areas (Zuid Brabant, Limburg)</td>
</tr>
<tr>
<td>Main issues for young people</td>
<td>• Culture of violence (gang, domestic, violent crime. 80% of victims of</td>
<td>• One in five youth not in education</td>
<td>• Reintegration of ex-combatants</td>
<td>• Lack of social mobility</td>
</tr>
<tr>
<td></td>
<td>young people.)</td>
<td>or employment.</td>
<td>• Unemployment (and the risks of ex-combatants returning to arms if unable to find work)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Street youth face (sexual) assault, exploitation, high levels of STIs</td>
<td>• High levels of physical and sexual</td>
<td>• Rehabilitation of displaced people</td>
<td>• High unemployment and employment discrimination</td>
</tr>
<tr>
<td></td>
<td>and unwanted pregnancies, substance misuse</td>
<td>violence in schools, homes and</td>
<td>• Substance misuse</td>
<td>• Risk of engaging in criminal activity/violence</td>
</tr>
<tr>
<td></td>
<td>• Youth homicide</td>
<td>community</td>
<td>• HIV/AIDS prevalence</td>
<td>• Risks of exploitation (including sexual exploitation – especially for unaccompanied migrant youth)</td>
</tr>
<tr>
<td></td>
<td>• Lack of access to opportunities and rights</td>
<td>• Children on street arrested and</td>
<td>• Child labour</td>
<td>• Risk of school dropout</td>
</tr>
<tr>
<td></td>
<td>• Sexual violence and the homicide of teenage girls</td>
<td>imprisoned, sometimes tortured and</td>
<td>• Trafficking and exploitation</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>killed</td>
<td>• Domestic and sexual violence</td>
<td></td>
</tr>
</tbody>
</table>

4. Research Questions & Methodology

4.1 Research Questions
The main research question is formulated as:

*How are vulnerable youth affected by social exclusion in terms of their human wellbeing, employability and social acceptance?*

The following six generic sub-questions are formulated to guide the overall study:

SQ1. In what ways are vulnerable youth socially excluded, by whom and to what extent?
SQ2. What are the drivers of social exclusion of vulnerable youth?
SQ3. How does social exclusion lead to self-exclusion and *vice-versa?*
SQ4. How does the early experience of being a “vulnerable youth” effect relational movements and connectedness after care?
SQ5. How do the above answers differ between different subgroups of youth (e.g. gender, age, ethnicity, religion, minority group, etc. care setting)
SQ6. How do the above answers differ or converge between country contexts?

Country specific questions will be formulated when deciding upon the study location and research setting.

4.2 Research Methodology
This research uses a mixed methodology approach, combining qualitative with quantitative data collection and analysis. In order to develop an understanding of the context variables, the social, cultural, political and economic drivers of social exclusion, in-depth interviews will be conducted with caretakers and mentors/teachers/employers of vulnerable youth. Individual interviews, social relational mapping and a number of life-histories will be conducted with vulnerable youth to identify the barriers, constraints and delays in their relational movement towards adulthood and what strategies they use in response. Furthermore, these interviews provide input into the design of vignettes that youth can relate to. Focus groups will be organized with vulnerable youth and their social peers (with input from the social-relational mapping), using the vignette methods of relational images to discuss sensitive issues. Where possible and relevant, different groups of vulnerable youth can be compared across different age groups, gender and locations. A final method will be peer-to-peer filming, to collect image data of the daily life and challenges of vulnerable youth within a particular context and setting.

Below is an exposition of the generic data collection methods & tools. Country specific methods and tools will be designed in the process of piloting and implementing the research.

*Semi-structured, in-depth interviews with stakeholders*
Semi-structured, in-depth interviews will first be held with approximately eight stakeholders in each country. Depending on the local context, this will include a caregiver, teacher, (future) employer, youth health worker, a mentor, local SOS staff and a member of a local authority responsible for youth affairs. This will allow for an understanding of the local context and an exploration of the social, political, economic and cultural drivers of social exclusion.
Furthermore it will provide insight into perceptions on the social acceptance of vulnerable youth and an investigation into the (two-way) relationship between social exclusion and youth employability. Stakeholders will also be able to inform us on whether they believe there to be differences in social exclusion and relations across different demographics of vulnerable youth.

**Structured interviews with vulnerable youth**

Structured interviews will be carried out with 40 – 50 vulnerable youth in each county, ensuring to include different subgroups of youth within each context. Dependent on the context, social-cultural or political characteristics will be taken into account (e.g. religion, minority groups), alongside demographics (e.g. gender, age) and care setting. These interviews will be based on a structured questionnaire with both closed and open questions, facilitating the collection of both qualitative and quantitative data. The interviews will explore the perceptions of young people on their on social in/exclusion (including the relevant drivers), the positive and negative relational movements they have experienced, their connectedness and their wellbeing, and indeed the relationship between these concepts. Lap-tops or mobile phones will be used to carry out the survey questionnaires in the field, allowing for speedy and reliable data entry.

The interview will end with a **social-relational mapping** exercise. Here, with the aid of the interviewer, the respondent will draw the relationships in their life, depicting their connectedness and highlighting which people are most important to them, for example to their sense of wellbeing. The exercise may also highlight strong, but negative relationships in their life, which may affect their relational movement towards connection and inclusion.

**Focus Group Discussion**

After the interviews, three to four focus group discussions will also be carried out in each country with a selection of vulnerable youth and their peers. Here, young people with similar characteristics will be grouped (the groupings will be decided upon according to the country context and the themes that arise from the interviews, but could include, for example, gender and ethnicity). These focus groups will allow for both a deeper exploration of concepts and a discussion of more sensitive issues.

