# Transitioning from (and with) care The next steps

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This article builds on research work undertaken by MacKillop Family Services on the experience of care leavers to explore the importance of the relational aspects of human service work. Recent legislative changes have focused on the availability of services and supports to young people transitioning from care. The authors suggest that it is time to refocus attention on the relationships between young people leaving care and human service workers. Such a discussion opens up models of practice that encourage flexible and participatory approaches.

MacKillop Family Services is happy to share the outcomes of our research with other organisations. Anyone wishing to have a copy of the report, *It was a real shock: Transitioning from care to independent living*, or the Transitioning from Care Tools, can contact the authors by email, or telephone (03) 9699 9177.

Throughout the past decade the situation of young people leaving the care of the state in Australia has been the subject of a range of state and national research projects and public inquiries (see, for example, Cashmore & Paxman 1996; Maunders et al. 1999; Owen et al. 2000; Raman, Inder & Forbes 2005; Senate Community Affairs References Committee 2004, 2005). The unifying theme of much of this work has been the great hardship faced by young people leaving state care and the poor outcomes in areas such as physical and emotional health, housing stability, employment and contact with the criminal justice system (for a useful summary, see Mendes & Moslehuddin 2004: 333-334). This work has prompted legislative change across a range of jurisdictions that has recognised the support needs of those leaving care beyond the age of 18.

This article begins to articulate a more qualitative understanding of aftercare support. It builds upon the work undertaken by MacKillop Family Services<sup>2</sup> in responding to the needs of young people leaving care and explores the question of what it means to provide meaningful support to young people leaving care beyond simply increasing the availability of services. In 2003, MacKillop embarked on a project to review its processes for assisting young people in the transition from out-of-home care. The aims of the project were to identify current best practice in supporting the transition from care, to interview former clients about their experiences of transitioning from care, to gather information on outcomes for all young people transitioning from MacKillop care in a particular year, and to prepare guidelines and resources for better practice in this area.

As outlined below, the MacKillop study confirmed much of what contemporary research with care leavers has brought to

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<sup>&</sup>lt;sup>1</sup> For example, in Victoria the *Child, Youth and Families Act 2005* (to commence on 1 October 2006); in NSW the *Children and Young Persons (Care and Protection) Act 1998.* 

<sup>&</sup>lt;sup>2</sup> MacKillop Family Services provides a range of child and family services including out-of-home care services in the form of foster care, specialised home based care, residential care, temporary emergency residential care, family group homes and lead tenant services. Further to this, a specialised integrated education and residential care program provides alternatives for some of the most marginalised young people placed in out-of-home care. Each year approximately 40 young people make the transition from MacKillop care to independent living.

light. It was not the stated aim of the study to explore specific dimensions of the relational aspect of the provision of care, although some themes were captured in the course of the study. This article seeks to build on one of the emergent themes that participants in our study identified as a key aspect of effective practice during and after care — the importance of relationship.

#### THE MACKILLOP FAMILY SERVICES STUDY

The MacKillop study (London 2004) centred on the experience of young people who had transitioned from MacKillop Family Services. Data was primarily derived from two sources:

- 1. An overview of the outcomes for all young people transitioning from MacKillop care during the 12 month period between March 2002 and March 2003. Key staff who had been involved with each of the 38 young people identified as transitioning during the period were contacted by the researcher to ascertain information about the process and outcomes of leaving care. Interviews were conducted with workers of 33 of the young people who were part of the identified sample.
- 2. In depth interviews with ten young people who had left MacKillop care during the previous five years. Case workers across MacKillop were asked to identify young people who might be prepared to be involved in the research, and passed details of interested young people to the researcher. Interviews by the researcher followed a standard format and were taped and later transcribed. All young people received written information about the research and signed consent forms.

The key findings of the research are presented below.

