Leaving care programs locally and internationally

Towards better outcomes

Philip Mendes and Chris Goddard

Historically, insufficient resources and assistance have been provided to young people leaving state care. Young people leaving care have been found to experience homelessness, unemployment, early parenthood, loneliness, depression, poverty, and involvement with the juvenile justice system.

In recent years, a growing body of research literature has explored the experiences of young people leaving care, and the identification of key factors underlying good after care support practice. Attention is drawn to some of the key findings of this research such as the need for a more gradual and flexible process of transition to independence, specific legislation providing for the on-going support of care leavers, and the provision of formal and properly resourced after-care services. Reference is also made to the key role played by consumer advocacy groups in facilitating the successful transition to independence of care leavers.

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A recent article in *Children Australia* by Green and Jones (1999a) highlights the urgent need to expand formal support services for young people leaving state care. Green and Jones offer their own detailed best practice model for leaving care programs based on a Continuum of Stages towards Interdependence for Young People in Care (pp.66-68).

This paper expands on the concerns raised by Green and Jones to explore the broader policy and political implications of the leaving care debate.

Historically, insufficient resources and assistance have been provided to young people on leaving state care (Ogden, 1992:11; Biehal et al, 1995:3-4; Broad, 1998:19-20 & 45-53). In particular, critical comparisons have been made with the extensive independent living preparation provided to young people from intact families. Young people leaving care have been found to experience homelessness, unemployment, early parenthood, loneliness, depression, poverty, and involvement with the juvenile justice system.

In recent years, a growing body of Australian and international research literature has explored the experiences of young people leaving care, and the identification of key factors underlying good after care support practice. This paper highlights some of the key findings of this research including the central need for the State as parent to provide on-going care if necessary to young people beyond the age of 18 years. In addition, this paper identifies the key role played by consumer advocacy groups in facilitating the successful transition to independence for care leavers.

NEGATIVE OUTCOMES FOR CARE LEAVERS

As noted by Green and Jones (1999a:64-65), numerous studies have documented the traumas commonly experienced by young people leaving state care. Some of the problems identified include:

- **Homelessness**
  British and US studies have found a high correlation between state care and later homelessness (Stein & Carey, 1986:3-4; Raychaba, 1988:68; Stein, 1989:208; Garnett, 1992:4-5; National Association of Young People In Care (NAYPIC), 1992; Aldgate, 1994:262-264).

- **Drug/alcohol use/abuse**
  Young people from care are more likely to use, and occasionally abuse, drugs and alcohol. Such behaviour often serves as a form of escape from past childhood abuse, and associated emotional disturbance (Raychaba, 1988:69; Stein, 1997:41).

- **Mental health**
  The emotional effects of physical, emotional, and sexual abuse often predispose young people in care towards psychological disruption, depression and suicide. Studies have also found a high correlation between youth homelessness and mental health problems (Raychaba, 1988:63-64 & 70).

- **Education and employment deficits**
  Due to a number of factors, young people in care are less likely to succeed academically. Lack of education then hinders their efforts to find and maintain employment. Many become dependent on social security, and experience acute poverty (Stein & Carey, 1986:24-25;

Raychaba, 1988:61-62 & 70-71; Raychaba, 1993:105; Aldgate, 1994:256-258; West, 1995:10-11; Rickford, 1998).

- **Poor social support systems**
  Youth leaving care tend to lack a functional social support network upon which they can rely during the transition from child welfare dependence to adult independence. Many face independence alone and isolated, and lacking a safety net (Stein & Carey, 1986:23; Raychaba, 1988:60 & 71; Aldgate, 1994:259-261).

- **Juvenile prostitution**
  A disproportionate number of young people leaving care become involved in prostitution (Raychaba, 1988:71-73; Biehal et al, 1994:233). Many young people see prostitution as a legitimate choice in view of their minimal education, and lack of employment-related skills (Raychaba, 1993:104).