**Vignettes** will be used during the focus groups. Vignettes are stimuli which participants are asked to respond to. In the current research, these will be vignettes on relational images and scenarios, and participants will be asked to discuss the vignette together. The use of vignettes can be beneficial when discussing sensitive issues such as social exclusion, as the hypothetical situation can make participants feel comfortable in answering questions honestly, rather than in a way considered socially desirable (Schoenberg and Ravdal 2000). However, at the same time it is important to remember that vignette responses are decontextualized and thus may differ from an individual’s actual response to a given situation. As such, the vignettes created will be as relevant and realistic to the lives of participants as possible, in order to obtain the most reliable responses (Hughes and Huby 2004). This will be achieved by creating the vignettes after the pilot phase of the study, so that more is known about the country context and the lives of vulnerable youth in that context.
**Life Histories**
Life histories will be carried out with approximately 10 vulnerable youth in each country. It will be ensured that the 10 young people selected cover the different, relevant characteristics of vulnerable youth within the given context. Life histories give participants the space to explain relevant aspects in the course of their lives. In this research, key elements of a young person’s life will be explored including their living conditions, their family or care setting and relationships, their connection to the social environment, their sense of wellbeing over time and their education and employment. Using the life history methodology is especially valuable to the study of social exclusion, as it can enable the exploration of the relational movement of a young person, including movements in and out of connectedness and disconnectedness, barriers and delays in the relational movement and how youth respond to this (including, where relevant, how youth overcome or avoid barriers in order to overcome exclusion).

**Peer-to-peer filming**
As a final methodology, peer-to-peer filming will be used. Here, young people will work together and film snap-shots of each other in their day-to-day life. This will give a more personal insight and allow better understanding of vulnerable youths’ networks, their daily challenges and coping strategies and their lives more broadly. Issues of confidentiality will need important consideration when utilising this methodology, as all those involved in the film should be aware of its purpose and know that it will be viewed by the researchers and not just their peers.

**Research ethics**
The study touches upon many sensitive issues of vulnerable populations (children, youth, families at risk of breaking down, caretakers). The ethical guidelines embedded in Child Protection Policies and SOS Codes of Conduct shall therefore always be adhered to by the research team. Furthermore, the research shall be implemented in close consultation with the SOS Children’s Villages Directors and National Directors within the selected countries, whilst respecting their existing programmes and working relationships with local communities and stakeholders.

**The pilot study**
Before the main research is conducting, there will be a pilot phase in each of the four countries. The purpose of this pilot phase is to facilitate a greater contextual understanding of where the research is taking place and who will be participants in the research. Furthermore it allows the tools to be tested (and adjusted where necessary) to ensure they are best suited for gathering data within the specific country context. As such in the pilot phase of this research, interviews will be carried out with a selection of vulnerable youth, their caregivers and SOS staff. At least one life history and one focus group will also be carried out in each country.

The pilot phase will also allow us to identify and build relationships with those who have the potential to be local research collaborators and research assistants during the main phase of the
study. This will be followed-up by a training workshop of local research collaborators at the start of the full research implementation in each country.

5. Time-line of Research Activities

<table>
<thead>
<tr>
<th>Activity</th>
<th>Involvement by UvA</th>
<th>Deadline/period</th>
</tr>
</thead>
<tbody>
<tr>
<td>Literature review (WP1)</td>
<td>UvA</td>
<td>December 2015-January 2016</td>
</tr>
<tr>
<td>Presentation Literature Review</td>
<td>UvA &amp; SOS Netherlands</td>
<td>10 February 2016</td>
</tr>
<tr>
<td>Establishment of contacts &amp; exchange of information with country offices; context information; characteristics of vulnerable youth</td>
<td>UvA &amp; Local partners via introduction by SOS-Netherlands and UvA network</td>
<td>March – June 2016</td>
</tr>
<tr>
<td>Presentation Research Design</td>
<td>UvA &amp; SOS-Netherlands</td>
<td>6 April 2016</td>
</tr>
<tr>
<td>Finalization Research Design (WP2)</td>
<td>UvA</td>
<td>15 April 2016</td>
</tr>
<tr>
<td>SOS Internal Distribution of Research Design</td>
<td>UvA &amp; SOS –Netherlands &amp; International</td>
<td></td>
</tr>
<tr>
<td>Methodology tailor-made to local partners (WP3)</td>
<td>UvA &amp; Local partners</td>
<td>15 May 2016</td>
</tr>
<tr>
<td>Preparations pilot studies</td>
<td>UvA &amp; Local partners</td>
<td>June 2016</td>
</tr>
<tr>
<td>Pilot studies in 4 countries &amp; interim report (WP4)</td>
<td>UvA &amp; Local partners</td>
<td>June-September/October 2016</td>
</tr>
<tr>
<td>Full study implementation (WP5)</td>
<td>UvA &amp; Local partners</td>
<td>October-January 2017</td>
</tr>
<tr>
<td>Data analysis and write-up of 4 country reports (WP6)</td>
<td>UvA</td>
<td>January-May 2017</td>
</tr>
<tr>
<td>Synthesis report and integration with M&amp;E Strategy (WP7)</td>
<td>UvA</td>
<td>June-September 2017</td>
</tr>
<tr>
<td>Lessons learnt &amp; implications for SOS programmes</td>
<td>All</td>
<td>October-December 2017</td>
</tr>
</tbody>
</table>

4 We are currently exploring how to organize this efficiently within budget limits. Some preparatory work could already be done over a distance by setting-up an international webinar session involving all local research collaborators and the project leaders together.
6. References


Barnardo’s. 2006. Failed by the system: The views of young care leavers on their educational experiences. London: Barnardo’s.


GIZ. 2009. Reintegration of ex-combatants and vulnerable youth into civil society. GIZ. Available at: https://www.giz.de/en/worldwide/19298.html


