*British Journal of Social Work (2026)* **00**, 1–25
https://doi.org/10.1093/bjsw/bcag108

# Between independence and support: Post-care transitions of care leavers with mild intellectual disabilities in Türkiye

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## Abstract

Transitions to adulthood from residential care are widely recognized as periods of heightened vulnerability for youth. However, the experiences of care leavers with mild intellectual disabilities remain largely invisible in Türkiye. Drawing on a constructivist grounded theory study, this article analyzes the transition experiences of seventeen young adults (thirteen men, four women) who exited residential care in Türkiye. The findings show that transition is not a linear movement toward independence, but a negotiated process shaped by structural constraints, limited support, and fragile relational networks. The analysis generated the core category of negotiating unsupported independence after care, supported by four interrelated categories and subcategories: (1) being released into independence without relational scaffolding, including post-care disorientation, daily living and financial management difficulties, and housing vulnerability; (2) quota-based employment as stability and precarious adjustment, including workplace routine difficulties, expectation–capacity mismatches, dismissal risks, and insecurity after job loss; (3) social isolation and relational vulnerability, including fragile

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family ties, mistrust, protective withdrawal, and difficulties sustaining intimate relationships; and (4) navigating services without guidance, including limited rights awareness, bureaucratic complexity, institutional distance, and association-based guidance. The study reveals a misalignment between independence-oriented transition models and lived realities, underscoring adulthood as a supported interdependence.

*Keywords:* care leavers; mild intellectual disability; residential care; post-care transition; supported interdependence.

*Accepted: June 2026*

## Introduction

The transition from residential care to adulthood is widely recognized as a vulnerable life stage for young people with care experience (Mendes et al., 2026). Care leavers are often expected to assume independence earlier than their peers, despite having limited social support and heightened risks of housing instability, economic insecurity, and fragmented service access (Sharma 2025).

These challenges may be intensified for young people with mild intellectual disabilities, whose support needs can be less visible than those of young people with more severe disabilities. Despite being formally regarded as capable of independent adulthood, they may still require guidance in daily living, financial management, decision-making, bureaucratic procedures, employment routines, and social relationships. Recent scholarship similarly suggests that post-care and disability service systems may be shaped by normative assumptions of independence that do not reflect disabled young people's continuing relational and practical support needs (Bennwik and Kelly 2025; Kelly et al., 2025a).

Although scholarly interest in care transitions has increased, care leavers with mild intellectual disabilities remain underrepresented in the literature. Their experiences are often subsumed within broader care-leaver research, making it difficult to identify how disability-specific support needs shape post-care transitions for them. International studies have highlighted the importance of stable housing, education, healthcare, employment, and individualized support during this period (Crous et al., 2020). However, little is known about how these young people negotiate adulthood when expected to manage employment, housing, relationships, and service access with limited guidance. Given the variation in post-care systems across national contexts, examining these experiences within Türkiye's policy and welfare context is particularly important. Therefore, this article argues for rethinking independence in young adulthood as flexible and relationally supported interdependence.

## The Turkish context

Türkiye provides a useful context for examining how social policy frameworks shape post-care transitions in this regard. Services for children in need of protection are regulated under Social Services Law No. 2828 and Child Protection Law No. 5395. Children under state protection are supported through residential care children's homes, children's home sites, and child support centers or through family-based alternatives such as foster care and adoption (Aile ve Sosyal Hizmetler Bakanlığı 2024). Although policies increasingly prioritize family-based care, residential care remains significant in Türkiye's child welfare system (Korkmaz and Demiryürek 2025).

In 2024, 15,135 children were in residential care, and 10,430 lived with foster families (Türkiye İstatistik Kurumu 2024). Thus, 59.2% of children in these two main alternative care arrangements were in residential care and 40.8% in foster care, supporting the relevance of residential care as a distinct post-care pathway.

In this study, mild intellectual disability refers to an officially recognized intellectual disability not typically associated with adult residential disability care but which may involve continuing support needs in communication, decision-making, financial management, employment, and service navigation. In Türkiye, disability status is recognized through official documentation, which shapes access to disability-related services, social rights, education, and employment.

Care measures generally end at the age of majority, although support may continue for ongoing education or for intensive disability-related needs. Young people with severe disabilities may move into adult disability care or rehabilitation services. In contrast, care-leavers without disabilities and those with mild disabilities may be directed toward public employment pathways, including employment rights under Law No. 2828 and disability-based public-sector quota arrangements (Aile ve Sosyal Hizmetler Bakanlığı 2024). Participants in this study entered employment through the latter route, which is not the standard pathway for all care-leavers.

This creates an ambiguous position: care leavers with mild intellectual disabilities may be regarded as employable and independent while still needing support in housing, workplace adjustment, financial management, decision-making, and service navigation (Aile ve Sosyal Hizmetler Bakanlığı 2024). This intersects with the cultural importance of family support in Türkiye, where young adults often rely on family networks for housing, financial help, emotional support, and institutional guidance. Care-leavers may enter adulthood without these resources.

Post-care support is often organized around employment placement, time-limited financial assistance, accommodation support, counseling, work-life adaptation guidance, and monitoring. Adults with mild intellectual disabilities may also access disability-related, health, social assistance, and employment-related services, depending on eligibility and local availability. However, these mechanisms do not necessarily form an integrated pathway; employment placement alone does not ensure accessible housing, workplace accommodation, relational continuity, or coordinated follow-up care.

