



Go Your Own Way

CREATE's resource for young people transitioning
from care in Australia: An evaluation



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for CREATE Foundation

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CREATE Foundation

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foreword

Ms Jacqui Reed

It is without doubt one of the most challenging periods in any young person's life, the transition to adulthood. It usually is marked by a significant birthday – the magical 18th. Young people excitedly await the "coming of age" and the freedom and adventure that comes with it.

However, for some young people, this period is often fraught with anxiety. The challenges for young people with a care experience who transition to adulthood often mar the excitement and joy of reaching the age of independence.

CREATE Foundation (CREATE) has been concerned at the trajectory of poor life outcomes for many young people leaving out-of-home care (not all, but a significant proportion). Our work in highlighting the issues for young people transitioning to independence started with our seminal work in 2008, with further reports on this topic in both 2009 and 2011. All highlighted the deficits within the system as identified directly by young people. We expanded our work in this space, and with support and endorsement from all states and territories embarked on an ambitious project – *Go Your Own Way*. Essentially, we developed a tool kit for young people to use when transitioning from care to independence.

This report highlights the progress we have made towards improving the transition process for young people. There are some positives, and we are pleased that we can categorically say that those with a GYOW Kit are more likely to have a leaving care plan. This is a wonderful step forward. However,

disappointingly, problems with the Kit distribution and follow up made the process less effective in supporting young people. Our challenge now is to overcome the obstacles and work collaboratively with jurisdictions to identify positive steps forward to build on this vital work.

There are many people to thank for their work on the GYOW project. Firstly, thanks are extended to the state and territory governments who provided the funds, and were committed to making the resource the best it could be for young people. This was a truly collaborative effort. I would like to also acknowledge the dedication of CREATE's Policy and Advocacy team – Noelle Hudson, Madonna Bowman, Alex Cahill, and Peter Melrose for their stellar efforts in drawing together the volume of information and for providing support to the states/territories to overcome the challenges of locating the young people (in such a narrow cohort).

Special recognition is due to the efforts of our State Coordinators, and their amazing Community and Youth Facilitators, who worked tirelessly to reach as many young people as possible, leaving no stone unturned. Your efforts were remarkable. Also, words cannot express how much we value the input from the young people

who were yet again asked to speak to us and talk about their experiences, and who gave so generously of their time so that others could benefit. Thanks from all of us at CREATE; and thanks also from the young people who leave the care system after you.

Lastly, and importantly, thanks to Dr Joseph McDowall for his unwavering enthusiasm and commitment to this project. Despite the many obstacles and frustrations along the way, his dogged, relentless pursuit to locate and speak to young people motivated us all. His tireless efforts to overcome the many challenges that this project threw at us, with good humour and a solutions focus, was nothing but inspirational.

We hope that this report influences those with decision-making capacity to build a system that supports young people's transition to independence so that they too can enjoy the milestone of turning 18 in a more positive way, and look forward, as other young people do, to the adventures ahead!

Jacqui Reed
Chief Executive Officer
CREATE Foundation



biography

Dr Joseph J. McDowall

Dr Joseph McDowall has a PhD from the University of Queensland in social psychology. He has lectured both there and at Griffith University in the areas of research methods, statistics, social skills, and empirical aesthetics.

Since 2002 he has been involved in child protection and has provided consultancy services to the Queensland government within the out-of-home care sector and for the Recognised Entities. He joined the board of the CREATE Foundation in 2008 and is now Executive Director (Research).

He has written three Report Cards (2008, 2009, and 2011) that have provided a comprehensive review of the state of transitioning from care in Australia. In 2010, Dr McDowall co-authored the solutions paper "What's the Answer?" that summarised the views of young people regarding what could be done at various levels to improve the transitioning experience (this was published under the auspices of the Commonwealth Department of Families, Housing, Community Services, and Indigenous Affairs).

Following the introduction of the National Standards for Out-of-Home Care, in 2013 Dr McDowall produced the first national survey of life in the Australian care system from the perspective of children and young people. His report in 2015 drew attention to the issues surrounding the placement of siblings in care, and a recent work (in press) addresses the degree of connection to culture experienced by Indigenous young people.

