



The needs and experiences of young people with a disability transitioning from out-of-home care: The views of practitioners in Victoria, Australia



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ABSTRACT

Young people transitioning from out-of-home care are one of the most vulnerable and disadvantaged groups in society. Those with disabilities have particular and complex needs, and face additional barriers compared to other care leavers in terms of accessing assistance. As a result, they are a high risk group for poor outcomes. This qualitative study involved consultations with 19 workers from six key agencies involved in out-of-home care and leaving care practice and policy to examine the current experience of, and support services available, to young people with a disability transitioning from out-of-home care in the Australian State of Victoria. Our findings suggest that care leavers with a disability do not currently receive the transition and post-care supports they need particularly in the area of housing and mental health, and that further holistic support is required until at least the age of 21 years.

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1. Introduction

Young people transitioning from out-of-home care (OoHC) are arguably one of the most vulnerable and disadvantaged groups in society. The social and economic costs associated with the current failure to provide leaving care and post-care supports to care leavers are significant both for the individuals involved and the broader community. Care leavers tend to make significant and ongoing demands on income security, housing, health and welfare, substance abuse services, criminal justice, and other crisis intervention systems (Mendes, Johnson, & Moslehuddin, 2011; Smith, 2011; Stein, 2012). Leaving care is formally defined as the cessation of legal responsibility by the state for young people living in out-of-home care (Cashmore & Mendes, 2008). In practice, however, leaving care is a major life event, and a process that involves transitioning from dependence on state accommodation and supports to self-sufficiency.

Most care leavers including those with disabilities originally entered the care system because of abuse and/or neglect (Australian Institute of Health & Welfare, 2012). For young people with disabilities leaving OoHC, however, the leaving care difficulties are magnified, and the risk for poor outcomes is even greater (CREATE Foundation, 2012;

Harris, 2005; Priestley, Rabiee, & Harris, 2003; Rabiee, Priestley, & Knowles, 2001; UK Department for Education, 2010). This is because young people with disabilities have additional needs relating to physical, intellectual, sensory, communication and/or psychiatric impairments. They are at high risk of bullying, abuse and exploitation (MacDonald, 2010; Mepham, 2010). They are at greater risk of many forms of mental health problems such as depression and anxiety, and also substance abuse problems (Emerson, Einfeld, Stancliffe, & Stancliffe, 2009). They also face barriers as a result of negative attitudes about disability, and unequal access to services and resources (Mepham, 2010). For example, many care leavers with disabilities find it particularly difficult to access housing, education, employment, transport and social connections (UK Department for Education, 2010).

In Australia, a small number of studies have specifically examined the needs of care leavers with a disability, and these mirror the international research in identifying young people with a disability as particularly vulnerable to negative social outcomes, and requiring specialized and ongoing support to achieve a successful transition (CREATE Foundation, 2012; Edwards, 2010; Ellem, Wilson, O'Connor, & MacDonald, 2012; MacDonald, 2010; New South Wales Ombudsman, 2004). No specific studies of this group have been undertaken in the Australian state of Victoria, but previous research by Mendes and Meade (2010) via a partnership with St Luke's Anglicare and Whitelion in rural Victoria found evidence that care leavers with a disability typically "fell through the gaps" between child protection and disability services, and were not being adequately supported in their transition.

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2. Organizational and legislative context

Australia has a federal model, whereby child protection and disability services are the responsibility of each state and territory. The eight jurisdictions have their own child welfare and disability legislation, policies and practices, and consequently there are no uniform in-care or leaving care standards, although the national out-of-home care standards introduced in December 2010 suggest minimum benchmarks. The Department of Human Services (DHS) takes responsibility for statutory child protection services in Victoria, and for making decisions about the placement of children and young people in OoHC. However, in practice, most OoHC services are provided by non-government organizations funded by DHS (Cummins, Scott, & Scales, 2012).

There are currently over 39,000 children and young people living in out-of-home care (OoHC) in Australia, of whom approximately 95% live in home-based care (either foster or kinship care), and 5% in residential care (Australian Institute of Health & Welfare, 2013). It has been estimated that 3034 young people aged 15–17 years were discharged from OoHC in 2011–12, and the figure for Victoria was 857 (Australian Institute of Health & Welfare, 2013, p. 77). Some of these young people stay in existing foster or kinship care placements, others return to their family of origin, and many appear to move into independent living. Because Australian jurisdictions do not officially trace or monitor the progress of care leavers, we neither have precise figures as to how many young people fall into each category, nor have any substantial data on their general post-care outcomes.

