

Young people's journey to independence

Towards a better future for young people leaving state care in Victoria

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Young people leaving state care have been found to experience deficits in all aspects of their life cycle. These include homelessness, poor educational and employment outcomes, involvement in juvenile crime and prostitution, mental and physical health problems, early parenthood and inadequate social support systems. These poor outcomes experienced by care leavers result from a range of factors relating to their pre-care abuse and neglect, poor quality and unstable care history and inadequate support for their successful transition to independence. Young people leaving state care in Victoria are currently lacking the ongoing and guaranteed support that would be expected of a good parent. Using relevant local and international literature and findings from a qualitative study involving 10 care leavers, this paper examines the factors that contribute to negative as well as positive outcomes for young people leaving state care. Some conclusions are drawn regarding policy and practice reforms that could lead to improved outcomes for care leavers.

This paper is based on some initial findings of a qualitative research study currently in progress titled 'Graduating from the child welfare system: A critical examination of needs and support services for young people leaving state care'.

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Often the most vulnerable and disadvantaged youths of our society who have suffered abuse and neglect are forced into independence unprepared and unsupported. Compared to their similar age cohort in the general community, care leavers face particular difficulties in accessing educational, housing, employment and other developmental and transitional opportunities. The research findings consistently depict care leavers as being particularly disadvantaged and as having significantly reduced life chances.

Despite young people leaving care increasingly being recognised as one of the most vulnerable groups in society, very few legislative and program supports are available for them in their preparation for a successful transition into adult living. The accelerated transition and abrupt ending of state responsibility to care leavers in most Australian States and Territories contradicts the existing social norms of most parents continuing to support their children until the age of 21-25 years. Transition from care to independence needs to become a far more gradual and flexible process based on levels of maturity and skill development, rather than simply age. Some researchers recommend use of the term 'interdependence' rather than independent living in order to reflect a notion of shared care and responsibility between young people, their families, friends, workers, and the broader community (Frost & Stein 1995:A3; Green & Jones 1999:13; Propp, Ortega & New Heart 2003:265).

Drawing from relevant Australian and overseas literature, this paper examines the historical context and factors that contribute to negative as well as positive outcomes for care leavers. Findings from a pilot study based on interviews with 10 care leavers are presented in an attempt to establish a relationship between pre-care, in-care experiences and post-care outcomes. Based on the literature review and findings, this paper also looks into the potential policy, practice reforms and best practice models that may lead to better outcomes for care leavers.

CIRCUMSTANCES AND DEMOGRAPHY

Care leavers are a heterogeneous group as they vary considerably in terms of the type and extent of abuse, the age entered care, their pre-care and in-care experiences, their cultural and ethnic backgrounds, their developmental stage and needs when exiting care, and the quality and quantity of supports available to them (Stein & Wade 2000). Young

people who enter the substitute care system come from diverse backgrounds, and are at different stages of their lives with varying degrees of needs, circumstances and vulnerabilities. It is argued that pre-care and in-care experiences can influence the outcomes for care leavers (DHS 2000; Green & Jones 1999). The study by Cashmore and Paxman (1996:166) revealed that young people differ in terms of their maturity and preparedness for independence and also the circumstances surrounding their discharge and post-discharge support.

The most recent statistics show that a total of 643 young people aged 15-17 years were discharged from out-of-home care in Victoria in 2004-05, and the total number of children in care increased by 70% from 13,979 at 30/06/1996 to 23,695 at 30/6/2005 (AIHW 2006:44-45). A recent Victorian leaving care study revealed that 45% of the 60 young people interviewed had been in foster care, 5% in kinship care and 50% in residential care after the age of 12 years (Raman, Inder & Forbes 2005:18). The quantity and quality of supports available to young people leaving care reflect the existing government policy and legislation in the respective Australian States and Territories.