Currently, he is a Visiting Fellow at the Queensland University of Technology. He also is a member of the Australian Psychological Society and a Fellow of the Queensland Academy of Arts and Sciences.





executive summary

Background

Australian and international research has demonstrated that young people transitioning from the care system to independence experience a number of challenges that often lead to poor outcomes in their lives post-care (McDowall, 2009; Mendes, Johnson, & Moslehuddin, 2011; Osgood, Foster, & Courtney, 2010; Tweedle, 2007). Problems can occur in most of the important life domains including housing (homelessness), education and training, employment, health, and life skills development.

Governments around the world are concerned with providing services designed to meet the needs of care leavers (Stein, 2012). In some parts of the US, and the UK, attempts are made to reduce the pressure on these young people by giving them a choice of extending their care experience until they reach 21 years (Courtney, Dworsky, & Pollack, 2007). Delaying transition can be beneficial. However, young people still would require support to achieve independence. Before appropriate courses of action can be undertaken, and services accessed, it is necessary for a needs analysis to be conducted for each young person to identify which services might be of value to an individual, to ensure such supports are available, and to facilitate access to these relevant services. This tripartite approach can only be achieved through effective transition planning.

In Australia, under the second three-year Action Plan to implement the *National Framework for Protecting Australia's Children 2009–2020* (Council of Australian Governments, 2009; Department of Families, Housing, Community Services, and Indigenous Affairs [FaHCSIA], 2012), the Australian government recognised the need for consistency in support provided for young people transitioning from care and stipulated that a key action should be to

integrate support for young people leaving care that is tailored to their individual needs and builds on a lifespan approach, including the Transition to Independent Living Allowance and State and Territory leaving care packages for care leavers. (FaHCSIA, 2012, p. 19)

The proposed measure to determine how effectively this action was prosecuted (Indicator 4.6) was the "proportion of young people aged 15 years and over who have a leaving care plan" (p. 19).

For several years, the CREATE Foundation has undertaken a number of major national projects exploring transitioning from care in Australia (McDowall, 2008, 2009, 2011). A concern raised in each of these reports was the lack of consistency in planning. Because of this history, and CREATE's involvement with the Action Plan Implementation Working Group, it

was given responsibility to advance the development, distribution, and evaluation of a nationally consistent resource for young people leaving the Australian care system.

Go Your Own Way (GYOW)

GYOW Kit Production

To produce a nationally consistent resource for care leavers, CREATE began by reviewing the various packages already available in the states and territories. A group of young people who previously had transitioned provided feedback on what seemed to be the most effective components to draw from existing resources. They also made suggestions for the form the resource could take (a satchel pack was chosen), and what they considered to be any other essential components to include in the Kit. A key element was a Workbook that contained information about what young people needed to consider when transitioning, which included a series of checklists designed to act as a catalyst for discussions with caseworkers and carers in the formulation of a leaving-care plan.

Other components included a Journal in which young people could record personal information, and a USB flash drive that allowed the most current transition information, relevant to the particular jurisdiction, to be included at the time of Kit production. This provided contact details for support services that were available for access by the young people if needed.

All governments contributed funding for the production of GYOW Kits. The various jurisdictions indicated how many young people aged 17 years were in their system in 2014. This number determined how many Kits were produced, except in WA where only 60 Kits were commissioned. In total, 1961 Kits were prepared for distribution.

GYOW Kit Distribution

The GYOW Project plan required that the young people expected to age out of care in 2015 would have at least 12 months to work with their case managers in developing a transition plan. Six months after distribution, CREATE staff were to contact the young people to check that they had received their Kit and to determine if they had begun to use it for planning. This was to be a prompt to begin the planning process if it had not commenced already. After 12 months, when the young people had aged out of care and had some post-care experience, they were to be interviewed to obtain an insight into the usefulness of the GYOW Kit as an aid to planning and a source of support for transitioning.

Unfortunately, a number of difficulties were encountered during this phase of the process. Governments differed in terms of information they could provide about who should receive a GYOW Kit. Some jurisdictions could provide names of the 17-year-olds, but no contact details; most were not prepared to give any information about intended recipients because of privacy concerns. This resulted in a mixed approach to Kit distribution. An independent distribution centre posted some Kits, with CREATE providing the Kit components and governments providing address labels. Other governments required the Kits to be given to them for distribution by caseworkers. Because of the governments' inability to share contact detail information, CREATE had no control over Kit distribution.

