



**UNSW**  
SYDNEY

Australia's  
Global  
University

# Stories of aftercare services and support needs after leaving care:

A snapshot from the Stories of Resourcing and Resourcefulness project



December 2018

This report was prepared by the *Stories of Resourcing and Resourcefulness* team at SPRC: Jennifer Skattebol, Myra Hamilton, Cathy Thomson, Megan Blaxland and kylie valentine.

## **Acknowledgements**

This paper is based on research funded by an Australian Research Council Linkage Grant (LP150100716). The team would like to thank the research partners Uniting, NSW Department of Family and Community Services, and Mission Australia. In particular, we would like to thank Ro Evans and Tom McClean for their feedback on this report. We would also like to thank the young people who participated in the study for the generosity they showed in sharing their stories and supporting us to improve the research process. The project has been approved by the UNSW Human Research Ethics Committee (HC16426).

## **Research Team**

Jennifer Skattebol  
Myra Hamilton  
Cathy Thomson  
Megan Blaxland  
kylie valentine  
Deborah Brennan

For further information:

Myra Hamilton, [m.hamilton@unsw.edu.au](mailto:m.hamilton@unsw.edu.au)

## **Social Policy Research Centre**

UNSW Sydney NSW 2052 Australia  
T +61 2 9385 7800  
F +61 2 9385 7838  
E [sprc@unsw.edu.au](mailto:sprc@unsw.edu.au)  
W [www.sprc.unsw.edu.au](http://www.sprc.unsw.edu.au)

© UNSW Sydney 2018

The Social Policy Research Centre is based in the Faculty of Arts & Social Sciences at UNSW Sydney.

## **Suggested citation**

Skattebol, J., Hamilton, M., Thomson, C., Blaxland, M., valentine, k. (2018). *Stories of aftercare services and support needs after leaving care: A snapshot from the Stories of Resourcing and Resourcefulness project. (SPRC Report 26/18)*. Sydney: Social Policy Research Centre, UNSW Sydney.

# Contents

Executive Summary .....	3
1 Introduction .....	1
2 Social and policy context.....	2
3 The study .....	3
Method .....	3
The young people in this study.....	3
The subsample of young people who had left care .....	4
4 Findings.....	5
During care and after leaving care .....	5
Pathways to aftercare services .....	6
Experiences of aftercare services .....	10
Service and worker characteristics valued by the young people .....	21
5 Conclusions and future analysis.....	24
Next steps .....	27
References .....	28
Appendix: NSW policy for young people leaving out-of-home care.....	29
Aftercare services .....	30

# Executive Summary

Many young people who leave out-of-home care (OOHC) struggle to access the resources they require for independent living. Young people who have been in OOHC should have access to the kinds of supports available to young people who have not been in care and should have the same life opportunities as their peers. Understanding how to better resource these young people is essential to improving their wellbeing. Drawing on biographical narrative interviews with 22 young people, this snapshot presents preliminary findings on young people's experiences of accessing services after leaving OOHC. In particular, it has a focus on the pathways young people take before accessing aftercare services, and their experience of using aftercare services.<sup>1</sup>

The findings in this snapshot are part of a larger three-year study conducted by the Social Policy Research Centre, UNSW Sydney in partnership with Uniting, NSW Family & Community Services (FACS) and Mission Australia. This study aims to provide new evidence on the way young people with complex service needs use formal and informal resources over time, and the 22 young people described in this paper, all of whom had left OOHC, are part of a larger sample of 44 young people with complex service needs interviewed for the study. Biographical narrative interviews were used to elicit rich and complex data about the significant events in the young people's lives and how they made sense of these events through a biographical 'story'.

The stories revealed that, although the young people had been in contact with multiple services throughout their childhood and young adulthood, this was commonly fragmented and focused on crises. This pattern continued after they left care. At the time they left care, few knew of aftercare services and none reported a managed transition from OOHC to aftercare. Some had desires for reconnecting with family or seeking 'time out' from the service system they had found to be fragmented or frustrating. However, all reported that earlier support from aftercare services would have alleviated many of the difficulties they faced when first leaving care.

By the time they engaged with aftercare services, most of the young people in the study had been living independently (while facing considerable resource shortfalls) for some time. They were skilled in navigating resource systems in highly changing and challenging circumstances, but most identified gaps in their everyday living skills that they required support with. In particular, while the participants had become skilled in negotiating resource shortfalls in the short term, they still faced considerable difficulties securing the resources they required to build stability and

---

<sup>1</sup> Specialist aftercare services provide support and advice to care leavers aged between 15 and 25 in areas such as living skills, access to education and employment, health and housing services.

security in the longer term, such as permanent or secure housing, and ongoing employment. Many had struggled with periods of homelessness. As a consequence, housing was one of the most common reasons young people first engaged with aftercare services, and they particularly valued help securing longer-term housing, and building stable pathways through post-secondary school education and training into employment. Several of the young people's stories made clear that they needed to maintain connections to aftercare services even when they were doing well, as newly found securities were often precarious or short-lived.

Several key service and worker characteristics were identified by the young people as providing support previously missing in their transition to independent living.

These were:

- Flexible, wrap around or holistic service provision (i.e. flexible casework) - Flexible services that provide wrap around support-built confidence in the young people that they were not alone and that they could be confident of help when they needed it.
- Care and compassion - Many of the young people viewed the aftercare workers as someone they 'could count on', which had been lacking in their lives.
- Choice – The young people valued being given options by workers and having choice and control over the decisions that affected their lives.
- Advocacy – The young people found the capacity of after aftercare workers to advocate on their behalf for their particular needs across a range of services to be highly important and valuable.

Interviews with these young people suggest that the service system for young care leavers, including the Department of Family and Community Services and NGO OOHC service providers, could better support young people by:

1. Investing in positive relationship-building between children and young people in OOHC and the OOHC service system.
2. Improving the management of young people's transitions out of OOHC, including more comprehensive planning, education and engagement around leaving care plans.
3. Providing more structured support for young people when they are accessing and reviewing their OOHC records (this could be provided by FACS, or aftercare services, or both)

The interviews also suggest changes to the ways in which aftercare services are provided, many of which would require additional resources for aftercare service providers. These include building on what aftercare services are already doing by:

4. Providing more extensive and structured support options for young people and their families in building and maintaining relationships.
5. Taking a more structured approach to staying in contact with young people during times when they are doing well so that they can return to aftercare services if needed.
6. Better linking with employment services so offering trusted assistance for young people seeking and entering employment.
7. Developing structured interventions to build young people's non-cognitive skills (such as problem-solving or autonomy) that could be transferred into education and employment.

# 1 Introduction

Many young people with ‘complex needs’ struggle to access adequate resources necessary for their well-being. Understanding how to better resource these young people is essential to improve their wellbeing and other outcomes. Drawing on the life stories of young people who rely on secondary and tertiary services for their basic needs, this project aims to provide new evidence on the way these young people understand, approach, and use formal and informal resources in the context of changing circumstances and biographical trajectories over time.

Biographical narrative interviews are used in the study to elicit rich and complex data about the significant events in the young people’s lives and how they make sense of these events through a biographical ‘story’. This three-year study is conducted by the Social Policy Research Centre, UNSW Sydney in partnership with Uniting, NSW Family & Community Services (FACS) and Mission Australia.