Existing research on care leaving in Türkiye highlights difficulties related to housing, employment, social support, and limited continuity of aftercare services but largely focuses on the general care-leaver population (Tapan 2022; Uğur and Kılıç 2022). This study addresses this gap by examining how disability, residential care histories, quota-based employment, limited family support, and weak post-care guidance intersect to shape the transition to adulthood.

## Literature review

International scholarship shows that disabled young people are disproportionately represented in child protection and alternative care systems; however, their disability-related support needs are not always addressed in an integrated manner (Mendes et al., 2013; Kelly et al., 2017; Shindo 2023). Fragmentation between child protection and disability services can disrupt the continuity of support, especially for young people with mild intellectual disabilities, whose needs may be less visible and underestimated (Bennwik and Oterholm 2021; Bennwik et al., 2023; Kelly et al., 2025b). These young people may be positioned “between systems”: regarded as capable of independent adulthood while still needing guidance in decision-making, daily living, employment, relationships, and service navigation (Mendes and Snow 2014; Kelly et al., 2017; Bennwik et al., 2023). Recent work on care leavers with intellectual disabilities and/or autism leaving residential care similarly highlights inadequate transition planning, limited aftercare, barriers to formal support, and the importance of informal relational support (Mupaku et al., 2026).

This study draws on disability theory and ableism literature. Disability is understood not only as an individual impairment but also as an experience shaped by social, institutional, relational, and material environments. Ableism refers to the assumptions through which independence, speed, competence, self-management, and able-mindedness become normative expectations (Ingimarsdóttir 2025). This perspective is useful because care leavers with mild intellectual disabilities may be expected to manage housing, employment, finances, relationships, and services without sustained support, making structurally produced difficulties appear individualistic.

Research increasingly questions normative independence as a guiding ideal for care leavers with disabilities (Shindo 2023). Young people with continuing cognitive, communicative, and relational support needs may require extended and coordinated support; abrupt or poorly coordinated transitions can increase homelessness, social isolation, and employment insecurity (Kelly et al., 2020a; Mendes et al., 2023). Therefore, effective support requires continuity, individualization, and relational engagement rather than life-skills preparation alone (Mupaku 2024). Formal mentoring research also shows the value of consistent adult relationships, while cautioning that time-limited mentoring cannot replace wider service responsibilities (MacDonald et al., 2020).

These debates reflect a shift from independence-centered narratives to relational and continuity-oriented frameworks. Interdependence recognizes that adulthood is achieved through supportive relationships, institutions, and environments, not individual capability alone (Bennwik and Oterholm 2021; Mupaku and Van Breda 2024; van Breda and Reuben 2025). Similarly, resilience is increasingly understood as being shaped by environmental and relational resources rather than being an individual trait (Mupaku and Van Breda 2024). Evidence linking well-being to belonging, security, and social connectedness supports this relational understanding of well-being (McGrane et al., 2024). Research on transitions for people with intellectual disabilities also highlights socio-ecological approaches, cross-agency coordination, self-determination, and support beyond employment and independent living outcomes (Šiška et al., 2024).

Although international research has examined disabled care leavers, including young people described as having disabilities, complex needs, or mild/borderline intellectual disabilities, their specific transition experiences remain less visible than those of the general care-leaver population (Baker 2007; Mendes et al., 2013; Malvaso and Delfabbro 2016; Snow et al., 2016; Harwick et al., 2020). Much of this evidence is located in Western welfare contexts, and fewer qualitative studies have examined how care leavers with mild intellectual disabilities experience policy frameworks in their everyday lives after residential care (Mupaku and Van Breda 2024; Šiška et al., 2024; Bennwik and Kelly 2025; Mupaku et al., 2026).

This study contributes to the literature by examining how care leavers with mild intellectual disabilities negotiate adulthood within Türkiye's policy, service, and sociocultural contexts, foregrounding how residential care histories, quota-based employment, ableist expectations, limited family support, and weak post-care guidance shape the transition to adulthood.

## Method

### Research design

This study employed Charmaz's (2014) constructivist grounded theory to explore how care leavers with mild intellectual disabilities in Türkiye negotiate the transition from residential care to adulthood. Constructivist grounded theory understands data and meaning as co-constructed through the interaction between the researcher and participants and situated within broader social and structural contexts (Charmaz 2014). This approach was appropriate for examining how disability, residential care histories, employment, social relationships, and service systems shape post-care trajectories. The research design was iterative, allowing emerging insights to inform the subsequent data collection and analysis. Employment, independent living, and service access were used as sensitizing concepts rather than predetermined categories, ensuring that the analysis remained grounded in participants' accounts.

## Participants and sampling

The study was conducted with seventeen young adults with mild intellectual disabilities who had exited residential care upon reaching the age of majority (Table 1). Participants had received care for at least one year in residential care institutions located in various provinces of Türkiye, and their legal care status had ended either upon turning eighteen years or after completing their education. All participants had been appointed to the same city through the public-sector disability employment quota and were residing there at the time of the study, although some subsequently lost these positions. This shared structural condition is analytically significant because quota-based relocation and residence in a common urban setting shaped the participants' employment experiences, housing arrangements, social networks, and access to local services.