#### **ONGOING ACCOMMODATION**

As with other studies (for example, Cashmore & Paxman 1996: 109-116; Raman, Inder & Forbes 2005: 22), our research also found evidence of significant housing instability with over half (n=18) of the sample transitioning from MacKillop care in the twelve month period having had at least one move in the previous 6-12 months. As many as half of the young people who leave state care return home (see also Owen et al. 2000: 75; St Luke's Youth Service 2002: 8). However, the MacKillop data also showed that many of these living arrangements broke down quite quickly and that within 6-18 months, half of the young people who had returned home had left again. Interviews with workers indicated that young people's placements with their families often lasted only a few weeks. Such evidence suggests that in circumstances where a return to natural family is the planned next step from care, all young people still require the same preparation for independent living due to the possibility that this arrangement may break down.

#### PREPARATION FOR TRANSITIONING FROM CARE

Case workers were asked about the sorts of activities with young people that assisted in their transition from care. The responses were varied, often creative, but with some young people receiving extensive support and some only receiving minimal support. From the sample of 33 young people who had transitioned from MacKillop care during the 12 month period, just over half (51.5%) had received assistance with living skills training (for example, self-care and homemaking skills). Other areas of preparation included practical assistance, education and training support, family reconnection, linkage to community resources, symbolic markers of transition (for example, Life Books and celebrating personal milestones, farewell dinners), and support to access accommodation services. While support was tailored to the individual needs and situation of the young person, it appears that without a standardised procedure, it is also dependent upon the experience and discretion of the worker involved, as well as the relationship between the young person and the worker. A disturbing proportion of young people in this sample (30.3%) received no support in preparing to transition from care. Such evidence suggested that the development of independent living skills was a practice that was often ad hoc and discretionary rather than planned and systematic.

The research indicates that the majority of young people were in their last placement in care for less than two years, with many only in the placement for less than a year. It can be argued that such conditions do not provide the stability and consistency that are key components in effective planning, preparation and life skills development.

#### **AFTERCARE SUPPORT**

The results in the area of aftercare support showed that there was a haphazard approach to supporting a young person once they had left care. Forms of aftercare support that were provided included regular and irregular telephone calls and visits, which were initiated either by the worker or the young person. Some workers and services took the task of aftercare support very seriously, creating situations and environments for the young people to feel welcome to return to or make contact.

Of concern was the significant proportion (27%) of the sample of young people who had transitioned from care in the previous 12 months that had no ongoing contact at all from the agency. The absence of such contact is of considerable concern given the degree of isolation experienced by many young people leaving care although questions remain as to whether ongoing contact was appropriate (for example, relationships had broken down between the young person and the agency or another agency may have been allocated responsibility for working with the young person).

The importance of aftercare support was highlighted by many of the young people who participated in the research. When asked to list what was helpful to them in leaving care, participants identified 'ongoing relationships' with workers as a key helpful component. One young woman stated:

Whenever I needed to talk to her, she would always be there as a friend to talk to about stuff. She's a pretty cool, outgoing sort of person. I've been through ups and downs with her a lot but she's always been there for me and she is very understanding. She's been cool. It's just like friends catching up. We were always pretty close so that feels like a support thing. (Pamela<sup>3</sup>)

When asked what was unhelpful, the responses included feeling that they were dumped and cut off by workers, and needing to be independent immediately. This sink or swim approach is exemplified in the following:

I was a bit pissed off really. They are there for you when they are getting paid, and then once it's over it's over. No good bye really. It was just a job. (Tom)

And if you leave the resi units you are not supposed to call them again – you can't talk to anyone. If they have been a big part of your life for so long, there should be some sort of ongoing contact, just to ease you out of the resi unit. It makes me feel that the relationships with the staff were all fake. I know that it's a job and they do it because it's their job ... (Amber)

Similar sentiments have been expressed in other studies of the experiences of care leavers (see Dixon & Stein 2005: 147). Such responses challenge the contemporary ideas of professional boundaries or the problem of dual or multiple relationships associated with disciplines such as social work (see, for example, Australian Association of Social Workers 1999; Reamer 2003).

