## Improving outcomes for young people leaving care

## Which way forward?

#### **Sue Green and Amanda Jones**

Young people leaving care are expected to become independent at a far earlier age than are young people who are fortunate enough to have supportive families. High rates of unstable accommodation, unemployment, poverty and early parenthood. have been found in research studies into the outcomes for young people leaving care. Governments have a duty of care to provide resources and support to ensure that young people leaving care experience a safe and sustainable transition to independence. Key elements of best practice framework are outlined in this article for this to be achieved.

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At IFCO we presented both a paper and workshop on the needs of young people leaving care. We were struck by the universal level of compassion and concern for the need to improve the circumstances faced by young people leaving care. We were also struck by the different ways various countries and their states were dealing with the issue. The conference offered a great opportunity to exchange information and to make contacts for ongoing advocacy and research work.

In this article we provide a very brief overview of the research findings, then move on to providing a model for conceptualising what needs to happen for the life chances of young people leaving care to be improved.

#### RESEARCH INTO **OUTCOMES FOR YOUNG** PEOPLE LEAVING CARE

In the late 1970s and the 1980s, research into young people leaving care highlighted the problems faced by those leaving care in their late adolescence. While these studies varied in size and scope, they nevertheless formed an authoritative picture, based to a substantial degree on the views of young people themselves, of the serious

Research project on Young People Leaving Care and Protection Arrangements; has travelled on a Ministerial grant to research models of Support to young people leaving care in the UK and has more recently undertaken research with Amanda Jones on young people leaving care in Victoria. Contact: Telephone: (03) 9614-1577 or Amanda Jones is currently a Social . Program Consultant for the Victorian Social Program Consultancy Unit, which undertakes planning, policy and practice development, and research work for Salvation Army services across Victoria. Amanda has ten years' research experience in the public, private and community

problems they faced when they left care and were expected to cope on their own.

The overall message was clear: young people leaving care in their adolescence faced loneliness, social isolation, lack of support, lack of housing, homelessness, confusion about their past and a lack of skills to cope alone. In addition, child welfare practice appeared to overemphasise the capacity of these young people to live independently whilst still in their late adolescence, and provided poor and patchy support (Stein, 1997).

In the 1990s there have been a number of empirically robust studies undertaken. Rather than report in depth on these, readers can refer to literature reviews by Cashmore and Paxman (1996) & Stein (1997).

Provided below is a summary of key findings on outcomes for young people leaving care<sup>2</sup>. Overseas summary sheets on key findings have been used by young people in care advocacy and support groups, housing campaigners and practitioners and managers working with young people leaving care to influence government policy.

#### Young people leaving care have inadequate preparation for and assistance with independent living

As a result of a personal background of severe abuse and poverty, young people living in out of home care are likely to have a history of an unsettled and deprived childhood, and disrupted education, and to have experienced a

<sup>1</sup> In the UK these studies included Goldek, 1976; Page & Clark, 1977; Morgan-Klein, 1985; Kahan, 1986; Burgess, 1991; Lupton, 1985; Stein and Carey, 1986; First Key Advisory Service, 1987; Randall, 1987; in the USA, Pettiford, 1981; Festinger, 1983; Barth, 1986 & 1990; Fanshall, Finch & Grundy, 1990 & in Canada, Raychuba, 1987.

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range of social and emotional difficulties. Despite this, young people in care are expected to leave between 16 and 18 years of age, with no choice in the timing of their independence. Nearly half of young people who leave care report that they had either prepared themselves or no one had (Cashmore & Paxman 1996), and one third have been found to be in serious need of specialised services and independent living planning, follow-up and after care (Hahn 1994).

On the other hand, the majority of young people of the same age living with families say they are not yet ready to leave home and do not intend to do so for some time, until they have completed their course of study or saved more money. Young people living in families also report that they have the 'safety net' of knowing that if things did not work out when they leave home, they would be welcome back (Cashmore & Paxman 1996).