This snapshot outlines preliminary findings on these young people’s experiences of accessing services after leaving out-of-home care. The next section provides a short context-setting summary of the policy settings that have an impact on those in the sample that have been in out-of-home care. This is followed by a brief overview of the sample from the broader study and the subsample of participants who had been in out-of-home-care, including their housing and schooling characteristics. After this, we examine the array of circumstances faced by participants prior to, and after leaving care until they accessed aftercare services. This leads to an account of the key themes in their stories starting with their pathways to aftercare services. Then we turn to their experiences with aftercare services and how this interacts with their quests to secure the education, health and social resources they require. The final key theme we explore is the service and worker characteristics that they found useful and effective once they connected with these services. We conclude with some implications for practice and advocacy work.

We present data from the interviews in two different ways – through quotes that illustrate the issue and through short case studies. These case studies enable us to elaborate on how an issue has unfolded over time. The question of how resources and resource-seeking patterns play out over time is an important one, and our biographical data allows us to examine issues across each young person’s told story.

## 2 Social and policy context

For most young people, when they leave home, their families support them with the transition to living as an independent adult. This might involve help learning to drive, securing a place to live and furnishing it, finding work or applying for tertiary education. When young people leave out-of-home care, they will not always have this kind of family support. Yet the Minister, under Section 165 of the Children and Young Persons (Care and Protection) Act 1998, is required to “arrange or provide assistance to eligible care leavers until they reach 25 years of age where such assistance is considered necessary having regard to their safety, welfare and well-being” (FaCS, 2017:1). For this reason, aftercare services have been established to provide the support to which young people leaving care are entitled and which most other young people receive by matter of course. For details on the funding and delivery of aftercare services, see page 29.

Future changes to the way that society cares for vulnerable children, both prior to and during out-of-home-care (OOHC), could change the context in which aftercare services are provided. Change to the OOHC service system is underway in NSW where the *Their Futures Matter* initiative is seeking to fundamentally alter the way children, young people and their families are supported, to address risks and keep families together, and to better look after children who are placed in statutory care. The national *Home Stretch* campaign seeks to allow young people who do reach 18 in care to stay in OOHC until the age of 21 (<http://thehomestretch.org.au>). This would bring their experience closer to that of most other Australian young people, among whom, in 2012, two-thirds were still living with parents at 21 years (NCVER, 2014) and many that were living independently from their parents would have been receiving important parental support. Ultimately, these reforms aims for improved stable and secure home environments, whether with birth families, out-of-home care placements, or other permanent options such as guardianship or adoption, which might alleviate the need for aftercare services when young people transition to adulthood.

This report sets out to explore the experiences of young people who have been through the OOHC system as it currently is, and their journeys of support-seeking after leaving care.



## 3 The study

### Method

Biographical narrative interviews were conducted with forty-four young people aged between 12 to 26 years. There were two waves of data collection, planned at two points in time, approximately one year apart. The interviews were conducted in six geographical areas in NSW (see Table 1).

**Table 1 Participants by area in Wave 1**

Locations	No.
Inner metropolitan	10
Outer metropolitan	13
Coastal regional centre	7
Inner regional centres (2 sites)	6
Coastal town	8

At the first interview in Wave 1, participants were asked to tell us about the times they had needed support, how they had gone about accessing support, and what had happened. One week later, researchers interviewed the participants again, this time a shorter, more structured interview to fill gaps and ask more details about service use. Wave 2 interviews were conducted approximately 12-18 months later.

### The young people in this study

The young people in this study spanned a continuum of service use: Some were still connected with their families and some were not, some were engaged mainly in universal services (such as mainstream school and health services) with some secondary service use (including mental health services, youth services or early intervention programs), whereas others had for some time been engaged in tertiary services such as juvenile justice, intensive drug and alcohol rehabilitation, and out-of-home care.

While there were 44 participants in Wave 1 biographical narrative interviews, 59% (26/44) returned for a follow up a week later, where interviewers clarified issues and checked in with the young person about the interview experience and the need for warm referrals. Twenty-one participants returned for a Wave 2 interview 12 months later.

## The subsample of young people who had left care

Twenty-two young people in the study had been in various types of OOHC, had left care, and were using aftercare or other services. Of these, 12 were young women and 10 were young men. Most (20) were born in Australia and nine were Aboriginal. At the time of the first interview, half of the sample were living in public or community housing, occasionally their own leases (transitional housing) and occasionally under the lease of a family member (see Table 2). Housing arrangements that involved living with family were frequently short lived – in some stories young people's exits from family houses were tumultuous but in others coming and going was a smooth process.

**Table 2 Participants by housing status**

Locations	No.
Public, community, transitional housing	11
Refuge	1
Homeless shelter	2
Short term housing	2
Private rental	3
Unknown	3

At the time of the first interview, four were attending school and 18 had left school. At least 10 of the participants had been to an alternative school or school for specific purposes (SSP - behaviour and learning difficulty-focused school). At least half of the subsample had very disrupted schooling histories characterised by frequent changes of school from their primary school years.

As about half of the 22 young people in this subsample were recruited through aftercare services, it is reasonable to assume they had at least partly positive experiences of aftercare because they remained connected to those services. The experiences of the young people may not be representative of all people using aftercare services. Nonetheless, the interviewers did not seek information about aftercare services explicitly and framed the interview with distancing statements about the value of biographical narratives for thinking about how services might be delivered differently and better, thus seeking positive and negative service experiences. While the young people in this study were diverse in terms of their housing status, service histories, and family networks, there are groups of young people who have been in OOHC that are not captured here, such as those currently living in juvenile justice facilities and drug and alcohol rehabilitation facilities, or those who were not in contact with any services. In this paper, participants' real names have been replaced with pseudonyms to protect their anonymity.

## 4 Findings

### During care and after leaving care

High mobility was a shared characteristic of those in the sample. Their families of origin had been mobile when they were young children, and their trajectories typically involved multiple family arrangements and constellations over time. Moving into the care of statutory child protection involved further mobility and instability, including multiple short-term foster or kinship placements, temporary accommodation and refuges, or some combination of both. For the young people in this study, with one or two exceptions, mobility meant schooling was interrupted and difficult.

Although the young people were in contact with multiple services throughout their childhood and young adulthood, this was often fragmented and crisis-focused. Young people consistently reported that bureaucratic processes seemed to place unnecessary obstacles in their path, impede access to resources, consume large amounts of time and frustrate their attempts to 'get on with it'. Without holistic support to navigate the system, they had become disillusioned with the options available, moving in and out of support systems.

As a consequence, some had delayed seeking help, or had not sought help at all:

*So yeah, it took me a whole year and a half to ask for help (Tagan, 21)*

Some had consciously decided to 'check out' of formal service systems for a while:

*I did - I have had [contact with aftercare services] before, but just in the mind frame I was in, I didn't want help with anything sort of thing... I had heaps of friends at that stage where I was able to go stay here, there, everywhere... (Annie, 23)*

Their disillusionment was exacerbated by the fact that few were cognisant at the time they left care of the possible development of their leaving care plan. Some did not receive leaving care plans, some did not know about their leaving care plans for some years, and others knew that a leaving care plan had been developed but had been let down by poorly co-ordinated processes.