GYOW Kit Evaluation

Interim calling. The next phase of the proposed process was the interim calling to check on Kit reception and to respond to any issues the young people had regarding its use. Again, governments were unable to provide CREATE with contact details for those who had received a Kit. Some

jurisdictions did allow CREATE staff to call young people from the government offices, using phone numbers provided, but few could be contacted, due to a combination of factors, including that some of the numbers were disconnected, or no longer relevant for the young person in question, or that the calls had to be made during business hours when many young people were at school. Again, the lack of contact information meant that CREATE was unable to communicate with the young people to provide progressive support and encouragement for using the GYOW Kit as an aid for planning.

Ethical approval. By mid 2015, CREATE was ready to begin the evaluation phase of the process. Although ethical clearance was obtained through the Human Research Ethics Committee of a national specialist agency (Bellberry) following the National Statement on ethical conduct of research (National Health and Medical Research Council, 2016), further ethical clearance had to be sought from individual government and agency ethics committees. This process continued into February 2016. One jurisdiction did not complete the process (ultimately with a rejection of approval) until data collection for the other states and territories had been completed.

Sampling. By the time evaluation interviews could be conducted, young people in the recipient cohort had aged out of care. At that stage, governments were unable to provide contact details because no information is retained regarding those who have been in care after they leave the system. This makes following their progress towards achieving goals, and determining what support they might require, extremely difficult.

Fortunately, CREATE maintains a database of young people who have been in care and who have participated in its programs. From those who met

the age requirement, 369 were contacted and agreed to participate in this study. Of the three quarters who had concerns about transitioning, most were worried about finances and budgeting (18%) and housing (14%). Around 69% thought planning for the future was important, but 29% hadn't spoken with anyone about what they could expect on transitioning.

Kit reception. A concerning observation affecting the evaluation of the GYOW Kits was the fact that only 52% of the sample had received the resource. Clearly, the distribution processes, controlled by governments to ensure that all 17 year-olds received a Kit, did not work. An independent, central body needs to oversee the distribution process to ensure consistency and reliability of delivery.

Around 75% of respondents reported positive initial reactions to the Kits, but it was concerning that 47% never discussed the Kit with anyone. A proportion of these (e.g., the 25% of the sample who reacted negatively to the Kit) found it difficult to discuss the Kit because nobody had explained to them what the Kit was for.

About half the young people found that the Kit didn't need major changes or improvements, although 12% commented there could be a better explanation of how it was to be used. Items such as the USB drive proved popular for reasons other than intended (more for storage of personal information rather than supply of transition information).

GYOW Kit and Planning. Critically, in evaluating the usefulness of the GYOW Kit for facilitating planning, a key question was whether the young people who received a Kit were more likely to have a transition plan than were those who did not have access to the resource. Overall, 42% of the sample reported being aware of having a leaving-care plan, with considerable variability across

jurisdictions (low numbers were observed in SA, TAS, and VIC). Almost half of the 243 respondents who commented on their engagement with planning indicated that they had been at least “Quite” involved. Analyses revealed that those young people who received a GYOW Kit were significantly more likely to have a Plan than were those who did not receive a Kit. However, the data indicate that the Kit did not function as intended in leading to large numbers of young people having more meetings with caseworkers to develop Plans.

Caseworker improvement. Although 38% of respondents had no comment when asked for suggestions that caseworkers might take on board to support young persons’ planning, others were more forthcoming. Responses fell into three broad categories: Practice issues (caseworkers to display more supportive behaviour); Specific assistance (with housing, finances, education etc.); and Systemic issues (policies promulgated by governments).

Plan content and effectiveness. While three quarters of young people who had a transition plan indicated that it contained reference to housing, and almost two thirds reported discussion of educational issues, percentages relating to other essential concerns for those attempting to live independently were considerably lower. Areas such as Employment, Finances, Life Skills, Family Contact, and Accessing Support Services were considered in half the respondents’ Plans, while Relationship concerns were addressed for only 39%. More consistency needs to be introduced into the content of transition plans to ensure that issues in all life domains are adequately addressed. The omissions that were demonstrated probably contributed to the observation that only 62% of respondents with a Plan believed that it would be at least a “Reasonable” help to them (scoring 4 and above on

a 6-point scale) when accessing support services post-care.