## Young people leaving care experience frequent changes in accommodation, isolation and loneliness

Financial support for out of home care placements generally ends when a young person is discharged from care at age eighteen, regardless of whether young people are ready to move on. The majority of young people have to move out, unless their volunteer foster carers decide to support them privately. The responsibilities of trying to hold down a job, training or education, living on a low income and coping with all the aspects of 'being independent', including budgeting, paying bills, cooking, etc, along with a lack of ongoing support, are often the start of a process of drifting from place to place, and can lead young people into homelessness.

Young people who leave care move, on average, three times within the first 12 months with the primary types of accommodation being of a temporary nature (including friends, relatives, refuges, boarding houses, the street) (Cashmore & Paxman 1996). Over a 2 to 4 year period after discharge young people have been found to continue to experience a great deal of disruption, with approximately one third living in five or more different places and an

estimated one quarter experiencing at least one night without a place to sleep (Cook 1994). Experiencing isolation and loneliness, young people who have left care are more likely than other young people to think about suicide (57%) or have tried suicide (35.5%) (Cashmore & Paxman 1996).

#### Young people leave care with very low levels of education and experience high rates of unemployment

Pre-care and in-care experiences contribute to a lack of educational attainment for young people leaving care. Young people entering the care system have often had traumatic and stressful experiences including instability, neglect and abuse, that have a direct impact on their education. All too often the care experience will compound and continue this educational disruption rather than compensate for it. Frequent moves in placement, the low priority sometimes given to education, along with low expectations, have a direct impact on both attendance at school and educational attainment.

The current labor market, along with an increased range of vocational courses, has resulted in most young people continuing their education beyond the compulsory years. However, only 10 to 15 per cent of young people leaving care complete high school compared to an estimated national rate of retention to Year 12 of 80% for young people in the general community. Fifty-five per cent of young people leaving care have only completed Year 10 or less (Cashmore & Paxman 1996). Without qualifications young people are at a distinct disadvantage in finding employment in an increasingly competitive youth labor market. Twelve months after discharge 44% of young people who had left care are unemployed, compared with 27% amongst 15-19 year olds in the general community (Beithal et al 1995); Cashmore & Paxman 1996).

# Young people leaving care generally have inadequate income and face difficulties with money management

Lack of adequate income is a major problem for many young people leaving care, given that youth benefits assume

that young people have some family support and youth income rates, even when deemed independent, are approximately 25% less than the adult rates. This does not reflect the financial realities for young people leaving care, who are often left living in poverty, with not enough money for basic necessities such as food, rent, clothing and dental care. Twelve months after discharge, nearly half of young people who leave care 'can only make ends meet sometimes' and one third go without basics such as heating. Twenty per cent have no-one to turn to in times of financial crisis compared to all young people living at home who report that they either have family, relatives, friends or siblings to call on for help (Cashmore & Paxman 1996).

#### Young people leaving care are more likely to become parents at an early age

The personal, social and sex education experienced by young people in care is often patchy and inadequate. Again, educational disruption and frequent moves mean that many young people miss out on any available sex education. They lack a consistent person they trust enough to discuss sexual health and relationships with. Women who have left care also say that the loneliness and isolation they experience after leaving care, along with low life expectations, lead to a more powerful and urgent need to be a part of a family. One third of women who have left care have a child between the ages of 16 and 19 years of age, with half of these being unplanned pregnancies. Only 5% of young people in the general community have a child at the same age (Beithal et al 1995; Cashmore & Paxman 1996).