*They're supposed to do a leaving care plan. None of that was organised. So, I was basically just pushed out the door. I went and lived with my mum, that broke down. I ended up on the street for a bit and I went and stayed at my brother's and he got kicked out of his place. I ended up on the street again and I ended up going back down this way because I had friends down here and I had some help from [support worker] (Ricky, 19)*

The insecure and fragmented nature of their care, housing and schooling environments dovetailed with an aspiration to be out of 'the system' and 'independent'. This led most to seek an exit to their OOHC arrangements before turning 18 years.

The young people described the way that they navigated their 'resource landscapes', or the resources that were around them and were available to them to meet their needs. In their teenage years, peer groups exerted a strong influence and were central to the way they perceived their resource landscapes. It was common for young people in the sample to have reached out to peers and other informal networks such as extended family for material resources such as temporary accommodation and for social and emotional resources. Connection and reconnection with their immediate families was an ongoing desire for almost all of the participants, and they navigated and negotiated these relationships according to family dynamics and living arrangements, their desire for stronger ties, and their needs for material resources over time. Several reconnected with their immediate families for periods of time and some moved back in with a parent or sibling. However, all those that attempted reconnection found residing with immediate family very difficult.

Hence, participants brought highly fragmented engagements with both universal (i.e. school), secondary (i.e. mental health), and tertiary (i.e. juvenile justice) services, and strongly held views on the usefulness and efficacy of formal services – including care and protection services – to their initial encounters with aftercare services. They had been operating highly independently in the world for some time and navigating resource systems in highly changing and challenging circumstances, with little or no support from family. They had networks of peers and family that they drew on at various times to fill gaps in service systems, though these seldom provided stability. It was these complex histories of living independently and accessing, attempting to access, and being let down by services, alongside their networks of informal support, that formed the young people's expectations of aftercare services when they first approached them.

## **Pathways to aftercare services**

The participants' stories suggest an absence of a clear pathway into aftercare services. No participants reported a managed transition process from leaving care to accessing aftercare services. This gap in knowledge about the system is both a communication and a 'readiness' issue. For some, the delay in access to aftercare services was because they did not know about the services and how they might help them. For others, leaving care was a period characterised by a desire to 'check out' of the care and protection system, after years of frustration or disappointment, and invest in informal relationships. All had held a strong desire for independent living on leaving care, despite the limited resources they had access to and the difficulties they confronted when they did take this pathway.

During periods when they were not connected with services, participants sought support from informal networks and struggled through very precarious housing. A number of participants formed committed relationships to establish families or partnerships of their own but most of these relationships broke down and some ended in violence. A small number found stable housing and work. These periods of disconnection from services were often punctuated by crises and temporary reengagement with crisis services.

In recounting their service histories, participants consistently reported wishing they had known about and been supported by aftercare services sooner. They reported that this period of precariousness after leaving care could have been much less challenging for them had they accessed aftercare services immediately after leaving care.

Most participants could not remember or name the exact pathway to aftercare services.

*I don't even know how I got involved. I don't know (Dante, 18)*

Some were referred well after leaving OOHC at a time of crisis such as homelessness or domestic violence. Others 'discovered' aftercare services through happenstance - through casual conversations with friends or others in their social networks.

Bree's story provides an example of extended contact with services and professionals before receiving a long overdue referral to an aftercare service. We present her biography in full to illustrate the complex factors that shape her resource landscape after she leaves care and to encourage the reader to see the numerous points where aftercare referrals could have been made. The story has been written by the member of the research team who interviewed Bree (see Story 1 in box).

## **Story 1: Bree**

Bree was 23 when I interviewed her in Wave 1. She was engaged, talkative and had a baby bump. She described herself as 'a DoCS kid', as she was removed from her parent's care when she was 9. She said that DoCS was unable to find her a placement – 'some carers don't want like older kids and stuff' – so she had spent her time from the ages of 9-15 years moving between refuges and having little support from other services. As a result, she had a very unstable schooling history – she had been to 16 schools before she left school in Year 9. As the interview progressed, Bree became increasingly self-conscious about her ability to communicate. She apologised periodically for not being able to explain things properly even though I understood her very clearly. It seemed to me as though she had lost confidence in her ability to communicate through negative messages from people in her past.

She became involved with a boy and had her first child at 19. During this time, she began to visit a youth service that helped her to manage her emotions and to navigate TAFE pathways. She had another child and became pregnant with a third. Her relationship was abusive and they separated, but not before her children were removed. As the interview progressed I realised the number and magnitude of extremely traumatic events in her life and how little support she had received in dealing with them.

At the time of the interview Bree was homeless and dealing with depression and anxiety and the grief associated with losing her children. She was in the midst of police proceedings and a court case, had ceased her TAFE studies and was struggling with her basic literacy and numeracy. Her third pregnancy was progressing through this difficult time.

She was working to have her children restored but this process was very difficult. She described it as being asked to jump through hoops and expected to do 'all this paperwork' that she couldn't read, and without an understanding of the process. She was doing each task and meeting requirements as they were put to her, but with no support on how to navigate the system.

She had a strong sense that it was DoCS' responsibility to support her in this situation. This was because she was a 'DoCS kid' herself – and they had removed her children and they should help her to understand and carry out what she was required to do to get them back. She approached the children's case worker for help, but did not receive the help she needed –

*Yeah, they just call me and it's like, 'I'm moving your kids and here's all this paperwork, you've got to go to court'... and then they told me that I had to do all these courses to get them back. I did all those courses and everything and because of me being homeless that's the only reason why I couldn't get my kids... They could have at least assist me in trying to write a letter to Housing or something ... Like I went and asked them, 'I need help with counselling and I need help to get into the parenting courses and stuff so I can have the chances of getting my kids back, how do I go about it?' And they go, 'Oh yeah, I'll get back to you and stuff.' And they never got back to me...*

Finally, a friend suggested that Bree might be able to find help at a youth centre, which referred her to an aftercare service.

*...and so that's why I had to come to these organisations and ask them for help to get my kids back and stuff, what do I need to do and that? Because... I don't understand like how they've run like with those things they want me to do... Because I was doing it by myself I didn't have family support and that, so I had to get these social workers to come so they could explain to me.*

Only at this point, with things in crisis at age 23, after experiencing difficult family relationships, homelessness, poor school engagement, limited engagement with employment, mental health issues, young parenthood, and domestic violence, all since the age of 15, did Bree begin to access the support she needed through aftercare services. Bree would have benefited greatly from aftercare support much sooner.

When the participants eventually accessed aftercare services, their histories of resource use and resource shortfalls created both challenges and opportunities. Periods of independent living often resulted in mixed skill sets. Most participants identified gaps in their everyday living skills such as budgeting and cooking and were focused on building up these skills.

They also brought strong skills in living independently. They had been able to tenaciously navigate resource systems on their own, demonstrate 'street smarts' in their communities, and resource others, including supporting and caring for family members and friends. These skills involve important 'non-cognitive' skills which form the foundations of everyday living skills and, as we discuss later, can be recognised, cultivated, and made transferrable into employment skills.

In both respects, aftercare services are aptly poised to utilise these skills that the young people already possessed while supporting them to address skill gaps.