The inclusion criteria were a documented diagnosis of mild intellectual disability and sufficient verbal communication skills to describe post-care experiences in an interview. Eligibility was confirmed through participants' existing official disability documentation and, where available,

**Table 1.** Sociodemographic characteristics of participants.

| Characteristic | *n* |
|---|---|
| **Total participants** | 17 |
| **Gender** | |
| Male | 13 |
| Female | 4 |
| **Age range (years)** | 21–30 |
| **Years in care** | 2–10 |
| **Education level** | |
| Lower secondary education | 6 |
| Upper secondary education | 11 |
| **Experienced job dismissal** | 8 |
| **Divorced** | 7 |
| **Current living arrangements** | |
| With spouse | 4 |
| With family or relatives | 6 |
| With friends or peers | 7 |

records held by the collaborating civil society organization. Participants were not asked to provide new documentation. Documentation was used only to confirm the study focus and was not treated as an imposed identity category. During the interviews, the participants described their experiences, difficulties, capacities, and support needs in their own terms. The sample was predominantly male ($n = 13$), with fewer female participants ($n = 4$).

A purposive sampling strategy was employed for this study. Access was facilitated through the Gaziantep branch of the Association of Care Leavers (Yurt-Ayder) in Türkiye. Individuals who learned about the study through the association's network and social media announcements and volunteered to participate contacted the researcher directly. This route enabled access to a hard-to-reach group, while also meaning that participants were sufficiently connected to the association's networks to learn about and respond to our invitation.

## Data collection

Data were collected between August and October 2025 through semi-structured interviews, informed by Charmaz's (2014) intensive interviewing approach. The interview guide covered post-care transition, employment, social relationships, and service access, while remaining flexible enough to allow participants to express their meanings and experiences. Given the participants' mild intellectual disabilities, the questions were concrete and phrased in clear, accessible language.

Data collection and preliminary analyses were conducted concurrently. Initial codes and emerging analytic categories informed subsequent interviews through theoretical sampling, enabling a deeper exploration of the developing categories. The interviews lasted approximately sixty minutes and were conducted face-to-face in participants' homes to ensure privacy, comfort, and trust. All interviews were audio-recorded with informed consent and were transcribed verbatim. The interviews were conducted in Turkish. During reporting, English translations of the participants' quotations were checked by a bilingual expert to ensure semantic accuracy and preserve cultural meaning.

## Data analysis

Data analysis followed Charmaz's (2014) constructivist grounded theory approach and proceeded iteratively with data collection. The analysis began with line-by-line, action-oriented initial coding using gerunds to capture processes within participants' accounts. The codes were compared within and across interviews using the constant comparative method to identify recurring patterns, variations, and emerging analytic categories.

Focused coding was then used to develop more abstract conceptual categories from the analytically significant and frequent codes. Memo writing documented the evolving relationship between data and conceptualization and supported theoretical integration. The researcher's professional background in social work and psychology was engaged reflexively during the analysis. For example, early codes such as "poor financial management" and "difficulty sustaining work routines" were reconsidered because they risked individualizing participants' difficulties; these accounts were reinterpreted in relation to limited preparation, weak post-care guidance, workplace expectation–capacity mismatches, and the absence of relational scaffolding in the workplace.

During theoretical coding, the relationships among unsupported independence, employment precarity, social isolation, and service-navigation barriers were examined holistically, leading to the construction of the core category and four interrelated analytic categories. NVivo 14 was used for systematic data analysis. The analysis concluded when additional interviews no longer generated new conceptual insights, indicating theoretical saturation.

## Ethical considerations

Ethical approval was obtained from the Kilis 7 Aralık University Social and Human Sciences Research Ethics Committee prior to data collection (July 2025). Participants were informed about the study's purpose, confidentiality, voluntary participation, and their right to withdraw without consequences. Informed consent was obtained prior to each interview. For participants with limited literacy, the consent information was read aloud, and verbal confirmation was recorded. Audio recordings and transcripts were encrypted and securely stored to protect the confidentiality and security of the data.

## Rigor

The rigor of the study was established in line with Charmaz's (2014) criteria for constructivist grounded theory: credibility, originality, resonance, and usefulness (Charmaz and Thornberg 2021). Credibility was supported through reflexive engagement, constant comparison, and rich data from participants with varied life and employment experience. Reflexive memo writing helped prevent the individualization of participants' difficulties by situating accounts of financial management, workplace routines, and service navigation within the broader conditions of limited preparation, weak guidance, and absent relational scaffolding.

The originality of this study lies in examining care leavers with mild intellectual disabilities within Türkiye’s specific policy, service, and sociocultural context after residential care. Resonance was enhanced through close alignment between categories and participants’ narratives and member checking with the selected participants. The usefulness of this study was strengthened by identifying structural gaps in post-care support and implications for social work policy and practice.

## Findings

Drawing on interview data, this study conceptualizes post-care independence for young people with mild intellectual disabilities as a process of negotiating unsupported independence after care. Rather than a linear movement from care to autonomy, this core category captures a fragile transition shaped by limited preparation, quota-based employment, weak support networks, and insufficient relational and practical scaffolding.

The analysis generated four interrelated categories: (1) being released into independence without relational scaffolding, (2) quota-based employment as stability and precarious adjustment, (3) social isolation and relational vulnerability, and (4) navigating services without guidance. Together, these categories explain how independence was constructed, disrupted, and negotiated after leaving the care system. The relationships among the structural conditions, core categories, analytic categories, and outcomes are shown in Fig. 1.