## FACTORS INFLUENCING OUTCOMES

It is noted that whilst young people in care are a heterogeneous population in general the level of disturbance amongst young people in care has increased as a result of policies of using out of home care and statutory intervention as a last resort (Green & Jones, 1999). Despite these differences, a number of key factors have been found to be related to outcomes. These include:

- level of preparation
- stability and quality of placement

- family and young people's involvement and contact with each other and with participation in decision making
- young people's beliefs and feelings about the reasons for coming into care
- timing of the transition
- provision of extended support
- availability of peer and adult mentors & significant others
- access to adequate income & affordable, stable housing

### A BEST PRACTICE MODEL FOR LEAVING CARE

A comprehensive approach is required to address the poor outcomes for young people leaving care and to develop responses to improve these outcomes. For young people without a supportive family, models that incorporate permanency planning to adulthood are needed. Broadening the concept of leaving care support in this way involves redefining service delivery components and expanding resources. It also requires a reorientation of existing systems and policies to recognise the

government's responsibility for facilitating transition in a way that parallels parental responsibilities in the broader community.

#### A CONTINUUM OF CARE

In Figure 1 a model, 'Positive corporate parenting and permanency planning to adulthood', identifies the ingredients needed to achieve a continuum of care. The key ingredients in this model are described below.

#### Legislation

The first part of this model argues that

Figure 1. Positive corporate parenting and permanency planning to adulthood

## Continuum of Stages towards Interdependence for Young People in Care (Adapted from ACWA, 1991)

Permanency planning until adulthood underpinned by government legislation and policy

Preparation

Transitional support and aftercare

From the point of entering care with comprehensive assessment, planning and service provision.

A buffer zone with room to make mistakes. Flexibility in the age at which a young person leaves their placement. The capacity for ongoing support into the young person's early to mid 20s if needed.

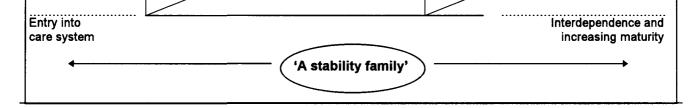
 Service provision underpinned by a quality assurance framwork and continuous improvement to meet standards for best practice.

In-care

Transitions and aftercare

- Comprehensive assessment and planning, eg, LAC
- · Inter-agency co-ordination
- Stable, quality placements
- Development of personal and community networks
- Maintenance and support in education and training
- · Family contact and involvement
- Listening and involving the child and young person
- Informal and formal preparation and practice of tangible skills needed for increasing interdependence

- Readiness assessment and additional preparation if needed
- Individualised leaving care plans which meet core needs
- Inter-agency co-ordination
- Extended placement support and funding until the young person is ready to leave
- Range of supported and independent accommodation options
- Support to pursue and maintain education and employment
- · Additional financial and material support
- Time and support to consolidate skills and individual, family and community networks
- Information and life records



permanency planning to adulthood needs to be formally recognised in government legislation and policy as being an essential component of providing continuum of care. Australia, with the exception of NSW, lags well behind other developed countries, most notably the UK and the USA and many parts of Europe, in legislating for adequate preparation and after care support<sup>3</sup>. New South Wales is now a world leader in having put in place legislation for the provision of after care up to the age of 25 years in its recently introduced Care and Protection Act (1998).

#### **Underpinning policy**

In areas where legislation has been developed, it has been underpinned by policy which recognises that Government, and organisations that act in 'loco parentis' on behalf of government in caring for children and young people out of their own families, have an ongoing 'parental' responsibility for these young people after they leave their care, in the same way that many parents give ongoing support to young people when they leave home.

#### Service provision underpinned by a quality assurance framework and continuous improvement to reach standards of best practice

Key elements of this part of the model include:

#### The establishment of standards.

Overseas standards have been developed for leaving care and after care. It is noted that the current national Baseline Out of Home Care Standards do not distinguish between leaving care and exiting from one placement to another. NSW has developed specific standards for the provision for leaving care and after care service provision. A key part of implementing standards is to develop policy, procedures and practice

guidelines that translate the standards into effective practice. These policies and procedures need to be clearly written, comprehensive and accessible.

Learning cultures. To facilitate continuous improvement towards meeting standards, government and organisations need to promote cultures of learning which are able to reflect on policy and practice.