## Experiences of aftercare services

Participants in the study who had used aftercare services spoke extremely highly of them. Through these services most were able to move from a focus on meeting the most basic of needs in the short term towards longer-term planning and goal setting. Once they commenced using aftercare services, they were assisted to access a network of services that were previously unknown to them or out of reach through bureaucratic barriers. They accessed a range of resources through aftercare services, including support with: finding accommodation; acquiring living skills; financial assistance; accessing education and training; accessing health services e.g. counselling; legal support; and a range of other supports and referrals as required.

The young people's histories of accessing formal and informal resources shaped the nature of the support they required, the benefits of the support they received, and the challenges they continued to face in obtaining the support they needed. These aspects thread through a discussion of the practical challenges they faced below.

### Housing

The young people had long histories of insecure housing and homelessness. This was a foundational need dominating the resource landscapes of many of the young people and was one of the most common factors that saw them referred (formally or informally) to aftercare services.

Aftercare services played a dual role for young people seeking accommodation. The first was supporting them to obtain short-term accommodation – from a bed for the night to temporary or transitional housing. While young people valued the support provided by aftercare services in obtaining such accommodation, most had already acquired a considerable amount of 'resource system capital' in navigating short term accommodation, that is, the know-how to access the short-term housing that is available.

However, they possessed little resource system capital in attaining secure and stable housing and this is an area where they reported the support of aftercare services to be vital. The young people found the public housing bureaucracy opaque, impenetrable, and unpredictable.

*Housing commission is – sorry to say, but they're shit. They don't care much about the young youths to be honest... Yes, it's been hard to communicate with them and stuff like that, that's why I came to [name of service] and got [service's] help (Bree, 23)*

They valued guidance from aftercare workers that supported them to understand bureaucratic processes, including the steps required to apply for housing, the way to fill out the required forms, how to approach meetings and interviews with the



Department, actions to avoid that could mean compromising their case for a house, and the expectations about behaviour and activities that enabled them to retain their house. Support with understanding and navigating the private rental market was also valued, as this was also a system that seemed unobtainable to many.

*I'm trying to find a house at this minute. I've been applying for houses and that... Yeah, it's just I can't find a house because I don't have a job... I've had a look at private rentals, it's just they're looking for someone that's working full-time and stuff (Kiwi, 16)*

Access to stable housing and ongoing support to meet the demands of being a tenant were steps towards a solid foundation for building decent employment and healthy relationships.

### **Everyday living skills**

Typically, young people connected to family receive 'real-world' and mainstream opportunities to acquire both everyday living skills and resources needed for longer-term security. By everyday living skills we are referring to basic hygiene, health, organisational, domestic, financial and relationship and communication skills. They receive a school education delivered by educational experts in mainstream institutions, work knowledge and experience through family modelling, physical health monitoring and support, and recreational activities. While in education or transitioning into work they receive from their families material resources such as food, electricity, internet, and domestic services. Family provides young people with ongoing and sustained opportunities to acquire everyday living skills. This typically occurs through years of modelling and incrementally increasing responsibilities. Living skills are complex and interrelated – one requires knowledge of nutrition/cooking to prepare a shopping list and budgeting skills to have the money for food.

Most participants in this study – including those with stable OOHC placements – reported limited opportunities to learn everyday living skills. They were aware of their shortfalls in these skills and were keen to acquire them.

In addition, families provide love and emotional support through difficult periods such as starting a new school or a first job. Unconditional family support allows young people to test the boundaries in intimate relationships, learn how to navigate unfamiliar situations with safety, and to make everyday living mistakes without the dire consequences (like eviction) that were faced by the participants in this study.

This family support operates as a safety net that family-connected young people can rely on when they take risks with shared housing and budgeting. This safety net is both practical and emotional. The burden of being independent without this safety net is well articulated by Annie:

*When I've got nowhere to stay, I've got nowhere to stay. Like they took us off our families and then chucked us back out there, they should have somewhere stable for us to go. (Annie, 21)*

Annie and other young people like her were frustrated by their own struggles with everyday living tasks. They railed against having to learn skills other young people appeared to have acquired seamlessly and without any crisis.

At 18, Dante was housed in a homelessness shelter for men when he was interviewed. He noted:

*I haven't had a pretty good life, I've just been going from house to house all my life (Dante, 18)*

His continuous movement of both residence and caregiving environment was a significant barrier for learning the practical skills of independent living such as self-care, cooking, cleaning and budgeting. While many of this group had eventually found somewhat secure (often transitional) housing, they continued to find the daily practices of household chores and budget planning and management overwhelming:

*...it's going from another place to your own house and still the responsibilities of cleaning everything and having everything right. That's still a massive struggle (Tagan, 21)*

The participants foregrounded a sense of loss that they did not have the same back-up system in place as their family-connected counterparts.

As a consequence, the support provided by aftercare services in building independent living skills was highly valued.

*[I need] Just help with like life and stuff: life skills and that stuff. Yeah, for like looking to help yourself during - like after you leave and stuff (Dante, 18)*

*Also, I got my funding to have support come in and show me how to cook, show me how to clean, more activities so to get me out more (Ruby, 21)*

Aftercare services also provided the young people with opportunities to make mistakes. This included understanding when they failed to turn up to appointments, support when they made mistakes that led to them losing their housing, and financial support when they made mistakes with their budgeting. This generated a feeling of having a 'safety net' required by any young person transitioning to independent living and learning about budgeting and managing a home. This safety net, alongside the longevity of their relationship with the aftercare service and trusted relationships with the aftercare workers (discussed below), helped them to build a sense of 'felt security' that was highly valuable. OOH research has identified emotional measures that are useful for young people who have

experienced significant family upheaval. The notion of 'felt security' is one such measure that relates to a young person's feelings of belonging, emotional security and social attachment. There is research to suggest that care leavers with high levels of felt security can have better post-care outcomes (Cashmore & Paxman, 2006; Muir and Hand, 2018)

Central to the effectiveness of aftercare services in supporting the young people to build everyday living skills was the capacity for aftercare services to provide this support *over time*. This is because for these young people, like young people who are connected to family, skills are acquired through trial and error, putting them into practice, succeeding and making mistakes, over time. This finding highlights the benefit of better engagement with young people when they are younger, so they can start building a sense of felt security earlier in life rather than at a time when they are trying to establish themselves independently.

Several of the young people's stories made clear that this safety net should not fall away when they were doing well. Even when they formed committed relationships, obtained ongoing secure work, or found stable housing, without a strong family safety net, their securities were still somewhat precarious. Jayden's story (Story 2, below) provides an example of this. His story is written by the team member who interviewed him.

### **Story 2: Jayden**

Jayden was an articulate, capable and confident young person who was warm and sensitive in the interview. He provided an extremely detailed and generous account of his life to me. He and his siblings were raised by his mother for most of their childhood – moving around a lot. But his mother suffered mental health problems and while she worked hard to provide the children with a loving secure home, he explained that she struggled with her mental health and on three occasions had breakdowns and they were removed by FACS from her care. Each time Jayden and his siblings were removed from his mother's care he lived with his uncle until his mother had recovered and came to get them.

His relationships with his immediate and extended family were fraught and sometimes abusive. It was clear to me that he devoted himself to caring for and protecting his siblings and mother. Moving a lot meant that Jayden had an interrupted experience of school. Though he was confident in his capacities and abilities as a student, he acknowledged that he had difficulty managing his anger and this got him into trouble at school and in the community.