Those young people who had a transition plan reported feeling more confident overall in living independently than did those who did not have a plan. Confidence varied over life domains, with the lowest level expressed for handling finances. Analyses also revealed that those young people without a Plan experienced more uncertainty about where to seek support for five of the eight life domains (Housing, Education, Finances, Life Skills, and Family Contact).

Outcomes post-care. Just over one fifth of this sample of young people continued living with their carers after turning 18 years, while 27% moved in with family members, mostly relatives other than parents or siblings. Males were more likely to stay with carers; females were more likely to live with partners.

It was encouraging that one quarter of the young people already were employed. However, while 2% had obtained specific funding to support further study, 60% were dependent on Centrelink payments (youth allowance or pensions). Hopefully, this support will lead to engagement with courses and programs that will contribute to improved outcomes for many of these young people.

Questioning about access to financial support in the form of the Australian governments’ TILA grant showed that 57% of this sample either had not applied for, or did not know about this support. More females than expected had accessed the funding; more males than expected were unfamiliar with this scheme. Also, there were significant differences between jurisdictions in the knowledge their young people had about TILA; those in QLD seemed well informed while those in SA and VIC were less so. Significantly more young people than

expected who had a transition plan had applied for, and knew about TILA. This is not surprising because, under the requirements for accessing TILA, young people must have a leaving care plan before their caseworker can apply on their behalf.

Improving the transition experience.

Of the young people who felt their transition experience could have been improved, 19% wanted more support, either through better communication or more specific help with housing, finance, employment, and education. Several responses addressed the planning process, generally indicating that it could have started earlier and involved the young person more. While several comments referred to a positive process and outcome, others documented a struggle that could have been reversed with more support from those responsible for caring.

Recommendations

The following recommendations are drawn from the findings of this study, and summarise the discussion of possible changes to the process by which the GYOW resource is made available to those preparing to transition from care in the future:

1. Given the positive outcomes for young people transitioning from care that resulted from possession of a GYOW Kit, it is suggested that the Kits should continue to be provided to young people leaving care. They could be given to young people whenever appropriate within the 15–17 year age range. Earlier distribution would maximise the time available for planning; however, this also could create more opportunity for the Kits to be misplaced by recipients, a situation that would need to be avoided.
2. A more controlled distribution of the Kits should be implemented than was achieved in this project. CREATE welcomes the continued contribution of governments to the production of the Kits, but stresses that official protocols need to be established to allow the effective management of the distribution process. This will involve governments' sharing non-sensitive contact details with distributing agencies, and developing innovative methods for ensuring a Kit reaches each intended recipient.
3. It is essential that, after Kit distribution, follow-up contact be made with recipients within one month to explain the content of the Kit and how its components can be used. Governments, NGOs, and caseworkers must collaborate to ensure that young people understand the value of the Kit in planning to meet their needs.
4. It also would be desirable to review the use of the Kit's components by young people every six months. This can be done through a phone call to touch base with the recipient and to enquire as to his or her progress with planning.
5. It is proposed that, within the worker training programs undertaken by CREATE for child protection staff, attention will be directed to the availability of the GYOW Kits and the value of this resource in facilitating planning and enhancing the dialogue between workers and young people.
6. Because of the collaborative nature of this project, governments are encouraged to promote the use of the GYOW Kits within departments using established internal communication systems.

7. CREATE should continue to review and update the Go Your Own Way resource, incorporating suggestions contained in this report where relevant.

From the broader experience gained while conducting this project, and from a review of Australian and International literature, the following general recommendations are made. All governments (state, territory, and federal) should collaborate to:

8. consider extending out-of-home care until 21 years, to provide more time over which transition can occur. This would make the process more gradual and less compressed, similar to that experienced by young adults in the general population;
9. develop a national database similar to the National Youth in Transition Database operating in

the US. This would allow the outcomes for young people to be monitored after they exit the care system, and would enable better analysis of their ongoing needs so that appropriate supports can be targeted;

10. establish a system of continuing support for care leavers, similar to the effective Personal Advisors program in the UK, and programs already trialed in Australia, that provides individual mentoring for those who have transitioned to help address their ongoing needs, until the age at which legislation in the respective jurisdictions determines that government support ceases. Mentors could be specialist paid staff, or significant people (who receive training) from the young person's own social network.