- **Early parenthood**
  Early pregnancy and parenthood is particularly common among young people leaving care, especially young women who have experienced sexual abuse. Many of these young parents subsequently appear to experience protective intervention with their own children (Ogden, 1992; Biehal et al, 1995:141; Frost & Stein, 1995:H3-H4; Cashmore & Paxman, 1996:174; Stein, 1997:20-21).

Australian studies and reports have drawn similar conclusions. As early as 1989, the Burdekin Report on Homeless Children found a large number of homeless young people came from state care backgrounds (Burdekin & Carter, 1989:112-117). Similarly, a Salvation Army study discovered a high number of current or former state wards amongst the homeless population (Hirst, 1989:65).

Subsequent studies by Taylor, Cashmore and Paxman and others similarly found young people leaving care prone to transiency and homelessness, poor educational attainment, unemployment, early pregnancy, and severe depression (Association of Children's Welfare Agencies (ACWA), 1991:25-27; Cunningham & Freedman, 1993:74; Cashmore & Paxman, 1996:xiv; Green, 1993:40; Green & Jones 1999b:15-16; Human Rights and Equal Opportunity Commission (HREOC), 1997:456-457; Maunders et al, 1999; Shaver & Paxman,

1992:2-3; Taylor, 1990:3 & 7-10; Wilson, 1997:23).

THE NEED FOR A TRANSITION PERIOD TO INDEPENDENCE

Young people leaving state care already face many significant challenges and disadvantages to be overcome.

Firstly, many have experienced and are still recovering from considerable abuse or neglect prior to entering care. Secondly, many have experienced inadequacies in state care including systems abuse. Thirdly, most can call on little, if any, direct family support to ease their movement into independent living (Frost & Stein, 1995:A2; Raychaba, 1988:57-58).

In addition to addressing these major deficits, many state wards currently experience an abrupt end at 16-18 years of age to the formal support networks of state care. They are subsequently offered only limited and discretionary support with no formal entitlement to assistance (ACWA, 1991:26; Auditor-General, 1996:271; Cashmore & Paxman, 1996:73-76, 104-109 & 165-169; Frost & Stein, 1995:H2; Garnett, 1992:3-4; Hatch, 1997:47; Low et al, 1980:58-60; Maunders et al, 1999:viii).

As noted by Raychaba (1988:59):

> Concrete monetary support, educational and skills development support, informational/referral support, social integration support, and emotional support generally cease with the termination of care.

Ex-wards are expected to attain instant maturity (Stein & Carey, 1986:21).

In contrast to the accelerated transition to independence of wards leaving care, most young people still live at home till their early 20s (Raychaba, 1988:54; Robson, 1987:20; Stein, 1989:211). The movement towards independence through leaving home generally involves a long transition period during which young people may leave and return home again on three or more occasions. There is also not infrequently an intermediate or half-way stage between dependence and independent living during which young people may reside with extended family, or in a supportive institution such as a college or hostel (Broad, 1998:26-27; Jones & Wallace, 1992:104-111).

The key factor here is the continued availability of most family homes as a 'safety net' to which young people can return over a considerable period of time. It is this safety net of extended support which is currently not available to most young people leaving care (ACWA, 1991:27; Cashmore & Paxman, 1996:166; Raychaba, 1988:56). Graduation from care needs to become a far more gradual and flexible process (Aldgate, 1994:267; Biehal et al, 1995:56; Cashmore & Paxman, 1996:168; Kluger, Maluccio & Fein, 1989:85; West, 1995:19).

CONSUMER ADVOCACY GROUPS

Consumer advocacy groups have played a key role both in bringing leaving care problems to public attention, and in promoting the introduction of adequate after-care supports and programs (Biehal et al, 1995:4-5).

In Britain, local 'in care' groups such as the *Who Cares? Project* first emerged in the early/mid 1970s leading later to the formation of the National Association of Young People In Care (NAYPIC) in 1979 (Broad, 1998:20; Lindsay & Willow, 1997:64; Stein, 1983).