He started using drugs regularly. This would eventually get him into trouble – he was arrested for break and entering when he was 18, for which he got community service.

Work was a place of respite for Jayden. He was very committed to paid work and derived great satisfaction from it. When he turned 15 he keenly sought out a job and got a hospitality job that he took pride in mastering. In recognition of his skills he was promoted quickly by his employer and spent several years there. While he was still taking drugs and ‘hanging out with the wrong crowd’, this job gave him purpose and satisfaction. But when he asked his boss for wages commensurate with the work he was doing and his boss refused, he resigned. While things could still be turbulent in his personal life, Jayden went on to devote himself to his work which would eventually bring him stability and comfort. He worked his way through an apprenticeship and got a high paying job in a trade. I could tell that being highly valued as an employee was extremely important to him. He clearly derived a lot of pride from being self-sufficient and soon set himself up in a rental property.

He met a girlfriend and fell in love. He felt at that time as though he ‘had made it’ – working in a well-paid job, well respected by his colleagues, happy in a relationship and in a lovely house. He enjoyed this period for several years. However, things unravelled for him when his relationship broke down and his partner moved away. He gave up his house and his job to follow her in the hope of a reconciliation but when this did not work out he found himself in a new city, homeless, unemployed, and struggling with his mental health. He was 25.

Jayden found it extremely difficult to get services at this time in his life. He found himself in a position in which he could find work easily but not secure ongoing work, which is what he needed to obtain a lease on a house. At the same time, he felt that, because he was working intermittently, some services thought he was not ‘needy enough’ to provide him with temporary accommodation long enough for him to save for a bond and set himself up with the secure employment he needed to re-enter the private housing market. His treatment by housing services and the difficulty he faced finding temporary housing compounded the difficulties he was having with his mental health. At the time of the interview he was sleeping in his car and did not know what was in store for him in the near future.

Adversity can strike at any time – the breakdown of a relationship, the loss of a job, the loss of a house – and when it does, if a safety net is not available, then it did not take much for the young people in our study to be once again struggling to meet their basic needs. These young people required ongoing support, beyond an arbitrary cut off age, as do young people living in a ‘typical family’. Hence, even at age 25 and beyond, young people without a family safety net require the support that is available to their family-connected counterparts. Jayden’s story above is an example of how, even after some years of successful paid employment and renting in the private rental market, things can become very challenging very quickly for a young person without family to rely on.

### **Engagement with education and training**

The participants said that education and training was an important asset in the pursuit of their future goals. Most of the young people had experienced interrupted schooling and a lack of support from mainstream education and had disengaged from learning quite early. Some felt they were sufficiently educated to get a job and were focussed on gaining employment. Others felt they needed more education and training, and some were resolving their immediate safety needs and felt that work and training would follow.

Leaving education early had a significant impact on the resources the young people had available to draw on to realise their goals of independent living. Failures in mainstream systems to deliver educational resources to these young people had significant impacts on their technical and cognitive assets. Many reported that they had low levels of literacy and numeracy and this affected their interactions and relationships with services, employers, and others.

After meeting young people’s most pressing and immediate needs, such as securing stable, although often transitional, housing and resolving financial problems, aftercare services also provided guidance and help with information and access to post-secondary school education and training courses. As Sally describes below:

*He got me into [administration], certificate II and then because I moved houses, it was just too much of a move to travel in and out. So now he’s looking at other courses for aged care or community services (Sally, 22)*

Where young people reported that aftercare services had supported them to engage in education and training, for the most part they enjoyed that training. The acquisition of skills and, for those who completed them, the commitment to completing a qualification gave them confidence and a great sense of achievement.

However, while aftercare services had supported some of the young people to connect to education and training, there was little support to convert the skills or qualifications obtained into employment. For most participants, support for employment was something they received from their employment services provider completely independently from their engagement with aftercare services.

However, support with building pathways from training into employment, and with seeking and maintaining employment, is a critical part of aftercare services' goal of supporting young people to live independently. Employment will help the young people build everyday living skills, achieve financial security and maintain housing stability.

Most participants needed support with understanding, managing and meeting workplace expectations. While this is the role of a postplacement officer at an employment services provider, young people did not describe their needs being met by people in these roles, in part because they needed their expectations and skills to be mediated by a trusted person. Written by the team member who interviewed him, Dave's story is one such example. Dave had built trusted and valued relationships with his aftercare workers, but while this support and mentorship helped him to sustain his housing, he did not have the support he required to sustain his job. This support needed to be on-going because he had difficulty managing his emotions in everyday interactions.

### **Story 3: Dave**

In my interview with softly-spoken Dave, he effectively conveyed a sense of becoming independent through his own grit while being sidelined and treated as unimportant by many people in his life. He warmed to me slowly, becoming more animated when I reacted emotionally to injustices he glossed over casually. By his own admission, he did not like to talk in groups but did not mind speaking in one-on-one situations.

He was placed in foster care from the age of 3 with siblings. While the home was stable, it did not provide him with a safe environment where he could build his relational competencies. He told me many stories where he did not understand adults' behaviour towards him and felt people underestimated him. He was subject to very harsh discipline and when he finally realised this was not typical for children, he had no idea why it had happened. He carried a strong sense of not being wanted or secure from this event.

By the age of 11, his older sibling had 'scarpered' and lost contact with Dave. At this time, Dave moved rapidly through numerous foster placements.

Dave was identified as a behaviour problem at school. He acknowledged he had anger management problems. He then spiralled through behaviour schools, refuges and juvenile justice settings.

He struggled with relationships and expectations. He had an ex-girlfriend who had also been in the foster care system. Dave had been unable to read her feelings, manage demands and discern the truth of situations they found themselves in. The relationship was volatile, and he was violent towards her. He was placed in a lock up facility. While he hated being locked up, he had a memorable successful experience of school in this facility and felt for the first time he was intelligent and competent. On exit from lock up, he was put in contact with an aftercare service which helped him find transitional accommodation and a job. He managed to hold onto his flat but had walked off the job because he felt the work conditions were unreasonable.

*But I couldn't deal with it anyway. I couldn't do it with someone bossing me around. Like when the actual boss tried to boss me around, I got angry about it*

Dave found that when people treated him in ways that were similar to his childhood experiences, he could not stay on track with the goals he had set himself. Dave's goals were to go to TAFE, get a qualification and a stable job. While Dave had achieved some of the milestones of independence, he continually struggled to understand relationship and work expectations. He was most receptive to information that altered his views of the world when he received guidance from a trusted person. When he came into contact with aftercare services, he established a trusting relationship with an aftercare worker. Sustained support from a trusted person was important to him. He wanted to implement some of the skills he had learnt to deal with anger and confusion, develop realistic expectations of himself, of other people and of activities but found it hard to recalibrate his expectations and goals. With guidance, he could potentially attain his aspirations.

Providing support for building employment pathways and finding and sustaining work is therefore intimately connected to the goals, objectives and activities of aftercare services and could have been more clearly integrated into the support packages provided to the young people. The support provided by the aftercare services could also have been integrated with the support provided by employment services providers.

*I've probably been into about five different network providers now, still not one of them have found me a job (Tagan, 21).*

These service failures have significant impact on young people attached to aftercare services as many have low confidence in support agencies in the first place.