### Category 1: being released into independence without relational scaffolding

This category conceptualizes the transition from residential care as a cliff-edge-like process in which responsibility was rapidly transferred to participants without sufficient relational or practical scaffolding. For care leavers with mild intellectual disabilities, independence was administratively expected before they were practically, emotionally, and relationally prepared.

#### *From residential structure to post-care disorientation*

Participants contrasted the predictability of residential care with the uncertainty of post-care living conditions. In residential settings, meals, appointments, schedules, and daily routines are largely organized by the staff. After leaving care, these structures disappeared, and participants had to manage tasks requiring memory, planning, time management, and self-organization with limited preparation time.

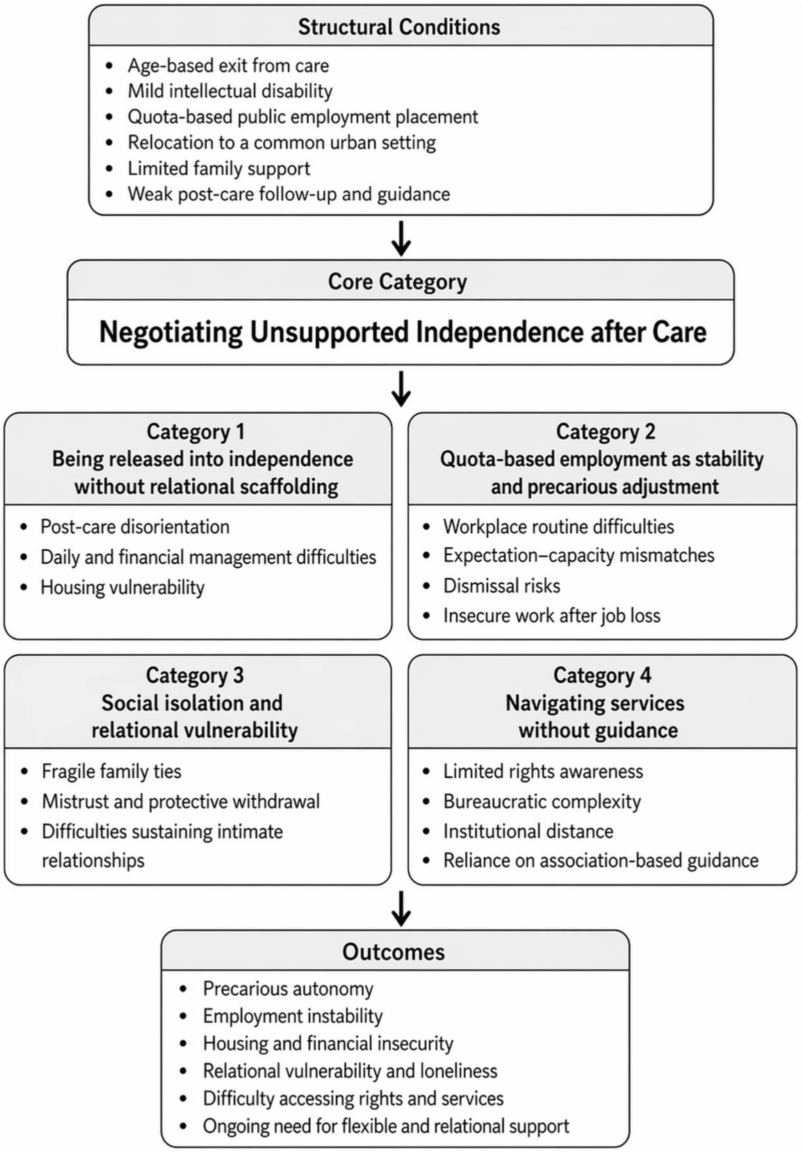

**Figure 1:** Grounded theory model of negotiating unsupported independence after care.

Participant 2 (Male) explained, “Everything in the [residential care setting] was structured and well-planned. When I left, I had to figure everything out on my own, which was extremely difficult.”

His account shows how externally organized routines became individual responsibilities almost overnight. Similarly, Participant 4 (Male) described the absence of preparation: “No one prepared me for life outside the [residential care setting]. When I left, I felt completely unprepared and did not know what to do.”

Together, these accounts indicate that readiness for independence was treated as an administrative assumption rather than a relationally developed capacity for self-governance.

### *Navigating economic precarity: Learning through material consequences*

The second property concerns the management of finances, bills, and official procedures. Without sustained guidance, financial management became a key site for unsupported independence. For participants with mild intellectual disabilities, budgeting, prioritizing payments, understanding debt, and setting financial boundaries involved support needs that were not always recognized by others.

Participant 13 (male) shared, “I do not know how to manage my finances. I often ran out of money before the month ended, and when I took out loans for my relatives, everything spiraled out of control.”

Participant 9 (Male) similarly noted, “Rent, bills, expenses… it all piled up and confused me. I could not manage it because I did not know how beforehand.”

These accounts show how limited preparation for financial decision-making left participants vulnerable to debt, social pressure, confusion, and loss of control over their monthly income.

### *Housing as a site of risk and exposure*

Housing was another setting where the expectation of independence intensified vulnerability. Finding and maintaining a home requires negotiating with landlords, understanding rental conditions, assessing safety, and judging affordability. These tasks became especially difficult when written conditions, verbal explanations, or unequal negotiations were not supported by trusted adults or professionals.

