

# Children Australia—A 40 Year Retrospective of Australian Out-of-Home Care: Reflections of the Past and Future Directions

Dave Vicary<sup>1,2</sup>

<sup>1</sup>*Curtin University of Technology, School of Psychology and Speech Pathology, Perth, Western Australia*

<sup>2</sup>*Children's Protection Society, Melbourne, Victoria*

For 40 years, Children Australia (and previous incarnations) has provided an enormously valuable space for research, practice and policy to delineate challenges, successes and innovation on issues pertaining to the wellbeing and welfare of children and their families. Articles published in the Journal during this period have been incredibly influential and have added to our collective knowledge of children, young people and their families. Nowhere has this been more evident than the area of out-of-home care (OOHC). This paper will explore and reflect on some of the issues that have been articulated in papers published in the journal over the last 40 years – with a specific focus on Australian Kinship, Foster, Residential and Therapeutic Residential Care. Past issues that are still presenting current challenges will be described and opportunities for change and future improvement identified.

■ **Keywords:** Australia, Out-of Home-Care, kinship, foster and residential care

OOHC in Australia has generated significant interest and debate over the last 40 years. Hundreds of papers have been published over this time addressing the entire care continuum (e.g., child protection practice, kinship care, foster care, residential care, OOHC research, prevention of entry into care, permanency planning, abuse in care, leaving care etc.)<sup>1</sup>. The following review provided enlightenment and insight as, time after time, examples of practice and policy excellence and research evidence were described. Perhaps less heartening were the past issues that are still today's "wicked" problems. Likewise, the lack of Australian research and evidence, poor research to policy translation and lack of systemic national non-siloed approaches to OOHC research are issues that have transcended the years. The emphasis on residential care as the primary placement option 40 years ago has changed with foster care and now kinship care becoming the preferred placement options (Markiewicz, 1996) in Australia.

The change in care demographic has meant that far more children across Australia are being placed with kith and kin (Dunne & Kettler, 2006; Gibbons & Mason, 2003; McPherson & MacNamara, 2014). The Australian Institute of Health and Welfare reported that in 2012–2013 'the majority of children (93%) in OOHC at 30 June 2013 were in home-based care – 43% in foster care, 48% in relative/kinship care and 3% in other types of home-based care'

(Child Protection Australia, 2012–13, p. 48). Ostensibly, this would appear to be a good outcome for children and young people who can no longer remain with their birth parents. Being placed with kith and kin means that the children retain some connection to family and importantly identity. In the case of Aboriginal and Torres Strait islander children, placement in their local community with family is particularly important as it maintains connection to culture and ties with country and kin. The Aboriginal Child Placement Principle recognises the importance of kinship care and it is acknowledged as the preferred placement option for Aboriginal and Torres Strait Islander children. However, many of these kinship placements are vulnerable due to the lack of assessment, ongoing training, financial support and guidance received by the carers (Gibbons & Mason, 2003). Dunne and Kettler (2006) explored the social and emotional impacts of children in kinship care and the stresses experienced by kinship carers. They argued that children in kinship care experience a range of social and emotional issues and that these issues could have long-term impacts. They noted that common issues for kinship carers include stress, financial strain, health concerns and poor resources. Kinship carers are often not prepared to manage the trauma of the children placed

ADDRESS FOR CORRESPONDENCE: Dr Dave Vicary, Children's Protection Society. E-mail: [dvicary@cps.org.au](mailto:dvicary@cps.org.au)

with them, and do not understand the nature of trauma (Worrall, 2001), which subsequently places the children at risk of potential re-traumatisation. Further, many kinship carers are asked by statutory child protection agencies to care for large sibling groups, often in addition to their own children, which places additional psychological/emotional/financial strain upon the family system.