### **Activating or transferring non-cognitive skills**

The research literature classifies non-cognitive skills into a range of types, each with its own conceptual underpinnings and measurement tools, for example, life skills, self-discipline, self-esteem, social competence; autonomy; temperament; mindfulness; perseverance; problem-solving; and resilience (Benard, 1993; Masten, 2001). Non-technical and non-cognitive skills are recognised as stronger indicators of positive long-term outcomes than cognitive or content-related skills (Duckworth and Seligman 2005).

The Australian Government recognises the pre-requisite skills needed for full economic and civic participation through various skills frameworks. The Australian Core Skills Framework<sup>2</sup> recognises the central importance of learning, reading, writing, oral communication and numeracy. These skills are considered essential for physical, social and economic wellbeing of individuals, workplace productivity and safety, community interaction and capacity. The Core Skills for Work Developmental Framework also describes a set of non-technical skills, knowledge and understandings that underpin successful participation in work. These skills are often referred to as employability or generic skills. They include skills such as problem solving, collaboration, self-management, communication and information technology skills.

While their educational resources were limited, most young people in the study had highly developed non-cognitive skills in particular areas, but not necessarily across all. As noted earlier, many possessed 'street smart' living skills. They were able to find a bed for the night, read dangerous situations, live with others, deal with change, build informal networks of support, and overcome crises. These are all skills that involve valued soft or non-cognitive skills and have the potential to be converted into the 'packages of soft skills' that are valued in education and employment as well as in relationship-building and maintenance, starting families and maintaining a home.

Kiwi, for example, was a young man who had grown up in a community reliant on drug trading for income. At the age of 16, Kiwi avoided custody by moving to a new area where his social networks were not involved in drugs-based economies. In this community he slept rough at different times but had been able to organise his time to meet the requirements that kept him out of custody.

*I was just like I don't plan on doing drugs anymore because look where it gets me... I was meant to go to the [rehab service name] ... [but] I kept*

---

<sup>2</sup> <https://www.education.gov.au/australian-core-skills-framework>



*getting drug tested [at service name] and it kept coming back clean. They just, they suspended my supervision... Because I went to community service on time every time. Did my year there (Kiwi, 16)*

By passing consecutive drug tests and attending every community service appointment, Kiwi successfully had his supervision suspended and avoided custody. These challenges faced by Kiwi far exceed those faced by most young people and are a testimony to his non-cognitive skills. The perseverance he demonstrated was supported by a growing sense of self-efficacy. Kiwi's accomplishment of avoiding custody was embedded in both tenacity and in his capacity to get along with people. He knew a few people in the town he relocated to in order 'to get away from the drugs'. He prided himself on his capacity to get along with people and exhibited strong social skills in the interview situation. His sleeping rough was a component of this capacity to get along with people. He did not outstay his welcome on his mates' couches and moved on whenever there were tensions in the houses. This meant he could return when needed. This reading of social dynamics is an important interpersonal skill and the self-regulation demonstrated by Kiwi through these moves is a significant personal resource.

Other young people in the study demonstrated similar levels of tenacity and perseverance.

*I just dealt with it by myself, I'm pretty strong, I like to deal with things by myself and that's what keeps me very strong, that I can – whatever comes to try and push me down I just – I might be down for a couple of days or a couple of weeks but then I build back up again (Ruby, 21)*

*But then I was actually learning from my mistakes (Fern, 23)*

It is important to note, however, that young people who reach aftercare services have often experienced trauma and have typically been provided with few opportunities to consolidate soft skills like emotional self-management. In this respect, they may need ongoing professional support.

### **Mental health services and on-going emotional support**

As the young people told us their stories, they recounted complex histories of trauma and experiences of depression, anxiety and mental illness. Mental health services were critical to them prior to and during the aftercare experience. These services supported them to better understand and manage their mental health. They felt that this support was critical to the achievement of other goals and pursuits, such as study, finding work, securing housing, or having their children restored to their custody.

Several participants spoke of an emotional watershed that occurred when they first accessed aftercare services and were able to address some of the resource

shortfalls they had faced for many years. Receiving ongoing supports in an emotionally-caring setting opened the emotional space for them to consider how badly they had been let down by service systems in the past.

This sense of injustice was compounded for the few who recounted accessing their personal records and files. Those who had viewed their case file records found it an unexpectedly confronting and difficult process they undertook with little emotional support.

*...yeah and just recently I got all my files from DOCS and all that. Yeah, it gives you a lot of mixed emotions because a lot of it has a lot of what you went through, through care and who you were with and what happened (Ricky, 19)*

The scale of system failures was shocking to them and this dovetailed with the language in the reports used to describe their experiences and circumstances. They felt the files showed that case workers and sometimes foster families were unforgiving about their mistakes and lacking in compassion. These experiences of reading their files appeared to undermine positive narratives of self that they had built up.

Several young people had additional support needs arise because they did not receive the supports delivered by aftercare services in a timely way. If they had had access to the emotional and material support earlier, they may well have avoided compounding traumatic events.

Aftercare services supported several of participants to address unresolved issues such as pursuing legal proceedings for abuse or assault. Again, these participants suggested that the work in addressing these unresolved issues involved managing the rise of old traumas and they were grateful for the ongoing relationships they had with aftercare workers as they managed these emotions.

## **Reconciling with family**

A constant theme in the interviews with the young people in OOHC was a desire to reconnect with their birth families, especially their mothers. So strong was the bond these young people felt towards their families, despite feelings of disappointment and abandonment and cycling through a series of short-term reconciliations and further breakdowns, the longing to sustain relationships with their birth families remained. This finding aligns with other OOHC research which emphasises the importance of connections with birth families for children and young people in OOHC (Fernandez, 2007; Collins et al. 2008). For example, one young person, who lived in a safe and supportive foster care placement for several years, declined an offer to move with his foster carers when they moved interstate. His reason for doing this was that it was too far away from his birth mother whom he was keen to reconcile with even though his numerous attempts to do so had been largely

unsuccessful. Each time he attempted to reintegrate into the family he found himself in a conflict situation that escalated to AVO level.

*I've been away that long that I just don't feel like I fit in anymore (Dante, 18)*

From the interviews it appeared that these attempts at reconciliation occurred through informal channels and neither the young person nor the family member were formally supported or taught the skills required to navigate this emotionally- and relationally-complex process.

Repeated attempts to re-engage with family were successful for some participants. Some young people had developed longer-term relationships with at least one of their parents, siblings or relatives. For example, Jai was removed from his mother when he was a baby and placed in his aunt's care. He lived with his aunt, who he thought of as his 'mother' until her death when he was about seven. After this, Jai lived with various relatives and on the streets. Since leaving care, through his determination and with help from aftercare workers, Jai had organised stable housing and had finished high school. During this time, he reconciled with his mother, providing her with practical and emotional support:

*[I] make sure she's taking her medication. That's another really big thing. If she's not taking that she goes haywire. Just make sure she's travelling well. If she's depressed, I've got to talk to her and make sure she doesn't do anything silly which happens sometimes (Jai, 20)*

The process of reconciling with family is undoubtedly a complex one requiring high level and highly skilled interventions. However, the data makes clear that this is a high priority for young people and one worthy of investment and advocacy work. Furthermore, aftercare workers are trusted people, who are well placed to provide initial support for these processes.