introduction

1.0 Introduction

1.1 Transitioning from Out-of-Home Care

One certainty for young people who have experienced the out-of-home care system any where in the world is that at some stage the support provided by the state will end. The role of the “corporate parent” (Dixon & Lee, 2015) is different from that of traditional “mums and dads” in that it is expected to exist for a finite amount of time, the end being marked by the cessation of statutory orders and the young person reaching a prescribed age. The termination of state care creates a situation in which young people who were brought into the system for their nurturance and protection are required to “transition” into a new, uncertain lifestyle. Hence the common expressions (none of which is totally satisfactory) of “transitioning from care,” “transitioning to independence,” “leaving care,” or “transitioning to adulthood.”

Transition is accurate, in Bridges (2009) terminology, as it represents the psychological response to situational change, but whether we look retrospectively at where the journey began, or adopt an aspirational view of where it is heading, the choice is arbitrary, and inaccurate. Many young people do not have to leave the “caring” environment that has been provided for them by the system (but many do); and how many young people are completely independent? Adulthood is an emerging state (Arnett, 2010) that will be achieved chronologically (and hopefully emotionally as well). For this report, the more common term “transitioning from care” will be used, realising its limitations.

The importance of transitioning was recognised by the Australian Government when it established the *National Standards for Out-of-Home Care* in 2011 (Department of Families, Housing, Community Services, and Indigenous Affairs [FaHCSIA], 2011a). In discussing why National Standards

were deemed necessary, the authors of this report explained:

Although all governments are working to improve outcomes for children and young people in out-of-home care, the practices, processes, and outcomes are diverse when trying to create a national picture of outcomes for children in care.

The National Standards seek to drive improvements in the quality of care so that children and young people in out-of-home care have the same opportunities as other children and young people to reach their potential in life wherever they live in Australia. (p. 4)

Standard 13 addressed transitioning from care: “Children and young people have a transition from care plan commencing at 15 years old which details support to be provided after leaving care” (p. 14). Compliance with this Standard was to be measured by determining:

13.1 *The proportion of young people aged 15 years and over who have a current leaving care plan.*

13.2 *The proportion of young people who, at the time of exit from out-of-home care, report they are receiving adequate assistance to prepare for adult life. (p. 14)*

Several publications were produced emphasizing the importance of consistency and planning:

The nationally consistent approach to planning guides practice through a focus on those elements that are essential during the transition process, ensuring they are considered for each young person and addressed where appropriate. Tailoring transition planning to meet the needs of the individual continues to be essential. (Department of Families, Housing, Community Services, and Indigenous Affairs [FaHCSIA], 2011b, p. 6)

Transitioning is described as a process because three differentiable phases are involved over a protracted period, each with its own required actions. These have been identified as the Preparation, Transition, and After-Care Independence Phases (Department of Families, Housing, Community Services, and Indigenous Affairs [FaHCSIA], 2010). The study reported here is exploring aspects of each of these phases.

1.2 Outcomes Following Transition

Outcomes achieved by young people following transition should constitute a key measure of the success of the care system. When children experience successful outcomes in their lives, their parents generally believe that the contribution they have made in support has been effective. However, when the corporate parent reviews what young people achieve on leaving care, the result is not always positive. Stein (2006) observed that care leavers could be classified into three groups, those who were “moving on” with their lives, those who were “surviving,” with the supports available, and those who were “victims,” the latter group later re-labeled to “strugglers” which was widely seen as “a less deterministic and more optimistic description” (Stein, 2008, p. 299). These varied outcomes resulted largely from an interaction between the pre-care experiences of the young people and their treatment within the care system, coupled with individual characteristics that affected their capacity to utilize supports available.

The general picture portrayed of care leavers in the literature tends to emphasise the more negative outcomes. While this view is understandable, because much research attempts to identify the greatest need so that policy and practice can be tailored to provide support in these areas, it is important to not lose sight of the positives and inadvertently contribute to the stigma

already associated with out-of-home care (Denzel & MacDonald, 2014). Throughout this report, an attempt will be made to discuss examples of satisfaction with the system, as well as criticism.