THE HISTORY OF THE AUSTRALIAN LEAVING CARE DEBATE

The debate around post-care support for care leavers has a long history. Leaving care was first brought to public attention in 1989 by the National Inquiry into Homeless Children which identified that a large number of homeless young people came from state care backgrounds (Burdekin & Carter 1989:112-117). Further Victorian studies by some non-government charities confirmed these concerns (Hirst 1989; Taylor 1990). Despite these findings, no action was taken by the Commonwealth Government to introduce national benchmarks for leaving care services, resulting in significant policy and practice differences across States and Territories.

Subsequent campaigns for leaving care services have been driven primarily by a coalition of peak child welfare provider groups and consumer groups (Mendes 2002:54-56). Some semi-independent state and national government reports and inquiries have also been influential in provoking policy and political debate (Australian Law Reform Commission 1997:455-457; Public Accounts and Estimates Committee 2001:141-148). Yet currently New South Wales is the only state which offers both a legislative and program response for young people leaving care.

In Victoria, Sections 119-124 of the *Children and Young Persons Act 1989* provide no mandatory entitlement to leaving care or after-care supports other than stipulating that appropriate discharge procedures be followed. These procedures include a limited post-placement support for a period of up to three months (Green & Jones 1999:4 & 31; Maunders et al. 1999:30-31). Leaving care only entered the

public political agenda in 1996 when a report by the Victorian Auditor-General demanded action from the government for the provision of specific supports for care leavers (Auditor-General 1996: 270-272).

Subsequent research reports from the Children's Welfare Association of Victoria (Centre for Excellence in Child and Family Welfare) and the National Youth Affairs Research Scheme confirmed these concerns (Green & Jones, 1999; Maunders et al. 1999). In response, the Victorian Government allocated \$4.8 million over four years to the development of independent living skills programs for young people at risk of homelessness with a particular focus on housing and support for young people leaving care. In addition, a mentoring program was introduced for some care leavers (Mendes & Moslehuddin 2004:24-27). However, these programs tend to be limited and discretionary in nature, and lack any legislative guarantee of after-care support.

Following a review of the Children and Young Persons Act 1989, the new *Children, Youth and Families Act 2005* has recently been passed through the Victorian Parliament and it is understood that the Act will be proclaimed in October 2006 (DHS 2005). Section 16 G of the Act includes provisions for extended leaving care and after-care supports for care leavers up to the age of 21. Although these initiatives by the current Minister and the DHS leadership are welcome, the following concerns have been expressed regarding the current proposals contained in the new Act:

- Section 16 G contains extended responsibilities for the provision of services for young people under the age of 21 years. However, Section 16 (2) states that these responsibilities 'do not create any right or entitlement enforceable by law'.
- The Act fails to define what the typical duties of a responsible parent would be for a young person up to the age of 21 years, and does not explicitly state what supports and programs will be provided to care leavers, and what levels of funding will be available.
- No rationale has been provided for limiting the legislation to 21 years, rather than 25 years of age as recommended by a number of reports and groups.

Arguably a national benchmark with the provision of minimum standards is needed to ensure improved outcomes and a better future for care leavers in all Australian States and Territories.

TOWARDS A BETTER FUTURE

A survey of the United States, United Kingdom and Australian literature has identified common concerns regarding problematic outcomes for care leavers (Barth 1990; Biehal et al. 1995; Cashmore & Paxman 1996; Courtney & Dworsky 2005; London 2004; Raman, Inder & Forbes 2005). Many care leavers appear to experience social exclusion in a range of areas; that is, they are denied the opportunity to

participate in mainstream social and economic systems. Examples of social exclusion include lack of access to adequate income or resources, absence of employment opportunities, exclusion from services, and exclusion from social networks. Conversely, the provision of adequate income support and services, access to education, training and labour markets, and improved opportunities for social relationships should promote the social inclusion of care leavers (Broad 2005:3-16 & 126).