Based on our research, young people are clearly asking their workers to see them as more than just clients. This is hardly surprising as they have been more than just workers, at times taking on the parent and extended family role – shared birthdays, cajoled them into going to school, often lived in the same house as them, and gone on holidays with them. This multiplicity of relationships ensures that providing a service to young people while they are in care is complex, an issue that becomes more pronounced once a young person has left care. However, as the interviews with the young people suggest, it is a complexity that agencies need to address – an area of practice where a strict adherence to professional boundaries has the potential to become counterproductive.

#### **OUTCOME OF MACKILLOP RESEARCH**

Based on the results of our research, MacKillop developed a set of procedures and tools for workers to ensure that young people receive appropriate preparation for their transition from care, as well as support through and beyond the transition process. This was a key part of moving the practice of developing independent living skills from the periphery of work with young people to become core practice. Key amongst these tools is a comprehensive living skills assessment, and a transition plan checklist. It is recommended that these tools be used as early as when the young person is 14 or 15, and then built upon with regular reviews, at least annually. In this way, preparation for transition from care becomes integrated with good parenting from a young age, making it part of everyday practice, and not left until the young person is referred to a specialist leaving care service. The Looking After Children (LAC) case management system in use in Victoria incorporates a similar (albeit less detailed) focus on developing independent living skills. (For further details, see <www.lacproject.org>.)

The development and implementation of standardised tools and checklists was an essential step in attempting to improve outcomes for young people transitioning from MacKillop care. The MacKillop Family Services Leaving Care Tools ensure that the preparation for independent living is given due recognition in working with young people in care. However, the effective use of such tools is dependent not just on the skill of the care worker, but also on the quality of the relationship s/he has with the young person and it is to this question that we now turn.

## ACTIVE PARTNERSHIPS: THE CENTRALITY OF RELATIONSHIPS IN HUMAN SERVICE WORK

Depending upon the relationship with the care worker, the use of such practice tools can be either a way of ensuring a young person leaves care with the best possible preparation, or conversely a millstone of additional administrative responsibility and source of frustration and friction with the young person. It is likely that it will be viewed in both of these ways at different times. Building a trusting relationship is sometimes a forgotten but key strategy to support those young people leaving care – acknowledging that human service practice comprises both an instrumental and moral dimension (Clark 2006: 80). As Meagher and Parton (2004: 11) argue,

... unless care is relocated at the centre of debates, policies, and practices, what makes social work (and social care more generally) distinctive will be lost.

The recently published Centre for Excellence in Child and Family Welfare report on the economic and social costs of

<sup>&</sup>lt;sup>3</sup> The names of all research participants have been altered to protect confidentiality and anonymity.

young people leaving care (Raman, Inder & Forbes 2005: 46) suggests that the provision of support from anyone (family or others) in the two years post-care results in a decreased likelihood of being involved in the criminal justice system, and an increased likelihood of being engaged with the community and in the workforce. Similarly, young people leaving care often have difficulty engaging with generalist services (Senate Community Affairs References Committee 2005: 120). Beyond the efficacy of this support, young people who have left care identify the value of social workers or other professionals who 'worked with them in a manner which made [her/him] feel special, listened to, respected and worthwhile' (Broad 2005: 90). Based on his research with care leavers in the United Kingdom, Broad (2005: 88) argues that:

... we know that because of their abusive and disruptive past, and sense of isolation and vulnerability, they may invest heavily in the supportive relationships they have with various professionals.

This sentiment is echoed by the Senate Community Affairs References Committee (2005: 120) in identifying the importance of care workers working to develop 'good quality relationships and support' with those in (and leaving) care. This evidence alone, and further to the comments of the young people in the MacKillop research, indicates the importance of strong and adequate post-care relationships.