Participant 1 (male) stated, “No one helped me when I was renting a house. I had to trust what the landlord said, and I was deceived because I had no one with me.”

His account shows how the absence of interpretive and practical support made him vulnerable to exploitation. Participant 3 (male) also emphasized the emotional burden of deciding alone: “I was anxious about choosing the wrong house because I had to make the decision alone. There was no one to stand by me or to offer support.”

One female participant’s account further suggests how housing vulnerability may become gendered when disability, living alone, and perceived defenselessness intersect: Participant 14 (Female) explained: “As a woman with this [disability], living alone is terrifying. Men [landlords] only care about the rent, but I am constantly on edge, wondering who might come to my door or who will realize how alone and defenseless I am."

Given the small number of women in the sample, this account should not be interpreted as a broad gender comparison. Rather, it indicates how gendered safety concerns may shape independent living for some female care-leavers with mild intellectual disabilities.

This category shows that participants were not simply moving into independence but being released into it without the relational scaffolding needed to sustain it. Everyday tasks, such as organizing routines, managing finances, and securing housing, became sites of difficulty and risk because participants were expected to perform adult independence while still needing guidance in understanding, decision-making, and risk assessment.

## Category 2: quota-based employment as stability and precarious adjustment

This category explains how quota-based employment serves as both a source of stability and vulnerability. Here, quota-based employment refers to participants' placement in public sector jobs through disability-related employment arrangements. This route provides income, formal status, and entry into adult life but not necessarily sustained workplace support, reasonable adjustment, or follow-up tailored to mild intellectual disability. Therefore, became another employment setting in which unsupported independence had to be performed.

### *From residential rhythm to workplace demands*

The transition from externally organized residential routines to a self-managed work rhythm was a major challenge. Punctuality, attendance, and consistent performance require memory, planning, time management, and self-regulation skills that are still developing after residential care.

Participant 10 (Male) reflected: "I used to go to work on some days. This became a problem, and I was subsequently dismissed. I just could not get the rhythm right."

His account links employment instability to the difficulty of synchronizing with adult expectations without transitional scaffolding. Participant 8 (Male) similarly noted, "I had trouble waking up in the mornings and getting to work on time. I was frequently absent from work, and because of that, I was dismissed."

Together, these accounts show that employment stability depended not only on obtaining work but also on sustaining routines that were not fully practiced before support was withdrawn. Participants used "dismissed from public service" to describe losing a public-sector position after accumulated absence, difficulty maintaining routines, or inability to meet standard expectations.

### *Expectation–capacity mismatches and invisible disability*

A central property of this category is the tension between standard workplace expectations and participants' support needs. Because mild intellectual disability is not always visible, difficulties with learning pace, comprehension, memory, or task adjustment could be misinterpreted as a lack of effort or competence.

Participant 7 (Male) explained: "People thought I could do everything normally, but sometimes I could not keep up with them, and I was ashamed of that."

His account highlights the burden of appearing able while struggling privately. Interpersonal friction often followed, as Participant 6 (Male) noted: "Some people became angry because I learned slowly."

These accounts reveal ableist expectations in the workplace. Participants were expected to learn quickly, maintain standard rhythms, and perform competently without visible support. When mild intellectual disability was not recognized or accommodated, difficulties were interpreted as personal failure rather than as unmet support needs.

Two female participants' accounts suggest that expectation–capacity mismatches may become gendered when disability, workplace scrutiny, and fear of exclusion intersected. Participant 16 (female) shared, "I am afraid of making mistakes at work. Men handle it somehow, but I do not want anyone to say, 'she could not do it.' When you are both a woman and disabled, you feel like you could be put out the door at any moment. I push myself harder so that they will not pick on me if they realize that I am all alone."

Participant 15 (Female) similarly explained: "I am afraid to ask for help because I am terrified that they will say, 'she is a woman, she is disabled, she cannot do the job anyway.' I try to handle everything quietly by myself."

Given the small number of women in the sample, these accounts are not treated as a broad gender comparison in this study. Rather, they indicate how gendered expectations may intensify the fear of being judged as incapable. Asking for help became a risky admission of incompetence, leading them to manage challenges in isolation.

Beyond income, employment is tied to identity, belonging, and recognition. Participant 12 (male) described job loss as follows: "When I was dismissed, I felt as if everything had ended. I did not want to see anyone else. It turned out that my only social life was at work because we did not really have anyone else."

His account shows that the workplace was one of the few spaces of routine, contact, and adult recognition for him. Therefore, losing work intensified social isolation and economic insecurity.

### *After dismissal: from formal stability to informal insecurity*

The loss of public-sector employment often shifted participants from formal positions to temporary, insecure, and physically demanding work. Participant 11 (male) recounted, "After being dismissed from public service, finding another job was difficult; even when I found one, the work was temporary, insecure, and highly challenging. I now work only to cover my basic needs."

His account shows how losing formal employment reduced work to basic survival tasks. Without follow-up, workplace support, and reasonable adjustments, the promise of quota-based employment could dissolve into prolonged insecurity.

This category demonstrates that employment offered a possible route to adult stability but also functioned as a demanding site where unsupported independence had to be performed. For care-leavers with mild intellectual disabilities, workplace difficulties were intensified by invisible support needs, ableist expectations of competence and self-management, and the absence of sustained adjustment or follow-up.