The social inclusion model suggests that a range of flexible supports and services are needed to ensure improved outcomes for care leavers. They include the provision of stable and supportive placements with a positive attitude to education, maintenance of links with either family members or community supports, a flexible and functional process for graduating from dependence to interdependence, the active involvement of young people in the leaving care planning and decision-making process, the availability of a range of accommodation options, and ongoing support as required. The state needs to provide not only the care expected of a good parent, but also to actively compensate abused and neglected children for the disadvantages produced by their traumatic pre-care experiences.

RESILIENCE AND POSITIVE OUTCOMES

Stein (2004) defines resilience as the quality that enables some young people to find fulfilment in their lives in spite of adversities and problematic backgrounds, and that resilience is about recovery, coping and overcoming the odds. Similarly, Broad (2005) argues that even in situations of severe adversity, young people can develop resiliency and protective strategies which will enable them to make a successful transition to adult life.

Many care leavers display a considerable resilience in overcoming the odds and recovering from earlier trauma resulting from abuse and neglect. Resilience is closely associated with their pre-care and in-care experiences, and the support they receive. Particular factors that appear to contribute to resilience include: stable and good quality placements that promote secure attachments; a positive experience of school or college; ongoing professional and informal support with living skills and career plans; and supportive social experiences and relationships (Gilligan 2001; Allen 2003:iii-ix). The Centre for Excellence in Child and Family Welfare study (Raman, Inder & Forbes 2005:4) found the outcomes for resilience were associated with demographic, in-care and leaving care experiences. They include: community involvement; confidence about living independently; current and future feelings; and feelings about time in care.

AIM OF RESEARCH

The overall aim of this research was to gain an in-depth understanding of young people leaving state care based on their own experiences, with a particular emphasis on the relationship between out-of-care experiences and post-discharge outcomes.

METHODOLOGY

In line with the aims of this research, a qualitative research approach was chosen using a purposeful sampling technique. The sampling size was limited to the availability of young people through two non-government agencies working with care leavers. This study therefore targeted young people who had left state care under Guardianship Orders and were aged between 18 and 30 years.

A semi-structured questionnaire was used in this study to collect data through in-depth interviews with a sample of 10 young people. Each respondent was interviewed face to face and their responses were audio taped and later transcribed. In accordance with the University Ethics Approval Guidelines, each respondent was given an explanatory note and a written consent was obtained from them prior to the interviews.

The authors acknowledge some limitations with regards to this study. Firstly, given the purposeful nature of sampling and the limited number, they may not be a true representation of a cross section of young people leaving care. Secondly, no scientific tool has been used to analyse data, instead a thematic analysis has been presented to describe study findings.

THE DEMOGRAPHY OF SAMPLE

The 10 care leavers interviewed were aged between 18 and 25 years, with an average age of 20.2 years, and comprised 7 females and 3 males. The age range when they entered care was between birth and 15 years, whilst the age range when they exited care was between 16 and 18 years. Out of 10 respondents, 4 were from rural Victoria and 6 were from the Melbourne metropolitan area.

FINDINGS FROM THE STUDY

CIRCUMSTANCES OF YOUNG PEOPLE ENTERING AND EXITING THE CARE SYSTEM

Age of entry to care (Table 1)

Age at entry	No. of young people
0 - 6	3
7 - 13	4
14 - 15	3

The young people entered care at different ages and the reasons for entering into care also varied considerably.

Circumstances and reasons for coming into care

The most common reasons for coming into care as reported by care leavers in the study include: physical and emotional abuse; domestic violence; drugs and alcohol abuse by parents; transience; neglect; mental health issue for parents; abandonment; and irreconcilable differences between young people and their parents. The reasons for younger children coming into care were mostly parental abuse, whilst the reasons for older children were a combination of parental abuse and irreconcilable differences with their parents. The findings also indicate that some care leavers had been subjected to multiple forms of abuse and neglect prior to entering care.

My mum had a mental breakdown, there was physical and emotional abuse in the family, there were some drug and alcohol problems.