As discussed by many researchers, “the transition from adolescence to adulthood is a significant developmental stage. When foster youth age out of the child welfare system, they are at risk of having to transition without family support” (Greeson & Thompson 2014, p. 1). This can increase their vulnerability and lead to a range of difficulties that have been well documented as occurring in many different societies and countries (e.g., Stein, 2014; Stein & Munro, 2008; Tweedle, 2007). Because transition from care is expected to happen at a fixed chronological stage (in Australia and many parts of the world at 18 years), it tends to occur within a period that is accelerated and compressed. “Their journey may be shorter, more severe and often more hazardous than for those young people leaving their family home” (Stein, 2012, p. 7). Some of these young people are fortunate to experience smooth transitions, but for others the pathways are far more “volatile” (Johnson & Mendes, 2014).

An interesting analysis of the complexity of this process was provided by Refaeli, Mangold, Zeira, and Königeter (2016) in their work with care leavers in Israel. They agreed with the prevailing wisdom that views “stability in care and continuity in the transition from care as a main strategy for successful transition,” a perception reinforced by Ward (2011) and others. However, they make a point that often is overlooked that “This perspective on the efforts of professionals and institutions, emphasising placement stability, disregards the young people’s own efforts to create (dis)continuity in other aspects of their life” (p. 1). Sometimes young people realise they need to break with parts of their past to achieve a more positive future.

When children experience successful outcomes in their lives, their parents generally believe that the contribution they have made in support has been effective.

1.3 Supports Available for Transitioning

In recent years, the amount of research into areas where support is required and the evaluation of particular services have increased considerably over what was available in the early 2000s. Philip Mendes and his colleagues from Monash University have conducted much of the research into transitioning from care in Australia. While working largely in the state of Victoria, this group has addressed many of the problem issues confronting care leavers. Mendes has published on subjects, with particular relevance to leaving care, as diverse as teenage pregnancy and early parenthood (Mendes, 2009a), employment (Mendes, 2009b), higher education (Mendes, Michell, & Wilson, 2014), mental health (Rahamim & Mendes, 2015), substance abuse (Baidawi & Mendes, 2010), youth justice (Mendes, Snow, & Baidawi, 2014), young people with disabilities (Mendes & Snow, 2014), unaccompanied asylum seekers (Barrie & Mendes, 2011), and the special issues involving Indigenous care leavers (Mendes, Saunders, & Baidawi, 2016). In addition, he has contributed to the broader policy and practice debate through a series of seminal books and papers (Mendes, 2009b; Mendes, 2012; Mendes, Johnson, & Moslehuddin, 2011; Mendes, Baidawi, & Snow, 2014). This is a truly impressive body of work, and has done much to focus attention on the needs of this special group of young people.

Unfortunately, the underlying theme emerging from all these studies is one of young people struggling against the odds with “no clear evidence to demonstrate significant improvements in their life chances” (Mendes, Pinkerton, & Munro, 2014, p. 2). These authors make the critical point that perhaps what is needed to create a willingness to effect change is a shift in political thinking from a focus on social investment to one of social justice and social inclusion.

The same issues that Mendes and his colleagues have explored have been addressed by others in Australia and internationally. Researchers generally are looking for understandings that could lead to improvements in outcomes for those transitioning to independence. Access to education (particularly higher education and training) has attracted much attention from investigators. While some researchers have shown poor outcomes for young people who have been in care (e.g., they were more likely to drop out of university than were their non-care peers; Day, Dworsky, Fogarty, & Damashek, 2011), Jarczyszyn and Tilbury (2012) found that care leavers followed many different pathways to find a place in higher education, and that a critical factor determining whether they remained an “aspirer” or became a “completer” was having key support people believing in their ability.

Harvey, McNamara, Andrewartha, and Luckman (2015), from their extensive mixed-method analysis, recommended three major reforms to improve the access and outcomes for care leavers in higher education. They emphasised that governments must collect nationally consistent data on higher education access and achievement for those who have transitioned from care, comparable to the recent report linking school results with care experience (Australian Institute of Health and Welfare, 2015a). This needed to accompany policy and cultural changes by higher education institutions and the sector to create a more supportive context for care leavers, identified as a disadvantaged group requiring tailored treatment.