## Category 3: social isolation and relational vulnerability

This category explains how participants' transition to adulthood was shaped by fragile social ties, limited family support, and difficulties in sustaining trusting relationships. Social isolation is not only the absence of people but also a relational condition shaped by uncertainty, mistrust, and fear of being used or misunderstood. For care leavers with mild intellectual disabilities, social connection requires careful judgement of others' intentions; withdrawal could therefore function as self-protection, even while deepening loneliness.

### *Fragile family ties and compensatory self-reliance*

For many participants, family networks were marked by distance, unreliability, or one-sided expectations, rather than consistent support. Without a reliable relational safety net, self-reliance emerged not simply as independence but as a necessity.

Participant 17 (female) described this solitary management of life's difficulties: "I do not have anyone in my family to rely on. If something happens, I deal with it alone. There is no one to ask."

Her account shows how independence could be enforced when family support was absent. Family presence did not always mean meaningful support. Participant 5 (Male) stated, "My relatives are there, but they only call when they need something. When I am in trouble, I am invisible to them."

This account highlights the lack of reciprocity in some family relationships. Relatives were present biologically but were not dependable sources of care. Therefore, self-reliance became a coping strategy in response to unreliable support.

### *Mistrust and social withdrawal as protection*

The second property concerns the caution used by participants in social relationships. Several described mistrust not as a personality trait but as a response to previous disappointment, misunderstanding, or fear of exploitation. Because mild intellectual disability could increase exposure to manipulation or judgement, some participants limited their interactions as protection.

Participant 15 (female) shared, “I do not easily trust people. I worry that they might take advantage of me because I have been deceived in the past. Sometimes, I misunderstand people, so I prefer to stay silent.”

Her account shows how mistrust involves both emotional and communicative dimensions. Silence reduces risk but also restricts opportunities for connection and support.

Participant 10 (male) similarly explained, “It is better to be alone than to be deceived. People realize that we are different, and they try to use us to their advantage. I maintain my distance to protect myself.”

This account makes the logic of protective withdrawal visible. Being alone was not necessarily preferred, but it appeared safer than exploitation. However, this strategy also reinforced isolation by limiting trusting and reciprocal relationships.

### *Relational fragility and the impact of separation*

The difficulty in sustaining intimate relationships emerged as another dimension of vulnerability. Participants described partnerships as requiring communication, mutual understanding, emotional regulation, and support capacities that had often developed without consistent relational guidance during and after the care.

Participant 6 (male) described the painful gap between the desire to build a family and the experience of breakdown: “I wanted to build a family of my own, but it turned out to be more difficult than I had expected. We struggled to understand each other, and I often felt that I was not being understood. Ultimately, our relationship did not last, and we divorced.”

His account shows how the aspiration for a stable family life could be undermined by difficulties in communication and mutual understanding.

One female participant’s account further suggested that separation may carry gendered meanings when living alone, limited family support, and social judgment intersect. Participant 16 (female) explained, “When my marriage ended, I felt as if the world had collapsed. As a woman alone, people view you differently. You have no family to return to and no husband to protect you."

Given the small number of women in the sample, this account should not be read as evidence of a broad gender comparison in the study. Rather, it indicates how separation may intensify exposure and insecurity for some women care-leavers with mild intellectual disabilities. For Participant 16, divorce meant more than the end of a relationship; it also meant losing a socially recognized form of protection.

This category demonstrates that post-care isolation was not simply a lack of relationships but a fragile relational condition shaped by unreliable family ties, mistrust, and fear of exploitation. Although self-reliance and withdrawal helped participants manage risk, these strategies also deepened their loneliness and limited their access to support. Therefore, social connections appeared to be both highly desired and difficult to sustain.

## Category 4: navigating services without guidance

This category explains how access to post-care support depends not only on the formal existence of services but also on participants' ability to understand and navigate them. For care leavers with mild intellectual disabilities, documents, applications, institutional visits, and communication with officials require accessible information, procedural support, confidence, and relational guidance. Without such guidance, it is often difficult to claim formal rights.

### *Informational precarity: the gap between rights and access*

A central difficulty was the lack of clear and accessible information about post-care support. Participants sometimes knew that services existed but did not know what they involved, whether they were eligible, or how to apply.

Participant 11 (Male) highlighted this uncertainty: "I have heard that social services offer counseling support, but I do not know exactly what it is or how to apply."

His account shows that awareness of a service did not necessarily translate into use; information had to be understandable, step-by-step, and practically accessible. Participant 3 (Male) similarly described the absence of proactive contact: "I received no support from social services, not even a phone call, so I could not get any information about my rights."

This indicates how the lack of follow-up left participants dependent on their own ability to search, ask, or find someone who could explain the system.

### *Bureaucratic complexity and avoidance*

Administrative procedures also act as barriers to accessing services. Participants described documents, forms, and unclear instructions as being confusing and stressful. For some, difficulty in understanding procedures created shame and avoidance.

Participant 9 (Male) reflected on this complexity: “They requested many documents. I am confused because I do not understand.”

His account shows how bureaucratic requirements became difficult when instructions were not adapted to participants’ support needs. Participant 8 (male) explained how confusion could lead to withdrawal: “Sometimes, I do not go because I do not understand what they want. It is better to stay away than to feel stupid.”

This shows that avoidance is not indifferent to support. Rather, staying away protected participants from embarrassment and being judged as incapable, even when it reduced their access to help.