The young people interviewed in this study entered care at different ages and stages of their lives with a varying degree of maturities and vulnerabilities. Some of the care leavers were left with a great deal of unresolved trauma and anguish. The feelings of anger, rejection, trauma and insecurity resulting from the pre-care abuse have continued right through the young people's adult lives and a significant number of them are still struggling to come to terms with these feelings. The findings also highlight that some young people carry a great deal of self-blame and guilt for their past history and coming into the care system.

We never had a good stable home, we always used to move around and never went to school properly, never had food, never had clothes, never had friends like you know ... we went to 11 different schools, we were just unstable, mum always had bills and getting chased by cops, lots of violence, beating and stuff going on at home.

Placements during care (Table 2)

No. of placements	No. of young people
2 - 6	2
7 - 13	2
15 - 30	4
100 (alleged)	1
Too many to remember	1

The study findings revealed that the care leavers had lived in a variety of placement situations during their period in care including: foster care; adolescent community placements; residential units; group homes; lead tenants; refuge; caravan parks; shelters; shared accommodation; streets; boarding; relatives and friends. Consistent with other findings (Cashmore & Paxman 1996; Green & Jones 1999, London 2004; Maunder et al. 1999; Raman, Inder & Forbes 2005), the care leavers in this study have also experienced frequent changes and a variety of placements during their period in

care. All of the 10 care leavers in this study experienced multiple placements while in care, with the minimum number of placements being 2 and the maximum being 100, as alleged by one of the care leavers. One respondent reported having too many placements to remember. The shortest placement consisted of one day, whilst the longest was three years.

All of the 10 respondents experienced numerous changes of placements for a variety of reasons and this has resulted in feelings of rejection, instability and insecurity. Frequent moves through the care system can negatively impact on their ability to form a secure attachment with the caregivers. The absence of emotionally responsive parenting can result in the children displaying serious problems in all areas of their development phase (Egeland, Carlson & Sroufe 1993)

... during when I was like 14, because I was sort of sick of the foster placements and the breakdowns and criminal stuff, I actually ran away and went to another state, 'cause I was a bit fed up with the way I was being treated ...

Reasons for placement changes/breakdowns

The most commonly reported reasons for placement breakdown and changes were: conflict with foster family and with other boarders; associating with the wrong crowd; anger and resentment; problematic behaviours (including drinking alcohol and drug abuse); and assaults to the carers. One of the respondents reported being emotionally and physically abused whilst in care.

I was emotionally abused and physically abused while I was in care by a family and people of some of the carers I was living with, and when they put me back at home I was abused by my family. So all up I had probably 15 years of physical abuse in my whole life.

This report concurs with the study by Cashmore and Paxman (1996:45) which found that some young people experienced physical, sexual and emotional abuse and neglect whilst in care.

Age of exiting from care (Table 3)

Age of exit from care	No. of young people
18 years	3
17 or just before 18 years	5
16 years	2

The age at which young people exited care varied from 16 to 18 years. Seven of the 10 young people left care before their 18th birthday and all but one of the care leavers reported that they didn't feel prepared at the time of discharge from care.

HOUSING OPTIONS FOLLOWING DISCHARGE FROM CARE

All but 2 of the care leavers have had multiple accommodations following discharge from care although 5 of

them are currently living in supported accommodation under a Leaving Care Program. The findings show that 2 of the care leavers lasted only for a month in supported accommodation provided by a leaving care program.

Current housing arrangements (Table 4)

Housing type	No. of young people
Supported housing	5
Private housing	3
Shared housing	1
Family home	1

Table 4 shows that the 10 care leavers interviewed are currently living in a variety of housing arrangements, most of them of a temporary nature. A total of 3 care leavers have indicated that they will need to move out soon to secure more permanent accommodation due to problems with neighbours and financial difficulties.