Despite the growing trend towards the placement of children and young people with kith and kin, a review of the articles published in *Children Australia* over the past 40 years illustrates that the great majority of manuscripts have focussed on foster care or residential care. In the past, kinship care has certainly not seen the same level of discussion as the aforementioned two areas. Interestingly, the papers that have discussed kinship care in the past have articulated many of the same issues confronting kinship carers in 2015 (e.g., lack of support, lack of training, lack of assessment, financial strain, stress and health issues etc.). Given the increasing numbers of children residing in kinship care, more needs to be done to support both the carers and the children for whom they care. While there is a significant body of international research, clearly more Australian longitudinal research (Dunne & Kettler, 2006) is needed to explore the benefits and challenges of kinship care – both the impact upon the carer (and their own family) and on the children placed with them. Importantly, understanding what is required to ensure a kinship placement thrives is vital. Additional research should focus on therapeutic kinship care and the needs of kinship carers (McPherson & McNamara, 2014), kinship-care placement breakdown, and the potential of such breakdowns to re-traumatise and possibly lead to further placement disruptions during the child and/or young person's care journey. Additional research on Aboriginal and Torres Strait Islander and culturally and linguistically diverse kinship placements should be prioritised.

As highlighted above, 43% of children in Australian OOHC are in foster care. Through publications in *Children Australia*, foster care has been subject to a significant amount of research and review input. Foster care itself has changed over time and is now at a crossroads. A changing demographic has seen the pool of potential foster carers shrink (Smyth & McHugh, 2006) making it harder to recruit (Delfabbro, Borgas, Vast, & Osborn, 2008; Hansen & Ainsworth, 2008). In some cases, the number of carers is not keeping pace with the number of children requiring a placement (Delfabbro & Barber, 2002). Authors writing in this field have referred to the difficulties in recruiting and retaining foster carers (Smyth & McHugh, 2006); the need for more support (Butcher, 2005); the poor return from recruitment (Keogh & Svenssen, 1999); the need for specialised and accredited training (Alexandris, Hammond & McKay, 2013; Butcher, 2005); professionalisation of foster care (Butcher, 2005; Delfabbro & Barber, 2002); increased subsidies for carers (Butcher, 2005; Delfabbro & Barber, 2002; McHugh, 2011; Smyth & McHugh, 2006) and

recognition, respect and acknowledgement of foster carers and their work (Campbell, 2007).

Other authors have contended that foster care may not be delivering the beneficial outcomes due to multiple placements, offending, poor educational attainment and poor mental health of the cared for children (Ainsworth & Hansen, 2014; Hansen & Ainsworth, 2011); that children and young people in foster care may not have a voice in the decisions that affect them (Turner, 1985); and that central to the success of a foster placement is the relationship between the carer and the child/young person (Frederico, Long, McNamara, & McPherson, 2014). Others argued the need for more trauma-informed practice in foster care (and kinship care) to improve care outcomes (Manley, Barr, & McNamara, 2014).

Some of the foster-care issues identified in the past still have relevance and resonate today. Many of the issues remain “live concerns” which are affecting the viability of foster care. This has serious and profound ramifications for the OOHC system in Australia. If foster care in Australia is to continue as one of the primary mechanisms to care for children, it needs to be reconceptualised. Australian child welfare systems can no longer be reliant on voluntary foster care. Instead, we may need to seek international experience (e.g., the United Kingdom) where foster carers are paid commensurately for their work and commitment. Given the complexity of the children and young people placed in home-based care, intensive support and training programs will need to be developed so that carers are retained and positive outcomes achieved. With the move towards therapeutic home-based care, Australia will perhaps need to look towards professional foster-care models whereby foster carers are highly qualified, experienced, trained and paid a salary. A move down this path may be unavoidable as recruiting volunteer foster carers becomes increasingly difficult. It will require reimagining of the entire care continuum (e.g., perhaps some of the children and young people previously placed in residential care can be better provided for in professional therapeutic home-based care, child protection policy settings may need to be adjusted and more emphasis on prevention of entry into care prioritised) and budgetary fortitude (e.g., budgets allocated for new programs and innovations) in order to deliver on the best interests of children in OOHC.