## **Service and worker characteristics valued by the young people**

Several key service and worker characteristics were identified by the young people as providing support previously missing in their transition to independent living. These were:

- flexible, wrap around or holistic service provision;
- care and compassion;
- choice;
- advocacy.

## **Wrap around or holistic service provision**

Through their accounts of previous experiences with fragmented service landscapes, the flexible and holistic support offered by aftercare services was highly valued by the young people. Aftercare services linked young people to a range of support tailored to their circumstances.

*Mm, like these guys asked me, do you want to do a course or what do you want? We did a plan for me, what my goals are in the future and stuff, do I want to study... (Fern, 23)*

Flexible services that provide wrap around support across multiple domains of their lives built confidence in the young people that they were not alone and that they had a safety net where required. The young people discussed the importance of the way in which the service was able to 'roll' with whatever they needed support with at the time.

## **Care and Compassion**

Young people valued how aftercare workers spent time with them and listened to them.

*It's just that there's always someone there I guess to talk to (Steven, 17)*

Through this process a relationship was built. Many of the young people viewed the aftercare workers as someone they 'could count on' which had been lacking in their lives.

*She was like, we haven't heard from you for three days. We've been trying to get in contact with you. We're worried. I'm like, oh, it's good that someone worries about you. So that was good to know (Tula, 25)*

The young people felt the workers understood their life circumstances and were non-judgmental, creating an environment of trust.

*I had a heaps good worker. He was just easy to talk to. He'd sort of been through sort of the same sort of things and you could tell he'd seen a lot and done a lot. He was just one of those people who you just clicked with (Walt, 17)*

This contrasted with their experiences prior to leaving OOHC and their interactions with many mainstream services.

Being listened to was not why the young people sought help. Rather, it was to fulfil more basic needs such as housing, financial or health issues. However, the relationship-building that occurred in the process of seeking help had beneficial flow-

on effects for the young people's future help-seeking skills. It also built a sense of felt security in the young people.

## **Choice**

A key characteristic of aftercare services located in the narratives of the young people focused on choice and autonomy in decision making. Young people spoke about being given options by workers and having choice and control over the decisions that affected their lives.

*[Aftercare worker] says to me, 'if I don't want to do it, it's my choice now. It's up to me what I want to do and the way I want to go about (Annie, 21)*

Young people's lack of control over decisions such as foster care placements or schooling options when living in OOHC can contribute to young people's decision to leave OOHC as soon as possible. Young people craved the freedom to make their own decisions. They valued the mentorship of aftercare workers in making important decisions.

## **Advocacy**

The narratives of the young people when talking about the aftercare services and workers also focused on the role of case workers as an advocate on the young person's behalf.

*[Support worker] comes with me to my Housing Commission appointments and kind of backs me up when I feel overwhelmed and stuff (Annie, 21)*

Follow-up interviews and youth consultations with the participants suggest that opportunities to be involved in activities to strengthen the system are highly valued by young people. These opportunities have been met with enthusiasm and have also offered insights into the clear thinking and problem-solving capacities of young people who have been in OOHC and need ongoing supports.

## 5 Conclusions and future analysis

Aftercare services exist in a broader policy and service landscape that shapes the support needs of, and resources available to, young people. This service landscape also shapes the way in which aftercare services can and do operate. The ways in which aftercare services support young people are closely linked to the functioning of the OOHC system through which the young people have travelled, and changes to aftercare services should be considered in the context of the broader OOHC system with which they are linked. Having the option of being able to stay in out-of-home care beyond 18 years, for example, would provide some young people with the option of being supported by foster families further along the path into their transition to adulthood, changing the profile of their support needs in early adulthood.

In addition, as a major function of aftercare services is to support young people to access a range of resources across different service systems, the capacity of aftercare services to support young people is dependent on the resources available in the broader service context – across housing, education, mental health support and other service systems. While this paper recommends changes to the provision of aftercare services and to some extent, OOHC, these changes must be considered within this broader context, which also requires change to better support these young people.

The preliminary analysis of the young people's experiences in their transition from OOHC identified key gaps in support and represent potential strategic points for intervention across aftercare and the broader OOHC system to better support the young people in our study and others like them. Many recommendations about changes to aftercare would require considerable extra resourcing for aftercare by government. Children who are placed in out-of-home care would benefit from:

- Investment by the service system in creating good relations with young people throughout their time in OOHC by providing prompt, reliable and appropriate services. This builds a sense of felt security for the children and young people and confidence in service systems, which builds their capacities and likelihood of engaging positively with aftercare services upon leaving care.

None of young people in the study had engaged in aftercare services at the time they left care, even though most were highly under-resourced and in need of the intensive support offered by aftercare services at that time. Many on reflection wished they had known about aftercare services, understood what aftercare services could support them with, or accepted support from aftercare services earlier. When young people leave care, there is a need for a more co-ordinated approach to effective support as they build secure and stable housing, employment, and relationship trajectories.

- More comprehensive processes should be in place for identifying young people who may need aftercare services before they leave OOHC and undertaking transition planning in consultation with the young person and, if appropriate, the foster family and birth family.
- Referral pathways to aftercare services need to be reinforced so young people who want to exit the formal system know how to, and can, find their way back easily if the need arises.

When young people in this study accessed their OOHC files, they found reading the material difficult and traumatic.

- Young people require more support from FACS and/or aftercare services when accessing and reviewing their personal records and files.
- FACS could develop processes which ensure that personal files are kept in such a way that they form a positive resource for young people in the future (see <https://childstory.net.au/>), and aftercare services could engage in advocacy on this possibility.

A key concern for many but not all of the study participants was reconnection with family. Many attempted reconnection with no support and continued to do so regardless of failed attempts. They would benefit from more support for reconnection with parents, siblings and extended family members.

- Greater focus and attention could be paid to reconnection with families. A more structured and comprehensive approach to reconnection support should be directed at care leavers as well as their estranged families and communities.

The capacity for aftercare services to provide a safety net for the young people was central to their effectiveness. This safety net supported and allowed them to learn and apply skills, and make mistakes, over time. A number of participants clearly voiced the need for a safety net that did not fall away when they were doing well. It is during these periods young people are able to reach out for new learning and consolidate some of the skills that support healthy decision-making and resilience. When in work or secure housing, young people who had left care still juggled ongoing challenges and setbacks and were likely to require ongoing support beyond the age of 25 years.

- Aftercare services need to be resourced so that they can stay connected with young people when their lives are going well. During this time, young people would be receptive to learning deeper level organisational and coping skills. Staying connected would facilitate re-engaging with support services for young people who encounter new difficulties.

While aftercare services had supported some of the young people to connect to education and training, there was little support to convert the skills or qualifications obtained into employment. The young people described aftercare services and employment services as completely unconnected forms of support. Yet in their stories of their everyday lives, employment-seeking efforts were strongly connected

to the areas where aftercare services were supporting them - mental health, housing, and financial security. Participants reported a need for support with understanding, managing and meeting workplace expectations. While this is the role of a postplacement officer at an employment services provider, young people did not describe their needs being met by people in these roles. They needed their expectations and skills to be mediated by a trusted person. There is potentially an important role for aftercare services in 'buffering' employment services experiences – such as doing warm referrals with employment agencies that have been trained to work with young people from OOHC.