POOR OUTCOMES EXPERIENCED BY CARE LEAVERS

Relationship and contacts with biological family

None of the 10 care leavers interviewed in this study reported having a close relationship with their parents during their period in care; however, for some of them, the relationships improved following discharge. The contacts between care leavers and their biological families were sporadic throughout the substitute care system. Four respondents, however, reported having re-established the relationship following discharge from care, although this was still not viewed as a close relationship. Some young people reported having a closer relationship with their siblings than with their parents and receiving support from them. A total of 3 young people have never known their biological father, whilst 2 respondents reported a 'complete breakdown' of relationship with their birth parents. For those respondents who still maintain contact with their family, it is often intermittent and lacks spontaneity. The lack of a close relationship and regular contact with the biological parents has contributed to feelings of anger, self-blame, insecurity and loss of identity. For example, those 3 respondents who have never known their biological father have expressed a great deal of resentment, anger and hatred.

No, don't know him and don't want to know him, I hate him, I hate my dad then I don't even call him a dad just because of the stuff when I was younger

Education and employment (Table 5)

Highest educational level achieved	No. of young people
VCE	3
Year 11	3
Year 10	2
Year 7	2

Consistent with other study findings suggesting a low level of education among care leavers (Cashmore & Paxman 1996; London 2004; Raman, Inder & Forbes 2005), this study confirms that only 3 of the care leavers completed year 12 and they did so following their discharge from care. Additionally, one of these care leavers is currently enrolled in a tertiary course, whilst the other two have completed some certificate courses. These care leavers reportedly had some supports from leaving care workers and also showed a strong determination to succeed academically.

The most commonly reported reasons for the low level of education include: frequent changes of schools; emotional traumas resulting from past abuse; disruptive behaviours; and lack of secure and stable accommodation during and post-care. Consequently, this has resulted in the majority of young people being unsuccessful in gaining and sustaining meaningful employment. Out of 10 care leavers, only 3 are currently engaged in full-time paid employment, 2 are working part-time and 5 are unemployed and are fully dependent on Centrelink benefits. All but 2 of the care leavers reported having experienced financial difficulties and their income not being adequate to meet their needs.

Because I was having so much problems in care and with accommodation breakdown and emotional and physical problems, school didn't interest me ... just used to play up and not go to school.

Poor physical and emotional health

Out of 10 young people interviewed, 7 reported having experienced some problems with their physical health during and following discharge from care. The CECFW study findings (Raman, Inder & Forbes 2005:24) also suggest a similar pattern as two-thirds of the young people reported having been diagnosed with some form of disability or illness. One of the respondents in the current study had several miscarriages which were attributed to repeated and prolonged physical and emotional abuse before and during care. A total of 6 respondents had suffered from depression or other mental health issues during their period in care, warranting prescribed medications and/or professional interventions. These care leavers have suffered from multiple health issues during their times in care and these were reported to have resulted from their past abuse, instability and insecurity. Out of these 6, 3 care leavers are still on medications and are seeking professional intervention for their depression. Moreover, 3 of the young people reported that they had been suicidal during their time in care due to a range of emotional problems they had endured before and during care. A few care leavers have also reported that they still drink alcohol and use some drugs every now and then.

... I was completely emotionally distorted like I couldn't concentrate on things, I was just emotionally unable to interact with people and have an intimate sort of relationship with anybody. I get very anxious and upset at

night still to this day because of all that stuff that has happened to me, it has been a very big roller coaster, a very emotional sort of a roller coaster for me.

Criminal behaviours

As evident in the existing literature and other research findings (Cashmore & Paxman 1996; London 2004; Owen 2000; Raman, Inder & Forbes 2005), a total of 6 out of 10 respondents in this study had been in trouble with the law and faced criminal charges both during and after their time in care. Some of them had multiple charges, including assaults, drink driving, drinking alcohol, broken entry, possession of drugs, driving without a licence, illegal debt collection, and destruction of property. Some of the reasons for engaging in criminal behaviours as reported by respondents include associating with the wrong crowd, breaking up with girl friends, supporting drug and drinking habits and underlying anger. Feelings of anger and resentment among some of the care leavers appear to have also contributed to their criminal behaviours. The findings indicate that 2 of the care leavers still have pending charges.