One area that has generated significant interest and discussion over the last 40 years has been residential care. The literature has identified that some of the issues discussed in the past are still relevant today. The nature of the residential care skill set (including ability to build relationships) and supports required by residential carers has been a popular area of discourse (Ainsworth, 2007; Brown, 1976; Mertin & Baxter, 1985/6; Raymond & Heseltine, 2009). Murphy (1994) notes that, while the role of the residential worker is central to positive care outcomes, many of these workers have poor working conditions which are not commensurate with the importance of their work. Murphy calls for

research that focuses on the needs of residential workers. The need for Aboriginal and Torres Strait Islander residential care to be developed with a cultural framework to provide a healing response to intergenerational trauma and sense of abandonment is identified by Bamblett, Long, Frederico and Salamone (2014) as being an important care initiative for Aboriginal and Torres Strait Islander children and young people residing in residential care; while Hodgkins, Crawford and Budiselik (2013) argue the need to ensure residential care provided to Aboriginal and Torres Strait Islander children considers the importance of maintaining contact with family, increased family supports and how community residential care may facilitate this. Ainsworth and Hansen (1986) also highlight the importance of family members being incorporated into residential care models, but note that appropriate staff and resourcing needs to occur to ensure successful implementation. Still others have described the move towards trauma-informed care and therapeutic residential care (Hussen & Cameron, 2014; Leigh-Smith & Toth, 2014) and, in addition, other authors have discussed the value of residential care, capacity to deliver positive outcomes and future directions (Ainsworth, 2001; Bath, 2008).

Residential care in 2015 has many of the same features as discussed in the past. Today, many of Australia's residential care workers are still not paid commensurately for the importance of their work, some still work in poor conditions, have poor training and supervision, are working with increasingly complex and traumatised children and young people, have few prospects in terms of career advancement (and in some cases career development), are often victims of trauma and vicarious trauma, subject in increasingly complex (and sometimes confusing) regimes of reporting and oversight, receive limited support, are often maligned in the media and work in a constantly changing workforce (e.g., staff turnover). In 2015, these and other issues in residential care need reparation. As demand for placements increases and the complexity of the children requiring alternative care also grows, so will the pressure increase on residential care placements, particularly if the number of foster carers continues to diminish and new carers are difficult to recruit.

Despite the disproportionate numbers of Aboriginal and Torres Strait Islander children and young people in OOHC, there have been comparatively few research, review and discussion papers that have examined this issue. Papers that have addressed the issue of Aboriginal and Torres Strait Islander children and young people in OOHC have discussed the need for self-determination (Ah Kee & Tilbury, 1999; Elarde & Tilbury, 2007). Blackstock (2009) argued that Aboriginal children may be over-represented in OOHC because the support services assisting the families had failed. Further, Blackstock contended that, in order to overcome the disproportionate representation, western and Indigenous knowledge is required to design and implement culturally secure OOHC interventions. Hutt and Clarke (2012) identified six themes to assist with the cultural support of OOHC placements. These themes included (1) Understand-

ing culture, (2) Understanding culture in the daily lives of the child/young person, (3) Carers acculturating themselves into the Aboriginal and Torres Strait Islander community, (4) Supporting cultural needs of Aboriginal and Torres Strait Islander children and young people, (5) Connection to community and (6) Education about culture.

Bamblett et al. (2014) note the importance of building an Aboriginal cultural model of therapeutic residential care; while Elarde and Tilbury (2007) and Hansen and Ainsworth (2009) argue that more support is required for kinship and foster carers to care for Aboriginal and Torres Strait Islander children. Elarde and Tilbury (2007) contend that more research into OOHC that differentiates between Aboriginal and non-Aboriginal carers and is informed by an Aboriginal perspective and knowledge is needed. Given the disproportionate number of Aboriginal Torres Strait Islander children in care, clearly more needs to be done. Reviews such as Taskforce 1000 in Victoria are good initiatives to commence addressing the disproportionate number of Aboriginal and Torres Strait Islander children in care; however, the effort needs to be sustainable with measurable outcomes. More research urgently needs to be commenced that takes into account an Aboriginal and Torres Strait Islander worldview so that culturally sensitive and community owned models of OOHC are developed.