Youths aging out of out-of-home care are at a high risk of becoming homeless during their transition (Dworsky, Napolitano, & Courtney, 2013). However, Crane, Kaur, and Burton (2013), in their review of homelessness and leaving care, emphasised the importance of connections between domains when they observed that:

where young people have safe, long term and adequate housing, positive supportive adult relationships and/or service support that bridge leaving care and extend into their twenties they are able to move towards lives they see as meaningful and positive. (p. 6)

Other workers also have supported the need for this “holistic and flexible approach to the transition out of care” when considering the fields of health (Matthews & Sykes, 2012, p. 393) and employment (Arnau-Sabatés & Gilligan, 2015). Work of this kind is giving a greater understanding of the adequacy of supports available; what remains to be determined is their long-term impact. As Murray and Goddard (2014, p. 102) note: “We know a great deal about the multiple disadvantages that such individuals [care leavers] face as children. But research is largely silent about their subsequent adult lives.”

1.4 Key Factors in a Successful Transition

Clearly, any support can be of value to individuals who need it. However, some interventions have been shown to be critical in contributing to a successful transition. One such change would enable the transition to be delayed until young people are likely to have acquired greater maturity by extending out-of-home care placements until age 21 years. Mark Courtney and colleagues from Chapin Hall at the University of Chicago (e.g., Courtney, Dworsky, & Pollack, 2007) through their unique Midwest study compared transitioners’ outcomes in a state where care was provided until 21 (Illinois) with states where young people aged out of the system at 18 years (Iowa and Wisconsin). The demonstrable benefits in education, earnings, and service access led to changes in Federal law in the US, and influenced the adoption of the *Staying Put* legislation in the UK (UK

Government, 2014). Calls now are being made for a similar level of support to be introduced in Australia (e.g., Beauchamp, 2014).

In the care system as it is presently configured, another vital factor influencing effective transitioning concerns the relationships formed between care leavers and significant others in their lives. Connections made while in care can be critical and be associated with turning points in young people’s lives (Hojer & Sjoblom, 2014); these influences can be either positive or negative (Malvaso, Delfabbro, Hackett, & Mills, 2016). However, the relationships likely to have the greatest impact into the future for young people transitioning are those with mentors of various kinds who can “stand by” them in the longer term (Mendes, 2009b; Mendes, Purtell, & Antonucci, 2015). These mentors can be either paid staff of organisations, as are the Personal Advisors in the UK (Department of Health UK, 2000), or members of the young person’s own social network (Greeson, Thompson, Ali, & Wenger, 2015; Thompson, Greeson, & Brunsink, 2016). Evidence is clear that these supportive relationships can greatly facilitate a smoother transition to adulthood (Avery, 2010; Nesmith & Christophersen, 2014).

A third factor, recommended as an essential precursor to successful transitioning, is adequate preparation and planning for the future. This is mandated in the after-care section of the UN *Guidelines on Alternative Care* (United Nations General Assembly, 2010, Section 131) where it is stated that: “Agencies and facilities should have a clear policy and should carry out agreed procedures relating to the planned and unplanned conclusion of their work with children to ensure appropriate aftercare and/or follow-up” (p. 19).

Similar expectations were expressed in the documentation produced to mark the establishment of transitioning from out-of-home care to independence as a priority area under the *National Framework for Protecting Australia's Children 2009–2020*. The cover design of this document indicates the pivotal role of planning (see Figure 1). A major impetus for developing national standards was to achieve: "Increased consistency across jurisdictions ... to deliver equity in the planning process for young people, regardless of their location" (Department of Families, Housing, Community Services, and Indigenous Affairs [FaHCSIA], 2010).

The National Standards recommend that planning should begin at 15 years to allow a gradual understanding of what skill base the young person has and what supports might be required in the future. Recent work shows that it can be a more complex process than might first appear; one of its often-

overlooked roles is in setting up expectations in young people for the future. The more information they have, the more they understand of what their options might be, the "readier" or better prepared they are to move on (Dinisman, 2014). Indeed, it has been shown that young people who have developed a positive attitude and have higher expectations of their likely successful outcomes after transitioning, usually achieve their goals (Sulimani-Aidan, 2015). Support from caseworkers, carers, and significant others in preparing the young person physically and psychologically for transition is critical. As Daly (2012) summarised: "The importance of adequate planning and access to both practical and emotional support to facilitate a gradual transition from care and the need to fully involve young people in the leaving-care process are emphasised" (p. 309).