Yeh, when I was younger I had a lot of criminal charges because of being in care and the way I was being treated, it made me go off a lot, and it used to be mostly wrecking the houses I lived in, smashing up the houses or hitting the workers because they just used to treat me like crap and restrain me and stuff, so that's where the criminal charges came from.

Early parenthood

Out of the 10 care leavers, 2 have children of their own, including one who had her first child at the age of 16 years and now, at the age of 26, has 5 children. One of her 5 children is living in permanent care following Child Protection intervention. The other parent is considering signing the two children over for adoption. Both of the care leaver parents, however, showed considerable understanding and insights into the well-being of their children. The care leaver who still has four children living with her appears to be quite protective of her children and reported that she doesn't want her children to go through what she has been through herself.

I didn't know the first thing about looking after myself let alone expecting a child. I know now eight years later that if I had that experience back then, my little daughter would be living with me today, instead of leaving and going into care at eight weeks herself.

... the Department is there for the protection and safety of the child, but they forgot that I was a child myself...

The high correlation between early parenthood and a state care background is also supported by other Australian study findings. For example, one-third of young women leaving care either had children or were pregnant after leaving care

compared with less than five per cent in the comparison group in the general population (Cashmore & Paxman 1996:194; Green & Jones 1999:16)

Leaving care experiences

All but one of the care leavers reported that they didn't feel adequately prepared for leaving care, and there was very limited or no support before and after being discharged from care. One care leaver who reported having felt prepared for leaving care, had been living independently for a few years prior to being discharged and had received some support from DHS with the basic necessities. It is interesting to note that two of the young people felt ambivalent about leaving care. For example, on one hand they were excited and relieved, whilst on the other hand they felt scared and uncertain to face the real world. A few of the young people reported having ongoing contact with their workers from leaving care programs.

I was scared, I was very scared actually, because I didn't know who was going to take care of me, so like I was pretty depressed, I couldn't take care of myself at that point in my life

They threw me into a leaving care program but like that didn't really do anything for me.

MAIN PROBLEMS EXPERIENCED BY CARE LEAVERS

The following is a summary of the main problems experienced by care leavers as perceived by young people in the study:

- lack of support and advice before and after leaving care;
- lack of information regarding community supports and how to access them;
- homelessness;
- criminal behaviours;
- drugs and alcohol use/abuse;
- loneliness;
- depression;
- rejection;
- problematic relationships with the biological family;
- being discharged too early;
- lack of contact between young people and workers;
- instability;
- not having anywhere to return in case of emergencies;
- lack of connection between young people and the wider community.

ADVICE TO OTHER YOUNG PEOPLE

Young people involved in this study offered the following advice to other young people leaving care:

- be pro-active in searching and sustaining supports;

- do not take anything for granted;
- gain as many independent skills as possible whilst in care;
- be prepared to accept ups and downs;
- be up front with the workers if you feel unprepared to leave.

ADVICE TO AGENCIES AND WORKERS

- Offer supports well before leaving care and delay the timing of discharge to allow young people to adequately prepare and learn the necessary skills.
- Ongoing availability of a mentor to offer support and advice as needed, rather than control and exercise power.
- Listen to young people and involve them in decision making that would have an impact on them.
- Teach them independent living skills and encourage them to take responsibilities.
- More leaving care programs to be made available, similar to those offered by St Luke's (Bonnice 2002).
- Offer young people positive alternatives to help avoid boredom and loneliness.

The strong theme that has emerged from respondents' comments is that young people are not adequately heard and that they need to be given opportunities and alternatives that are optional rather than controlling or being imposed on them.

RESILIENCE AND POSITIVE OUTCOMES

It is evident from this research that some of the young people were able to cope remarkably well with the adversities resulting from their involvement with the substitute care system. These young people received some post-care supports from leaving care programs and workers, and showed a great deal of determination to succeed, particularly in areas of education and employment. Gilligan (2001) suggests that services can promote resilience in young people in care by positively influencing social resources and experiences to themselves, their carers and their natural family.