A number of major themes have been identified through this retrospective review – one of these is abuse in care. This seems particularly poignant given the current Royal Commission into Institutional Responses to Child Sexual Abuse. Numerous authors have explored the issue of abuse in care and have noted that children and young people who have disclosed need to be believed and supported (Gaffney, 2008; Goddard, 1998). This is certainly consistent with the findings of the current Royal Commission into Institutional Responses to Child Sexual Abuse which has found that many disclosures made by young children or young people were minimised, disbelieved or, in some cases, led to further abuse. Institutional slavery and its profound effect on the children and young people in state care have been described by some authors (Hil, Penglase, & Smith, 2008). Others have highlighted the failures of the statutory child protection system and its inability to keep children safe (Mendes, 2005); and the subsequent psychological problems, substance abuse, illiteracy, impaired relationships skills, marriage break downs, incarceration (Mendes, 2005) and homelessness (Thoresen & Liddiard, 2011) experiences of those who were in care. Recommendations stemming from the Royal Commission will hopefully instil a national framework that will ensure the safety of children and young people in OOHC into the future.

Poor outcomes for young people living in and/or leaving care have also been subject to numerous review and research papers. Frederick and Goddard (2006) note that when children leave state care, they often experience a range of issues which may include mental health, homelessness and substance abuse. Further, Mendes (2005) notes that many

of the children and young people in OOHC experience significant psychological issues including depression, suicide, substance abuse and poor relationships skills. Mendes argues that to assist care leavers negotiate the transition to independence the OOHC system needs to be better funded, with more highly trained and qualified staff, who can assist the young person with a gradual transition from support accommodation. However, very few care leavers receive the assessment, support and therapeutic services they need to assist with their transition to independence (Frederick & Goddard, 2006).

Other authors have noted the poor educational and vocational outcomes for young people leaving care (Cashmore, 2000; DeGregorio, & McLean, 2013; Mendis, 2013; Mendes, Michell, & Wilson, 2014; Mendes & Moslehuddin, 2004; Smith & McLean, 2013). Others have identified the risk young people in OOHC have of sexual exploitation and prostitution (Bruce & Mendes, 2008). The Looking after Children (LAC) system has also been identified by some as a way of addressing the needs of children living in OOHC and improving their care outcomes (Cheers, Kufeldt, Klien & Rideout, 2007; Wise, 2003). Clearly, the issues identified in the literature are still current today. Children and young people in OOHC are still faring poorly across a range of psychological, behavioural, social, emotional, educational and vocational indices when compared to their peers. Research, policy, practice and bi-partisan government support must combine urgently to focus on improving the outcomes for children in OOHC.

Another significant theme that reoccurs throughout the *Children Australia* journal manuscripts is the need for more National and collaborative OOHC research. This is perhaps best encapsulated by Cashmore, Higgins, Bromfield and Scott (2006) who argue that a national OOHC research strategy must be developed as a research priority and that there are significant research gaps in our existing knowledge base. Cashmore et al. go on to describe a reliance on small qualitative studies. This is certainly consistent with the papers published in *Children Australia* over the last 40 years with the majority of these being discussion or review papers and fewer reporting research studies. Those that did report research findings were almost always small-scale qualitative studies. Cashmore et al. also call for there to be a national research funding commitment, development of multisite, cross jurisdictional studies and collaboration between policy makers, practitioners and researchers. Cashmore and Ainsworth (2003) also argue for a national research agenda, adequate funding and access to reliable and consistent data. Further, they articulate the need for the rapid translation of research findings to practice.