Young people often come into out-of-home care with a history of fractured and hurtful relationships. They are then expected to develop relationships with a range of case managers and carers that are, at best, artificially constructed. Care Teams can comprise a range of individuals (case workers, residential workers and so on) that can contribute to a sense of isolation if not carefully aligned to the needs of young people. As can be seen from the quotes from the young people interviewed in the MacKillop research, they are attuned and sensitive to how genuine those relationships are. Sometimes the most genuine relationships are with workers who do not have direct case management or supervisory responsibility for the young person. The challenge for agencies is to allow relationships that develop naturally to be fostered, and utilised appropriately in the task of assisting the young person to transition from care.

The young people involved in the MacKillop research clearly stated that this also included providing a longer period of post-care support than the existing three month period that is currently provided for under funding guidelines. Although some attention is paid to workers providing ongoing support to young people 3 months post-care, in reality case loads are often filled immediately a young person leaves the agency accommodation. At the time the young person transitioning from care is most vulnerable, the worker is engaged with the time consuming task of settling a new young person into the service. The experience

of working with young people transitioning from care suggests that funding body formulas relating to the allocation of case management should recognise the (often intensive) post-care support that is required – ensuring that this work is given greater weighting.

If we are able to find ways of maintaining meaningful and productive relationships, then we may in some small way heal some of the faith that has been lost through other fractured relationships, as opposed to perpetuating the belief that all relationships are or will be fractured. But the relationship needs to be honest, and needs to be emotionally safe for both the workers and the young person. At a minimum, the MacKillop research suggests that as well as the funded period of post-care support, agencies need to be open and up front about the existence and desirability of ongoing post-care relationships, and give workers space to discuss their feelings about this and be supported in decisions that they may make.

#### **NEXT STEPS**

So how do we begin to take the next steps? How do we move from a lifeless account of human service practice to one that engages people in their uniqueness and complexity – to work with people in ways that matter? How do we work with young people in a way that opens up the possibilities for relationship-based approaches to human service work while acknowledging the potential imbalance of power, the importance of transparency and mutual accountability within a Care Team? There is no simple answer to these questions although we can suggest some starting points. Smith (2001: 302) reminds us that:

... trust ... is of major importance if we and service users think that effectiveness must be concerned with those qualitative and particularly moral features of interpersonal relationships.

Emerging literature on participatory approaches to human service practice opens up a number of promising opportunities. As Braye and Preston-Shoot (2006: 22) suggest:

 $\dots$  emotional dynamics may affect the process and outcome of the encounter  $\dots$ 

Central to this recognition is the growing emphasis in service-user participation in the definition of 'problems' that are to be the focus of professional intervention, and the devising of the 'solutions' to those problems.

Good practice is something more than simply completing technical tasks that perpetuate a cafeteria style human service practice (*Here's your service, now move along!*) or social care as simply a value blind process of policy 'implementation'. The personal matters deeply. The relationship should be based on a model of 'active partnership' (Trevithick 2003: 174) – an approach that opens up choices rather than prescriptive interventions is the key to

fostering the conditions that allow for the formation of quality relationships – to embrace a commitment to creative and novel ways of thinking (Parton 1998); a partnership that allows young people leaving care to articulate who they want to work with, what they want to work on and how long they want to work. Such approaches should not be limited to individual practitioners and their clients. Care Teams have a clear role in developing clear and creative strategies for working with young people leaving care and providing the necessary direction to ensure that partnerships remain productive and transparent.

Such approaches have far reaching consequences for human services for they cannot occur in conditions where care worker's judgement is subject to undue restriction - it is perhaps time to revive and rehabilitate the issue of discretion and its centrality to responsive and meaningful human service work (see Evans & Harris 2004). In working with young people leaving care, we need to recognise that a 'one size fits all' approach will not work. Paying attention to what matters requires an acknowledgement that processes of transition for young people leaving care are rarely linear or free of disruption. Service providers have a role to play in ensuring a familiar and constant presence as well as a degree of understanding that can play a part in mediating and negotiating these difficulties. Funding bodies have a responsibility to promote and resource an environment in which such a service can develop. In this way young people will have the opportunity to be supported to transition with care, as well as from care.

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