NAYPIC exerted influence on a number of leaving care reforms and other policy issues including the right of young people in care to attend case planning reviews and attain access to case records, and the end of the clothing order book or voucher system (Biehal et al, 1995:4-5; Parker, Stein & Davies, 1982). NAYPIC existed till 1994, and has recently been succeeded by a new national consumer group, National Voice. In addition, the organization Black and In Care has been successful in emphasizing the particular difficulties of black children in a mostly white care system (Gardner, 1989:217-219).

The Canadian group, the National Youth In Care Network (NYICN), has been particularly vocal in giving a voice to the concerns of young people in or recently out of care. The NYICN initiated a highly successful transitions project to examine the particular needs of young people leaving care (Meston, 1988:627; National Youth In Care Network, 1995; Raychaba, 1988:2-3; Raychaba, 1991; Raychaba, 1993:4-5). Other well-established consumer groups also exist in The Netherlands, Scotland, Northern Ireland,

government is also currently examining the possibility of establishing an After Care Resource Centre and Helpline similar to those existing in NSW.

The ACT Government does not provide any direct leaving care programs per se. However, funding is provided to the non-government Barnardos Transition Program which offers independent living support to homeless young people including care leavers aged 15-21 years (Barnardos Australia, 1999). Similar accommodation and support programs are offered by the Galilee community organisation (Galilee Inc, 1999).

The Tasmanian Government also does not provide any direct leaving care programs. However, young people are provided with a leaving care kit (Department of Community Services, 1999).

The Northern Territory is currently drafting a leaving care support plan, practice standards and principles in conjunction with the local AAYPIC affiliate, Northern Eclipses. Their intention is to offer After Care supports such as counselling and advocacy, referral and information provision, and some small financial support to every young person leaving care (Northern Territory Health Services, 1999).

Finally, the Victorian Government has funded a 'Leaving Care Service Model Project' which is intended to strengthen supports for young people leaving care aged 14-18 years (Department of Human Services, 1998). This project has been completed, and the recommendations are currently being considered by the Minister (Owen, 2000).

However, concern has been expressed that the terms of reference for this research are limited to looking at improving support during the three month post-discharge period, and do not currently envisage further support services beyond this time period (Green & Jones, 1999b:25-28; Victorian Council of Social Service, 2000:114). The government has also recently funded a consultation process organized by Create Foundation in order to facilitate the participation of young people in the leaving care debate (Griffin, 2000).

In addition, a pilot leaving care program called 'Lift Off' has commenced in the rural city of Shepparton for young people aged 16-19 years (The Bridge, 1999; Owen, 2000:113-115).

TOWARDS BETTER AFTER CARE SUPPORT PROGRAMS AND OUTCOMES

A number of key legislative, policy and practice reforms appear to be required to facilitate better outcomes for young people leaving care.

Firstly, Australian states should follow countries such as France, Holland, the USA, Britain and Canada (Broad, 1999:82; Cashmore & Paxman, 1996:4-5; NAYPIC, 1992) in passing specific legislation providing for the on-going support of care leavers (HREOC, 1997:431).

Such legislation should be accompanied by the development of specific leaving care policy statements and leaving care plans by relevant authorities and agencies (Biehal et al, 1995:296-297).

Secondly, specific and adequate funding and resources should be provided to ensure the incorporation of leaving care programs as part of a continuum of state care services (ACWA, 1991:29 & 31; Broad, 1998:256; Cashmore & Paxman, 1996:5; Raychaba, 1988:56).

Thirdly, young people require individual living skills programs to prepare them for leaving care. These programs should include such components as basic literacy and numeracy skills, communication skills, sex education, employment and training, basic knowledge of finances, cooking skills, accommodation, health, relationships with family and friends, positive self-image, and general life skills (ACWA, 1991:29-31; Cashmore & Paxman, 1996:167; Frost & Stein, 1995:C2-C6; Meston, 1988:628-632; Pasztor, 1990; Raychaba, 1988:11; Raychaba, 1991:12; Raychaba, 1992; Stein & Carey, 1986:162-167; Taylor, 1990:17; Wilson, 1997:33-36).