The need for appropriately funded Australian OOHC research is unequivocal. This research should be broad based and conducted in conjunction with practitioners and policy makers to maximise the opportunity of policy and practice uptake. Further, research should be also undertaken

on the “care journeys” of the disproportionate numbers of Aboriginal and Torres Strait Islander children and young people in the OOHC System. Culturally appropriate and secure models of care need to be explored, and in some cases developed, to meet the needs of this vulnerable cohort of Australian children. Models of OOHC that have a strong self-determination (Ah Kee & Tilbury, 1999), community focus and ownership need to be examined (i.e., Victorian *Children, Youth and Families Act 2005*, Section 18). In a similar vein, models of OOHC that provide culturally sensitive care to the growing number of culturally and linguistically diverse children entering the system should also be addressed. Some of these children and young people pose significant concerns in the OOHC system given their exposure to traumatic events.

Over the last 40 years *Children Australia* has provided an opportunity for those working in policy, practice and research to come together to discuss and describe issues pertaining to the wellbeing and welfare of children and their families. There is no doubt about the influence of these discussions upon policy and practice during this time. But it would appear that many of OOHC’s “wicked problems” of the past are still the “wicked problems” of 2015. With increasing demand and decreasing availability of some alternative placement types, Australian OOHC finds itself at the cross roads. The Child Protection Australia (2012–13) illustrates that the rate of Australian children in OOHC has increased between 2009 and 2013 – from 6.7 to 7.8 per 1000. This continued growth rate will inevitably place additional pressure on Child Protection and OOHC Systems already struggling with demand.

Without dramatic and innovative approaches from state and commonwealth governments and care providers across the country in creating new placement types, sustaining and scaffolding an already fragile OOHC system and improving care outcomes for children and young people, OOHC in Australia has a grim future. We must look at why past advocacy has failed to change a system that many have highlighted as at risk and why some new, innovative and potentially beneficial practice has not been implemented. Collectively, we must work assertively and closely with government (and Treasury) to highlight the best interests of the child/young person (and their families) and how positive care outcomes will increase community capacity and resilience and ultimately reduce the financial impost on our community going forward. At the risk of being deliberately provocative, perhaps economic rationalism is the only way forward given our attempt at advocacy in the past? As a society, we will be judged most harshly if our most vulnerable are not protected, cared for and privileged. We cannot wait for change – rather we must make it happen. Our challenge is certainly before us. Australia will need to draw upon what we know works and work hard to derive future care innovations – our most vulnerable – the children and young people in OOHC deserve nothing less.

## Endnote

<sup>1</sup> Even by reducing the focus of the current review, over 187 papers were still in scope with the potential of this number being even higher if some of the archived early journals had been located.