Referring to a foster carer, one care leaver commented:

She never really taught me exactly ... she was good and she really motivated me so I was personally trained at the age of 17 or so on. She really encouraged me to go to school and that type of thing, so in year 12, I worked in a gym for two years.

One of the care leavers is currently involved in a traineeship in Business Administration and has been offered a job there, pending successful completion of her training. This particular care leaver is living independently, working part-time and seems fairly content and confident with some clear future goals and aspirations. It is to be noted that she has had ongoing contact with and support from her brother throughout. Two of the care leavers are currently involved in a self-managed business in personal training for other young

people with assistance from a Leaving Care Program, and appear very successful and content with their achievements.

I was very lucky with the ... where I moved to, they like helped me to cook dinner and stuff like that ... and emotional support

All of these young people appear to have a good supportive network of friends whom they can call upon for practical and emotional support if needed. They also receive some supports from their immediate and extended family members from time to time. Two of the care leavers are currently living with their partners and receive enormous support from them and expressed a great deal of satisfaction in their general lives. In contrast, three of the care leavers reported to have been emotionally unstable and involved in offending behaviours which were partly attributed to the relationship problems with their partners.

SUMMARY OF KEY THEMES AND IMPLICATIONS FOR PRACTICE

- Young people enter care under different circumstances with varying degrees of need, maturity and vulnerabilities, and therefore the leaving care services need to be flexible and diversified to cater for their unique needs.
- There is a direct association between out-of-home care experiences and the post-care outcomes in all aspects of young people's lives. This implies that some of the negative post-care outcomes can be minimised by providing preventative and adequate support services to young people leaving care.
- A significant number of young people leaving care appear to be caught in a vicious cycle of poverty and deficiency in their personal lives and have very little capacity to break this cycle:
... but due to the fact that I had nothing else, like I didn't get good marks at school when I was in year 7, it was a bit hard to get a job later on in life .
- Despite the adverse effects resulting from the substitute care system, some young people demonstrate considerable resilience in overcoming the odds and finding fulfilments in their lives. The resilience appears to be closely associated with the availability of formal and informal supports and mentors, strong determination and positive sense of identity, which should be promoted through all phases of the substitute care system.
- A flexible and individually tailored support service could facilitate improved and satisfying outcomes for young people leaving care; they should be listened to more and actively involved in policy planning and decision making.

CONCLUSION

Although the findings of this research have just confirmed some of the serious concerns and problems experienced by young people leaving care as highlighted by other research findings, it has also produced some new insights into the far reaching consequences of these concerns to young people themselves and to the community at large. The social exclusions experienced by care leavers not only negatively impact on their ability to make a successful transition into independence, but also have long lasting effects on their emotional and psychological well-being. A majority of care leavers in this study have expressed strong and unresolved feelings of anger and hatred towards their biological parents as well as the care system. It is clearly evident from this and other leaving care research findings that young people leaving care face ongoing and significant deficits in all major domains of their life cycles following discharge from care. These deficits result from a range of factors and disadvantages produced by their pre-care and in-care history and the quality and quantity of leaving care and post-care supports available to them.

Clearly there is a need for a more collaborative and coordinated approach with a legislative guarantee to address the social exclusions experienced by care leavers and to promote their safety and well-being. Coordination at various levels and working in partnership with all stakeholders should be integral parts of leaving care policy to ensure improved outcomes for care leavers. These principles appear to be reflected in the new Children, Youth and Families Act in Victoria which promises a mechanism to promote collaboration among families, communities, government and services (DHS 2004).