### *Institutional distance and the need for relational guidance*

Participants described the post-care period as being marked by reduced professional contact. Once they left residential care, the responsibility for navigating services often shifted to them. This created a need for someone who could explain the procedures, accompany them when necessary, and provide reassurance.

Participant 13 (Male) emphasized this need: “After I left, no one checked on me either. If someone had guided me, it would have been easier.”

His account suggests that guidance was not only about information but also about reducing uncertainty and helping participants act on their rights. Participant 17 (female) described the emotional weight of navigating institutions alone: “It is as if they forget us as soon as we leave the residential [care setting]. I am terrified of going to those big buildings alone or signing the wrong thing.”

Her account shows how institutional spaces can be intimidating when participants fear making irreversible mistakes. The fear of “signing the wrong thing” illustrates the high stakes of unsupported decision making.

### *The care leavers’ association as an interpretive bridge*

In contrast to formal service distance, the care leavers’ association was described as a source of practical guidance and emotional reassurance by the participants. It appeared to function mainly as a relational and interpretive bridge rather than as a specialist adult disability service or substitute for formal post-care case management.

Participant 12 (Male) noted, “If I am unsure about something, I contact the association. They guided me and clarified the steps I needed to take.”

His account shows how guidance made the procedures more accessible. The association did not replace formal services but helped participants understand how to approach them. Participant 14 (female) added, “They helped me navigate where to go and how to apply. I would not have known about my basic health insurance without their guidance. They are like family to me; they truly understand our experiences.”

This account shows that effective support involves both practical explanations and relational trust. However, these positive accounts should be interpreted cautiously, as participants were recruited through association networks and may have been more connected to this source of support than others.

This category demonstrates that service navigation was relational, rather than purely administrative. For participants with mild intellectual disabilities, access to support depended not only on the existence of rights and services but also on whether they were understandable, reachable, and supported through guidance. Without such guidance, bureaucratic procedures produce confusion, avoidance, and institutional distance; with relational support, the same systems become more navigable.

## Discussion

This study demonstrates that the transition to adulthood for care leavers with mild intellectual disabilities cannot be explained by individual adaptive capacity alone. Rather, it is shaped by the interaction of disability-related support needs, residential care histories, structural arrangements, and relational resources. The core category of negotiating unsupported independence after care shows how participants were expected to perform adult independence despite their continuing needs for guidance in understanding, decision-making, financial management, employment, relationships, and service navigation. Therefore, the findings expose the limits of transition models that frame adulthood mainly through individual readiness or life-skills acquisition, and they resonate with the literature on systemic invisibility and discontinuity of support for disabled care leavers (Bennwik et al., 2023).

The first category, being released into independence without relational scaffolding, shows that leaving residential care was experienced as abrupt and insufficiently supported by external resources. Difficulties in daily living, financial management, and housing resonate with accounts of transition shocks (Shindo 2023). However, for care leavers with mild intellectual disabilities, these challenges were intensified by less visible support needs related to memory, planning, comprehension, and risk assessment issues. Therefore, the problem was not simply limited to individual competence but also the withdrawal of residential routines and relational guidance before these capacities had been sufficiently supported.

This finding aligns with Mupaku and van Breda's (2024) concept of relational resilience scaffolding, which emphasizes that resilience is sustained through supportive relationships and an enabling environment. When such scaffolding is withdrawn, independence becomes less of a developmental achievement and more of a risky condition. This reinforces the evidence on the protective role of extended and continuous support (Mendes et al., 2023), while showing that continuity is particularly important for young people whose support needs may be underestimated because they are formally regarded as employable and independent.

The second category, quota-based employment as stability and precarious adjustment, complicates the idea that employment alone signals a successful transition. Public-sector employment provides income, status, and recognition, but unsupported employment also generates new vulnerabilities. Expectation–capacity mismatches, invisible mild intellectual disabilities, and limited workplace accommodations have transformed employment into a site of pressure and insecurity. Through ableism, participants were expected to learn quickly, maintain standard work rhythms, and demonstrate competence without sustained support. Workplace difficulties are therefore often individualized as failure rather than recognized as unmet support needs, aligning with social justice-oriented analyses of how disability and care experience constrain access to resources and recognition (Kelly et al., 2025b).

The third category, social isolation and relational vulnerability, demonstrates that the post-care transition is deeply relational. Limited family support, fragile networks, and the loss of professional relationships left participants entering adulthood from a position of relational depletion, echoing evidence that disabled care-leavers often have narrow and fragile support networks (Bennwik and Kelly 2025). For participants with mild intellectual disabilities, isolation was intensified by difficulties in judging others' intentions, asking for help, and managing fears of deception or judgement. Thus, independence does not operate as empowerment but as withdrawal. As McGrane et al., (2024) argue, well-being is closely tied to belonging and perceived security; where relational continuity is absent, independence may become a vulnerability rather than a protection.

The fourth category, navigating services without guidance, illustrates how formal rights may remain inaccessible when systems require administrative literacy, confidence, and procedural knowledge. Limited rights awareness, bureaucratic complexity, institutional distance, and insufficient guidance shifted the responsibility for service navigation onto the participants themselves. For care leavers with mild intellectual disabilities, this was especially consequential because forms, documents, appointments, and institutional communication required support for understanding and decision-making. Care-leaver associations appeared to function as relational and interpretive bridges, helping participants translate procedures into manageable processes. However, such associations should complement, rather than replace, formal post-care and disability support. Their role underscores the importance of incorporating lived experiences into policy design and advocacy (Kelly et al., 2020b).