In 2008, the Commonwealth Government introduced a national framework for protecting Australia's children, which includes a commitment to promote better outcomes for care leavers transitioning to independence. The framework proposes to increase support through non-government organizations for care leavers; to provide additional support for state and territory initiatives supporting care leavers; and to prevent exits by care leavers into homelessness (Department of Families, Housing, Community Services & Indigenous Affairs, 2008). National out-of-home care standards were introduced in December 2010 and include a requirement that all young people have a transition from care plan commencing at 15 years of age, which must be reviewed at least annually. This plan must include proposed assistance with housing, health, education and training, employment and income support, and should involve young people in its preparation, to facilitate enhanced transition planning measures (Department of Families, Housing, Community Services & Indigenous Affairs, 2010).

The government also developed a nationally consistent approach to leaving care planning that aligns with the national out-of-home care standards. This approach identifies the transition from care as a process involving three overlapping phases: preparation, transition and after care independence, phases which occur from 15 to 25 years. Progression through these phases is determined by skill and emotional maturity, rather than chronological age. Care leavers are to be assisted in the eight life domains of housing, health, education, training and employment, financial security, social relationships and support networks, life skills, identity and culture, and legal matters (Department of Families, Housing, Community Services, & Indigenous Affairs, 2012). The aims of this nationally consistent model are to promote equity and consistency for all care leavers, irrespective of their location, and to facilitate improved standards throughout Australia (Department of Families, Housing, Community Services, & Indigenous Affairs, 2011). But significant differences still exist between the eight States and Territories in terms of legislative and policy support beyond 18 years (Mendes et al., 2011).

Victoria legislated via the *Children, Youth and Families Act 2005* for the provision of leaving care and after-care services for young people up to 21 years of age. The *Children, Youth and Families Act 2005* appears to oblige the government to assist care leavers with finances, housing, education and training, employment, legal advice, access

to health and community services, and counseling and support depending on the assessed level of need, and to consider the specific needs of Aboriginal young people. The government has established mentoring programs, postcare support and placement services, specific supports for Aboriginal young people, specialist programs known as Springboard for young people leaving residential care, and housing supports for young people transitioning from care. A few of these services target young people with a disability, but there is no specific reference to their needs within the overall service framework. In 2013–14, the overall funding for Victorian leaving care and post-care services totals just over 11 million dollars (Victorian Government, 2013).

In principle, these services are intended to meet the needs of all Victorian care leavers, but in practice they remain discretionary rather than mandatory, and many care leavers experience difficult transitions in key areas such as housing, health, education and employment (Cummins et al., 2012). There appear to be two key deficits. Firstly, only limited post-care funding is allocated for services brokerage for the young person leaving care, and there is no ongoing financial support for carers. For example, a report by St Luke's Anglicare on the regional City of Greater Bendigo calculated that funding for young people living in OoHC in that region varies from a minimum of \$56,000 per year for those in home-based care to a maximum of \$224,000 per year for those living in residential care. In contrast, the maximum funding for any young person who has left care in Bendigo is only \$7900 per annum. These figures may differ slightly for other regions depending on local service configuration (Bonnicce, 2012).

Secondly, housing assistance for care leavers is discretionary. There is no formal expectation that Victorian child protection services provide dedicated housing for the approximately 850 young people who transition from care each year. A number of official and non-government reports on leaving care in Victoria have discussed these concerns, and the need for legislative and policy reform. Their perspectives can be summarized as follows:

Young people transitioning from care have varied experiences and capacities, but a significant proportion has wide-ranging and life-long problems. There is no justification for ceasing support to young people living in out-of-home care simply because they reach the chronological age of 18 years, given that (a) most of their non-care peers can expect to receive support well beyond this age, and (b) care leavers are less rather than more equipped to deal with the transition to independence. Because so many care leavers are not sufficiently mature at 18 years of age to live independently, the government should extend guaranteed housing and other material and emotional assistance until at least age 21 and preferably 25 years of age (Bristow, Cameron, Marshall, & Omerogullari, 2012; Cummins et al., 2012; Ombudsman Victoria, 2010; Whyte, 2011).

DHS also provides some direct support to children and adults with a disability. These include case management to assist people to achieve their independence and participation goals, respite services to provide families with short-term breaks, individual support packages allocated to a child or adult to purchase supports to meet their needs, and the Statewide Equipment Program which provides specialized aids and equipment to maximize the independence of people with disabilities, but is known to have waiting periods of one to two years. But again most direct services including supported accommodation are provided by non-government organizations (Cummins et al., 2012).

The *Disability Act 2006* provides direction to DHS and other bodies who provide support and care to children and adults with a disability. Under this Act, the definition of disability ranges across physical, intellectual, sensory, and communication. However it does not include mental illness (Victorian Government, 2009), and it must be noted that mental health problems occur at higher rates in people with disabilities than in their non-disabled counterparts (Emerson et al., 2009).

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