More in-depth and longitudinal research based on a larger scale sample investigating the complex and specific association between out-of-home care experiences and post-care outcomes could provide valuable insights into the planning and provision of leaving care services. It would also be beneficial to draw a comparison between young people living in metropolitan areas and those living in rural areas, as the quality and quantity of services provided could vary considerably between these two regions. ■

REFERENCES

- Australian Institute of Health and Welfare (2006) *Child Protection Australia 2004-05*, AIHW, Canberra.
- Allen, M. (2003) *Into the mainstream: Care leavers entering work, education and training*, Joseph Rowntree Foundation, York.
- Australian Law Reform Commission (1997) *Seen and heard: Priority for children in the legal process*, Human Rights and Equal Opportunity Commission, Sydney.
- Auditor General (1996) *Protecting Victoria's children*, Victorian Government, Melbourne.
- Barth, R. P. (1990) 'On their own: The experiences of youth after foster care', *Child and Adolescent Social Work Journal*, 7(5), 419-440.
- Biehal, N. Clayden, J., Stein, M. & Wade, J. (1995) *Moving on: Young people and leaving care schemes*, HMSO, London.
- Bonnice, J. (2002) *Young People Leaving Care and Housing Project*, St Luke's Youth Services, Bendigo.
- Broad, B. (2005) *Improving the health and well being of young people leaving care*, Russel House Publishing, Dorset.
- Burdekin, B. & Carter, J. (1989) *Our homeless children*, AGPS, Canberra.
- Cashmore, J. & Paxman, M. (1996) *Longitudinal Study of Wards Leaving Care*, Social Policy Research Centre, Canberra.
- Courtney, M.E. & Dworsky, A. (2005) *Midwest evaluation of the adult functioning of former foster youth: Outcomes at age 19*, Centre for Children at the University, Chicago.
- Department of Human Services (2000) *Leaving care: Options and recommendations Paper for Consultation*, DHS Child Protection and Juvenile justice Branch, Melbourne.
- Department of Human Services (2004) *Protecting children: Ten priorities for children's wellbeing and safety in Victoria: Technical options paper*, DHS Community Care Division, Victorian Government, Melbourne.
- Department of Human Services (2005) *Children Bill*, Victorian Government, Melbourne.
- Egeland, B., Carlson, E. & Sroufe, L. (1993) 'Resilience as process', *Development and Psychopathology*, 5: 517-528.
- Frost, N. & Stein, M. (1995) *Working with young people leaving care*, HMSO, London.
- Gilligan, R. (2001) *Promoting resilience*, British Agencies for Adoption and Fostering, London.
- Green, S. & Jones, A. (1999) *Improving outcomes for young people leaving care in Victoria*, Children's Welfare Association of Victoria, Melbourne.
- Hirst, C. (1989) *Forced exit*, Salvation Army, Melbourne.
- London, Z. (2004) *It's a real shock: Transitioning from care to independent living*, Mackillop Family Services Practice and Policy Unit, Melbourne.
- Mauders, D., Liddell, M., Liddell, M. & Green, S. (1999) *Young people leaving care and protection*, National Youth Affairs Research Scheme, Hobart.
- Mendes, P. (2002) 'Leaving care services in Victoria: A case study of a policy debate', *Developing Practice*, 3: 51-58.
- 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.
- Owen, L. (2000) *Pathways to interdependence and independence: The Leaving Care Initiative*, La Trobe University, Melbourne.
- Public Accounts and Estimates Committee (2001) *Report on the review of the Auditor-General's Special Report No.43 - Protecting Victoria's Children: The role of the Department of Human Services*, Parliament of Victoria, Melbourne.
- Propp, J. Ortega, D. & New Heart, F. (2003) *Independence or Interdependence: rethinking the transition from 'Ward of the Court' to adulthood*. *Families in Society*, 84(2):259-266.
- Raman, S., Inder, B. & Forbes, C. (2005) *Investing for success: The economics of supporting young people leaving care*, Centre for Excellence in Child and Family Welfare, Melbourne.
- Stein, M. & Wade, J. (2000) *Helping Care Leavers: Problems and Strategic Responses*, Department of Health, London.
- Stein, M. (2004) *What works for young people leaving care?*, Barnardos, Ilford.
- Taylor, J. (1990) *Leaving care and homelessness*, Brotherhood of St Laurence, Melbourne.