Fourthly, specialist leaving schemes are required to provide on-going assistance to young people who are leaving, or who have left care. These schemes should address a number of key areas and needs including provision for:

• Ongoing counselling/support in times of isolation and depression;

• A system to help celebrate major life cycle accomplishments such as birthdays, birth of children, Christmas, marriage, relationships etc;

• Drug and alcohol rehabilitation programs;

• Assistance to renegotiate relationships with family members (Marsh, 1999);

• Resources to help with basic financial difficulties;

• Assistance and advocacy in regards to accommodation, education and training;

• A designated after care worker;

• An unlimited time frame for the support of these young adults.
(Auditor-General, 1996:271; ACWA, 1991:29; ACWA, 1996; Cashmore & Paxman, 1996:171-177; Hirst, 1989:171; Raychaba, 1988:8; Raychaba, 1991:10)

The British experience would suggest that the following factors may contribute to the success of leaving care schemes:

• Young people need to be involved in defining needs and in the development of services (Stein, 1997:50). Brian Raychaba suggests that peer support groups should play a central role in the provision and evaluation of policies and programs (Raychaba, 1988:13 & 60);

• Accessible guides and information about services should be made available to young people and other scheme users;

• Formal and informal links should be established with residential homes and foster care;

• Special attention should be paid to young people with learning or physical disabilities, young parents, Aboriginal young people, and others with special needs (Biehal et al, 1995:243-245, 298 & 300).

Overall, British schemes have been most successful in the areas of improved accommodation outcomes, and developing practical life skills such as budgeting. Conversely, education and employment outcomes continue to be poor, and the health of young people also requires considerable attention. Lack of adequate financial support remains an on-going problem (Biehal et al, 1995:276-277; Department of Social Security (UK), 1999:23; Broad, 1998:255-256 & 262; Broad, 1999:84-91; Stein, 1989:211-212; Stein, 1997:60).

RESEARCH

Further research on the post-care experiences of young people is required to assist with the development of effective leaving care programs (Auditor-General, 1996:272; Cunningham & Freedman, 1993:76; Jones, 1997:135; Le Sueur, 1991:64; Raychaba, 1991:6 & 13-14).

As noted by Raychaba (1988:14):

> the absence of an adequate knowledge base stands as a formidable obstacle to properly assessing the unique post-care difficulties of youth who have left care and hinders all efforts to better meet their unique needs.

Put more simply, we require objective evaluations of the longer-term outcomes and effectiveness of state intervention into families (ACWA, 1991:31; Taylor, 1990:6; Wilson, 1997:38-39).

In Australia, the only detailed study of young people leaving care was undertaken by Cashmore & Paxman between 1992 and 1995. The study examined the experiences of young people leaving care, their perceptions of being in care, the service needs of young people leaving care, and any relationships between outcomes and young people's individual characteristics, family histories and experiences in care (Cashmore & Paxman, 1996).

Whilst this study provided some valuable data and findings, far more up-to-date and on-going research is required. In particular, we need to know whether the needs and experiences of young people leaving foster care differ greatly from those leaving adolescent group homes and other care facilities.

CONCLUSION

This paper has identified the importance of a continuum of State care services, including a more gradual and flexible process of transition to independence, and the provision of formal and properly resourced after-care services. Suggestions are made regarding the likely structure and requirements of successful leaving care schemes including the importance of active consumer input.

Whilst most Australian States have developed some leaving care supports and programs in recent years, arguably more needs to be done to develop and entrench

these services as core components of State care provision. In our opinion, these initiatives should also be accompanied by the introduction of national legislation duplicating intended British reforms guaranteeing the right of young care leavers to be supported up to 24 years, and minimum uniform leaving care standards (British Association of Social Workers, 1999; Department of Health, 1999; Broad, 1999:90; Calder 2000).

In addition, further research is required to assess the efficacy of all new programs and initiatives. □

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