Participants in this study consistently expressed high levels of confidence in aftercare services in the context of low service confidence in general. Several participants suggested that engagement with aftercare services felt like a turning point when they started to feel properly supported by a formal service.

- Extend aftercare services to broker with tailored and trusted employment services

Skills frameworks have been very useful in our analysis of participants' biographies as they offer an analytic lens for identifying, developing and investing in the skills, capabilities, assets and resources of young people. Importantly, these frameworks enable us to move away from a deficit, problem-oriented approach to young people. Identifying the skills young people demonstrated in the context of the adversities they have faced opens lines of thinking about how to build on the skills they already have. While the young people in this study were lacking in many resources, such as financial, housing, and educational resources, most had strong non-cognitive skills or resources, such as problem solving, perseverance, interpersonal and communication skills. They exercise these skills in a range of spheres that are mostly outside of employment, but these skills are transferable to those required in the paid labour market. Expanding and cultivating skills has the potential to form the foundation of a range of strategies for supporting disadvantaged young people to transition to 'independent living'.

- Well-tailored interventions by aftercare services could cultivate existing non-cognitive skills and facilitate their transfer into other contexts, such as education and employment.

Overall the narratives of the young people in the study about interactions with aftercare case workers and support from aftercare services were positive and starkly contrasted with their experiences of other service types and programs. For these young people – who were recruited through aftercare services and were current aftercare service users so are more likely to hold favourable views of them – aftercare services had provided them with wraparound support taking account of their lived experiences and continuing to support them through setbacks. The young people valued being listened to, respected and given choice in decision-making, building the foundations for trusted relationships.



## **Next steps**

The research team is working on detailed analyses of the data to examine the experiences of young mothers, to better understand the ways in which disadvantaged young people resource each other and others, to investigate how young people navigate across service systems, to explore young people's identity-making in OOHC and to reflect on the benefits and challenges of using narrative methods with young people.

# References

- Australian Institute of Family Studies (AIFS), Chapin Hall Center for Children University of Chicago, & New South Wales Department of Family and Community Services. (2015) *Pathways of Care Longitudinal Study: Outcomes of children and young people in Out-of-Home care in NSW. Wave 1 baseline statistical report*. N.S.W. Department of Family and Community Services, Sydney.
- Benard, B. (1993) "Character Education: Fostering Resiliency in Kids" ASCD Learn Teach, available at access on April 1 2016.
- Cashmore, J. A., & Paxman, M. (2006) 'Predicting after-care outcomes: The importance of "felt" security'. *Child and Family Social Work*, 11, 232–241.
- CatholicCare (2018) After Care, <http://www.catholiccare.org.au/services/child-youth-family-services/after-care/> accessed 30 May 2018.
- Collins, M., Paris R., Ward R. (2008) 'The Permanence of Family Ties: Implications for Youth Transitioning from Foster Care.' *American Journal of Orthopsychiatry*, 78(1), 54–62.
- Duckworth, A. L., & Seligman, M. E. (2005) 'Self-discipline outdoes IQ in predicting academic performance of adolescents'. *Psychological Science*, 16(12), 939-944.
- FACS (2017) *Guidelines for the provision of assistance after leaving out-of-homecare*, NSW Department of Family and Community Services, Sydney.
- FACS (2018) Childstory: planning your future, <https://you.childstory.nsw.gov.au/look-after-you/you-can-get-a-job/you-can-get-help-after-transitioning-from-care> Accessed May 30, 2018
- Fernandez, E. (2007) 'How children experience fostering outcomes: participatory research with children,' *Child and Family Social Work*, 12, 349–59.
- Masten, A. (2001) 'Ordinary Magic: Resilience Processes in Development.' *American Psychologist*, 56(3), 227–238.
- Muir, S. and Hand, K. (2018) *Beyond 18: The Longitudinal Study on Leaving Care Wave 1 Research Report: Transition planning and preparation*. (Research Report). Australian Institute of Family Studies, Melbourne.
- National Centre for Vocational Education Research (NCVER) (2014) *Longitudinal Surveys of Australian Youth annual report 2013*, NCVER, Adelaide.
- Relationships Australia NSW (2018) *Aftercare Resource Centre (ARC) Support Services*, <http://www.relationshipsnsw.org.au/support-services/aftercare-resource-centre/> 30 May 2018
- Uniting (2018) *Aftercare for young people* @ <https://uniting.org/who-we-help/for-children-and-young-people/aftercare-for-young-people> 2018 viewed 10 April 18.

## Appendix: NSW policy for young people leaving out-of-home care

In recognition of the needs of young people leaving out-of-home-care (OOHC) under Section 165 of the NSW Children and Young Persons (Care and Protection) Act 1998 'the Minister is required to arrange or provide assistance to eligible care leavers until they reach 25 years of age where such assistance is considered necessary having regard to their safety, welfare and well-being' (FACs, 2017: 1).

'To be eligible for assistance a young person must meet the following criteria:

- (i) leaves out-of-home care at the age of at least 15 years, and
- (ii) was in the parental responsibility of the Minister immediately before leaving care pursuant to an order of the Children's Court, or otherwise a protected person, and
- (iii) has been in this parental responsibility for a cumulative period of at least 12 months, and
- (iv) has not left this care as a result of an adoption or guardianship order, and
- (v) is under the age of 25 years (assistance for those over 25 may continue to be provided at the Minister's discretion).' (FACs, 2017:1)

All care leavers should have a leaving care plan developed. The agency managing their placement is responsible for the development of the plan. Planning should begin when the young person is 15 years old and be completed by the time they leave care (FACS, 2017).

The aim of the plan is to prepare the young person for independence and organise services to support them with the transition to independent living. Financial assistance can also be provided. The plan should include:

- financial assistance where required
- help finding accommodation and employment
- establishing a house
- education and training
- legal advice
- accessing health services e.g. counselling (FACs, 2017).

The plan should provide detailed information about the agencies or people responsible for providing the services and resources required to implement the plan.

If the young person leaves care without a plan it can be developed later.

Written information about universal services (such as school and health care) and specialist services should be provided to young people leaving statutory out-of-home-care.

Care leavers may also be referred to mainstream services – such as Centrelink or public health providers. Support may also include advocacy to assist the young person with access to a range of other services.

When young people leave care they are entitled to access their personal information held by the agency. The agency should provide an appropriate person to support them through this process. Through their plan, young people may also be offered help to contact family and other significant people (FACS, 2017).

## **Aftercare services**

Aftercare programs provide case planning and support to young people who have left statutory OOHHC between the age of 15 years and 25 years (AIFS et al., 2015). Non-government organisations are funded to provide aftercare programs throughout NSW (FACS, 2018)

Young people can self-refer to an aftercare service or be referred by GPs, other community services, out-of-home care providers, residential care programs and a range of government and non-government service providers (Uniting, 2018).

Aftercare programs aim to work collaboratively with young people aged 15 to 25 years to help and support them to achieve their goals and move towards and attain independent living (Uniting, 2018). This includes both practical and emotional support, provided through caseworkers, mentoring programs and other services (CatholicCare, 2018; Relationships Australia, 2018; Uniting, 2018).