## References

- Ah Kee, M., & Tilbury, C. (1999). The Aboriginal and Torres Strait Islander Child Placement Principle is about self-determination. *Children Australia*, 24(3), 4–8.
- Ainsworth, F. (2001). After ideology - the effectiveness of residential programs for “at risk” adolescents. *Children Australia*, 26(2), 11–18.
- Ainsworth, F. (2007). Residential Care programs for children and young people: What we need and what we don’t need. *Children Australia*, 32(1), 32–36.
- Ainsworth, F., & Hansen, P. (1986). Incorporating natural family members into residential programmes for children and youth. *Children Australia*, 11(1), 12–14.
- Ainsworth, F., & Hansen, P. (2014). Family foster care - can it survive the evidence. *Children Australia*, 39(2), 87–92.
- Alexandris, M.M., Hammond, S.W., & McKay, M. (2013). Children’s emotional and behavioural problems and carer-child relationships in permanent care. *Children Australia*, 38(1), 22–27.
- Bambllett, M., Long, M., Frederico, M., & Salamone, C. (2014). Building an Aboriginal cultural model of therapeutic residential care: The experience of the Victorian Aboriginal agency. *Children Australia*, 39(4), 206–211.
- Bath, H. (2008). Residential care in Australia - Part 2. A review of recent literature and emerging themes to inform services development. *Children Australia*, 33(2), 18–36.
- Blackstock, C. (2009). After the apology - why are so many first nations’ children still in foster care. *Children Australia*, 34(1), 22–29.
- Brown, C. (1976). Defining the residential task. *Children Australia*, 1(4), 32–34.
- Bruce, R., & Mendes, P. (2008). Young people, prostitution and state out of home care - the views of a group of child welfare professionals in Victoria. *Children Australia*, 33(4), 31–37.
- Butcher, A. (2005). Upping the ante! The training and status of foster carers in Queensland. *Children Australia*, 30(3), 25–30.
- Campbell, L. (2007). Change and continuities in foster care in Victoria - prospects and tasks in foster care revisited. *Children Australia*, 32(1), 7–15.
- Cashmore, J. (2000). What research tells us - Permanency planning, adoption and foster care. *Children Australia*, 25(4), 17–22.
- Cashmore, J., & Ainsworth, F. (2003). Out-of-Home care - building a national research agenda. *Children Australia*, 28(2), 5–11.
- Cashmore, J., Higgins, D.J., Bromfield, L.M., & Scott, D.A. (2006). Recent Australian child protection and out-of-home care research - What’s been done - and what needs to be done? *Children Australia*, 31(2), 4–11.
- Child protection Australia (2012–13). Australian Institute of Health and Welfare (2014). Child Welfare series no. 58. Cat. No. CWS 49. Canberra: AIHW.
- Cheers, D., Kufeldt, K., Klien, R., & Rideout, S. (2007). Comparing caring - The looking after children system in Canada and Australia. *Children Australia*, 32(2), 21–28.
- Children, Youth and Families Act. (2005). Section 18, Victorian State Government.
- DeGregorio, L.J., & McLean, S. (2013). The cognitive profiles of maltreated children in care and their educational needs: Supporting good outcomes. *Children Australia*, 38(1), 28–35.
- Delfabbro, P.H., & Barber, J.G. (2002). The micro-economics of foster care in South Australia. *Children Australia*, 27(2), 29–34.
- Delfabbro, P., Borgas, M., Vast, R., & Osborn, A. (2008). The effectiveness of public foster care recruitment campaigns - the south Australian experience. *Children Australia*, 33(3), 29–36.
- Dunne, E.G., & Kettler, L.J. (2006). Social and emotional issues of children in kinship foster care and stressors on kinship carers - a review of the Australian and international literature. *Children Australia*, 31(2), 22–29.
- Elarde, P., & Tilbury, C. (2007). The experience of Aboriginal and Torres Strait Islander carers in the child protection system. *Children Australia*, 32(2), 8–14.
- Frederick, J., & Goddard, C. (2006). Pathways to and from state care - the experience of eight young people. *Children Australia*, 31(3), 34–41.
- Frederico, M., Long, M., McNamara, P., & McPherson, L. (2014). The way all foster care should be: The experience of therapeutic foster carers in the Victorian circle program. *Children Australia*, 39(4), 211–215.
- Gaffney, K. (2008). Hiding behind the past - understanding historical abuse in Out of Home Care. *Children Australia*, 33(4), 38–43.
- Gibbons, L., & Mason, J. (2003). Challenges posed by kinship care - a study focussing on New South Wales. *Children Australia*, 28(4), 12–18.
- Goddard, C. (1998). Not the last word: Point and counterpoint - nearly the end of the beginning of a never-ending story. *Children Australia*, 23(1), 41–44.
- Hansen, P., & Ainsworth, F. (2008). Children in out-of-home care - what drives the increase in admissions and how to make a change. *Children Australia*, 33(4), 13–20.
- Hansen, P., & Ainsworth, F. (2009). Report on the special commission of the inquiry into child protection services in NSW (Wood Report) - a review and commentary. *Children Australia*, 32(2), 170–23.
- Hansen, P., & Ainsworth, F. (2011). In the best interests of the child - critical reflections on an overused construct. *Children Australia*, 36(1), 12–17.
- Hil, R., Penglase, J., & Smith, G. (2008). Reflections on institutional care and child slavery in Australia. *Children Australia*, 33(1), 13–17.