#### Measures of effectiveness.

Mechanisms for ongoing monitoring of outcomes against benchmarks are critical. Consumer involvement in assessing quality is a key ingredient, and there need to be regular opportunities for young people and families to evaluate their satisfaction with services. Components of service provision are provided within the two bubbles,' in care' and 'transition and aftercare'. Key points to highlight in the model are:

- that young people in care are a highly heterogeneous group;
- that a holistic, integrated approach to preparation for leaving care; transitional and after care support is vital;
- that inter-organisational collaboration and coordination in meeting the core needs of young people is essential;
- that participation of young people is assured;
- that participation of family is assured;
- that information is available about the services relevant to young people as they leave care, together with relevant documentation, life records and possessions.

## Management and organisational arrangements for delivering services.

A range of preparatory, transitional and after care support services need to be available to support legislative and policy requirements. It is also important that it is clear who is responsible for funding and managing these services.

There are three primary management and organisational arrangements for delivering transitional support and after care services identified in the literature. Each of the three arrangements has its relative strengths and weaknesses. Whatever the arrangements adopted, it is crucial that respective roles,

responsibilities and linkages between services and sectors are clear.

### 1. Extended support by care organisation.

This model emphasises the ongoing duty of the government and the primary placement to support and resource the young person until they reach independence. In Finland and Sweden, for example, foster care can continue until 21 years of age, and the government provides independent accommodation and underwrites the rent.

#### 2. Ongoing placement and support by the care organisation and/or referral to specialist programs.

This model combines the provision of both ongoing placement and case management support within the same organisation/placement, and discrete specialist support by alternative service providers. In the United States, for example, the National Title IV-E Independent Living Funds are contracted by individual state governments to external contractors. The national funds provide the following wide range of services and activities to:

- enable participants to seek a high school diploma or its equivalent or to take part in appropriate vocational training
- provide training in living skills, budgeting, locating housing and career planning
- provide for individual and group counselling
- integrate and co-ordinate services
- provide for outreach programs to enable young people to participate
- provide each participant with a written transitional independent living plan based on an assessment of their needs and incorporate this into their case plan.

The funds cannot be used to finance housing, so in many American states the government provides funding for extended foster care and transitional accommodation up to the age of 21 years. However, young people must be enrolled in school or a vocational training program to be eligible for extended support.

<sup>&</sup>lt;sup>3</sup> A charter of rights for children and young people in care has been incorporated into the new Child Protection Act (1999) in Queensland. For young people leaving care the charter says "To receive appropriate help with the transition from being a child in care to independence including, for example, help about housing, access to income support and training and education". Legislative provisions to ensure this support however have not been included.

The Leaving Care/Aftercare support teams in NSW and the transitional support service in Western Australia also reflect these organisational arrangements. Out of home care organisations and child protection authorities are expected to provide ongoing personal support, however, specialist leaving care/after care teams are also available. The specialist programs seek to meet the needs of young people who have intensive support requirements, or provide an alternative service for young people who choose not to receive support from their ongoing worker, organisation and carer. Specialist services also play an important role in inter-organisation coordination and secondary consultation to out of home care providers and other related services

3. Referral to specialist programs. In this model, the transition to independence is treated as a particular phase requiring a specialist service response. These are discrete services, charged with the role of assisting the young person to make the transition to independent living. Specialist after care support care teams are the predominant model used in the United Kingdom. Specialist programs generally entail integrated case management, the provision of a range of supports and the negotiation of transitional and independent housing.

#### **SUMMARY**

A lot needs to be done for a best practice model to be adopted to support young people leaving care. In Victoria, for example, there are no legislative provisions, policies or services to provide for the ongoing support of young people who leave care beyond a very short 3 month 'post placement' period. Despite this many service providers are trying to provide adequate supports out of an ethical concern for these young people. A significant amount of work needs to be done if the situation for young people leaving care in is to be improved.

Full copies of the report on 'Improving outcomes for young people leaving care' are available from CWAV Telephone (03) 9614-1577 or under publications at: http://www.cwav.asn.au

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