Overall, the findings suggest that care leavers with mild intellectual disabilities may face challenges commonly reported among care leavers, including housing insecurity, employment instability, social isolation, and fragmented support. However, these challenges were more acute because cognitive, communicative, and relational support needs were often less visible and insufficiently addressed. The findings therefore support an interdependence perspective: sustainable adulthood after residential care should not mean detachment from support but access to relationships, services, and environments that are responsive to changing needs (Mupaku and Van Breda 2024; van Breda and Reuben 2025).

## Conclusion

This study shows that the transition to adulthood for care leavers with mild intellectual disabilities cannot be understood as individual adaptation alone. It is shaped by social policy arrangements, service design, disability-related support needs, and relational networks. Post-care transition, therefore, emerges not as a test of individual competence but as a process negotiated within structural and relational conditions.

The abrupt end of residential care created vulnerabilities in housing, financial management, and everyday living. These were not simply individual skill deficits, but consequences of the premature withdrawal of relational and practical support. Similarly, although employment is positioned as a pathway to autonomy, it may become fragile without sustained guidance, workplace accommodation, and relational continuity.

Within Türkiye's policy and welfare context, care leavers with mild intellectual disabilities may occupy an ambiguous position between employability, formal independence, and continuing support needs. Because their support needs can remain hidden in mainstream aftercare services, assessment should attend to decision-making, financial management, workplace adjustment, understanding official procedures, and service navigation while strengthening disability expertise within these services.

Overall, the study calls for transition models that move beyond detachment from support. For care leavers with mild intellectual disabilities, sustainable adulthood after residential care requires supported interdependence: flexible, disability-sensitive, and relationally continuous support that recognizes both capacities and ongoing needs for guidance. By foregrounding Türkiye's policy, service, and sociocultural context, this study contributes to care-leaving and disability scholarship and underscores the need for relational continuity, disability-informed assessment, and context-sensitive post-care support.

## Policy and practice implications

From a social work practice perspective, the findings suggest that post-care transitions for young people with mild intellectual disabilities require relational, institutional, and practical support, alongside individual readiness. Post-care services should be organized around supported interdependence, coordinated case management, relational continuity, and practical access to rights.

First, the leaving-care and after-care assessments should recognize both capacities and continuing support needs. Participants were positioned as employable and independent, yet described needs in daily living, housing, workplace adjustment, financial management, official procedures, and service navigation. Therefore, assessment should move beyond narrow eligibility or competence-based models and consider relational and practical support conditions.

Second, sustained professional relationships are central to safe transitions. Person-centered planning, continuous case management, supported decision-making, and proactive follow-up can bridge formal independence and everyday support needs.

Third, fragmented systems can shift the navigation burden onto young people. Difficulties with documents, applications, workplace routines, and housing negotiations show that rights may remain inaccessible without co-ordinated support. Social workers can play a key role in inter-agency coordination among child protection, disability, employment, housing, health, municipal, and social assistance services.

Finally, care-leaver associations and peer networks can act as relational and interpretive bridges but should complement rather than replace public responsibility. Overall, the findings call for social work practice grounded in disability-informed assessment, sustained case management, inter-agency coordination, and flexible guidance.

## Limitations

This study is based on qualitative data from seventeen participants and aims for analytical transferability, rather than statistical generalizability. A key limitation is the shared structural context of the sample: all participants had been appointed to the same city through the public sector disability employment quota, although some later lost these positions. This quota-mediated relocation shaped employment, housing, social networks, and service navigation; therefore, the findings should be read as an explanatory account of this specific transition pathway rather than as representative of all care leavers with mild intellectual disabilities in Türkiye.

Recruitment through a care-leavers' association may have made more connected individuals visible, while those experiencing deeper social isolation may have been underrepresented. This may have also shaped positive accounts of association-based guidance. The criterion of sufficient verbal communication skills may have excluded young people with greater communication barriers. Finally, the predominance of male participants limits the comparative interpretation of gendered experiences; women participants' accounts are treated as indicative rather than representative. Despite these limitations, this study offers contextually grounded insights into post-care transitions among care leavers with mild intellectual disabilities within a specific policy and welfare context.

## Acknowledgements

The authors thank the Association of Care Leavers (Yurt-Ayder) for their support in facilitating access to participants. The authors are also sincerely grateful to all participants for generously sharing their time and experiences.

*Conflicts of interest.* None declared.

## Funding

This research received no specific grant from any funding agency in the public, commercial, or not-for-profit sectors.

## Data availability

Due to the qualitative nature of the study and the sensitivity of the data, interview transcripts are not publicly available in order to protect participants' confidentiality. De-identified data may be made available from the corresponding author upon reasonable request and subject to ethical approval.

## Ethics statement

Ethics approval for this study was granted by the Kilis 7 Aralık University Social and Human Sciences Research Ethics Committee (July 2025, No. 11).

## Artificial intelligence disclosure

ChatGPT (OpenAI) was used to support English language editing, grammar checking, and sentence clarity during the preparation of this manuscript. The tool was not used for data analysis, interpretation of the findings, or generation of original research content. All AI-assisted outputs were reviewed, revised, and verified by the authors, who took full responsibility for the final content of the manuscript.

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Original article