- Hodgkins, K.A., Crawford, F.R., & Budiselik, W.R. (2013). The halls creek way of residential care: Protecting children is everyone's business. *Children Australia*, 38(2), 61–69.
- Hussen, T., & Cameron, C. (2014). Lighthouse foundation therapeutic family model of care: Stages of recovery and their application to young people in Out of Home-Care. *Children Australia*, 39(4), 237–242.
- Hutt, S., & Clarke, A. (2012). Improving Aboriginal and Torres Strait islander cultural support in Out of Home Care. *Children Australia*, 37(2), 76–79.
- Keogh, L., & Svenssen, U. (1999). Why don't they become foster carers - a study of people who enquire about foster care. *Children Australia*, 24(2), 13–19.
- Leigh-Smith, C., & Toth, K. (2014). The sanctuary model: Creating safety for an Out-of-Home Care community. *Children Australia*, 39(4), 232–236.
- Manley, L., Barr, R., & McNamara, P. (2014). Strengthening trauma informed therapeutic practice approaches in Out of Home Care. *Children Australia*, 39(4), 216–215.
- Markiewicz, A. (1996). The child welfare system in Victoria: Changing context and perspectives 1945–1995. *Children Australia*, 21(3), 32–41.
- McHugh, M. (2011). A review of foster career allowances: Responding to recommendation 16.9 of the special inquiry into child protection. *Children Australia*, 36(1), 18–25.
- McPherson, L., & MacNamara, N. (2014). Therapeutic kinship care: A carer's perspective. *Children Australia*, 39(4), 221–225.
- Mendes, P. (2005). Remembering the “forgotten” Australian - the care leavers of Australia and the senate inquiry into institutional and Out-of-home Care. *Children Australia*, 30(1), 4–10.
- Mendes, P., & Moslehuddin, B. (2004). Moving out from the state parental home: A comparison of leaving care policies in Victoria and New South Wales. *Children Australia*, 29(2), 20–29.
- Mendes, P., Michell, D., & Wilson, J.Z. (2014). Young people transitioning from Out-of-Home Care and access to higher education: A critical review of the literature. *Children Australia*, 39(4), 243–252.
- Mendis, K. (2013). Research for practice: Highlighting personal strengths of children in OOHC: Two case examples. *Children Australia*, 38(1), 36–39.
- Mertin, P., & Baxter, R.M. (1985/6). Towards a residential treatment programme for emotionally disturbed children. *Children Australia*, 10(4), 19–21.
- Murphy, J. (1994). Not just a job: A study of the needs of residential child care workers in Melbourne, Australia. *Children Australia*, 19(1), 27–32.
- Raymond, I., & Heseltine, K. (2009). The nature, role and qualities of the staff-client relationship as seen through the eyes of young men in residential care. *Children Australia*, 34(2), 24–32.
- Smith, L.J., & McLean, S. (2013). Issues and challenges for services agencies in monitoring educational outcomes for children in OOHC. *Children Australia*, 38(3), 100–105.
- Smyth, C., & McHugh, M. (2006). Exploring the dimensions of professionalising fostering - carers perceptions of their fostering role. *Children Australia*, 31(1), 12–20.
- Thoresen, S.H., & Liddiard, M. (2011). Failure of care in state care: In-care abuse and post-care homelessness. *Children Australia*, 36(1), 4–11.
- Turner, J. (1985). Children's rights. *Children Australia*, 10(3), 19–20.
- Wise, S. (2003). Using looking after children to create an Australian out-of-home care database. *Children Australia*, 28(2), 38–44.
- Worrall, J. (2001). Kinship care of the abused child – the New Zealand experience. *Child Welfare*, 80(5), 497–511.

□