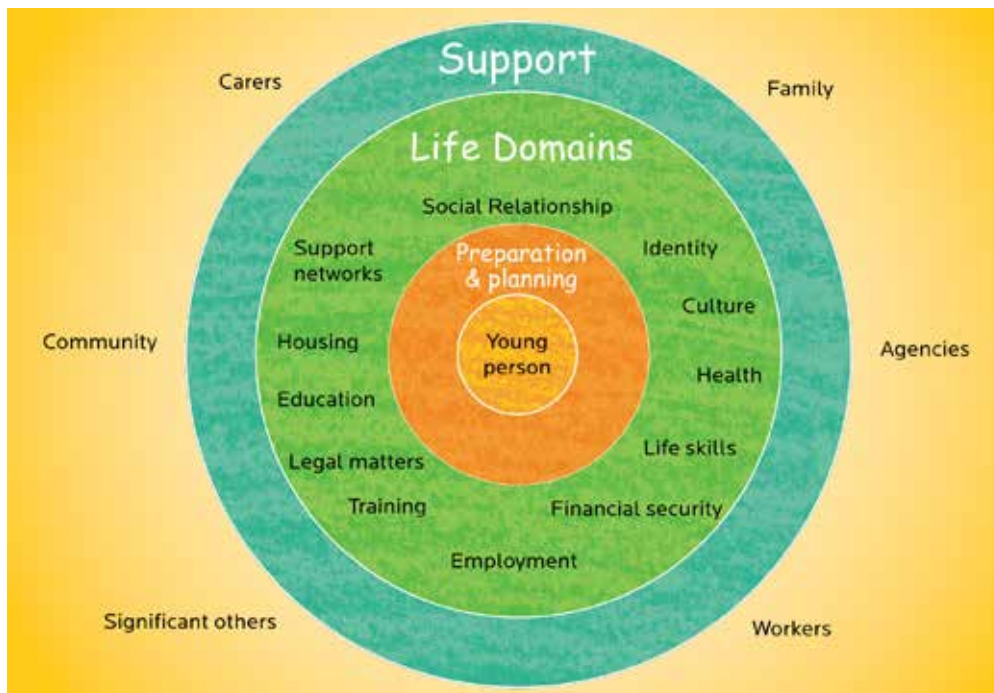


Figure 1. Cover of *Transitioning from out-of-home care to independence: A nationally consistent approach to planning* published by the Department of Families, Housing, Community Services, and Indigenous Affairs, 2011b.

1.5 Genesis of the Go Your Own Way Project: CREATE's Action Research

Since its inception, in 1999, as a systemic advocacy organisation representing the views of children and young people in out-of-home care, CREATE has been concerned with suggesting improvements to make the care experience better, based on information gleaned from the children and young people who have direct involvement with the system (McDowall, 2016b). Studies have focused on diverse but relevant topics related to care including homelessness (McDowall, 2010), participation (McDowall, 2013b), sibling placement (McDowall, 2015), and connection to culture by Indigenous young people in care (McDowall, 2016a), as well as a national survey of the experience of young people within the Australian out-of-home care system (McDowall, 2013a).

Since 2008, a major focus of CREATE has been transitioning from care. The first Report Card on the subject (McDowall, 2008a; McDowall, 2008b) suggested that there were serious issues that needed to be addressed in the various jurisdictions, one being the significant variability observed in policy and procedures across the states and territories.

This study led to a larger more rigorous review (McDowall, 2009) in which 471 young people (275 about to age out of care; 196 who already had transitioned) were surveyed about their aspirations, for one group, and reality for the other regarding an independent existence. A major finding of this work, that raised concern, was the observation that only 34% of the in-care group and 40% of the post-care group knew of having a leaving-care plan at any stage of completion. Given that, even in 2009, legislation in all jurisdictions required a transition plan to be prepared for all those leaving statutory care, this result showed that action was needed to improve planning for

many young people about to leave care to help them have a more positive future, but also to comply with the law.

CREATE decided to try to change the planning behaviour of three key groups; the young people themselves, their caseworkers, and their carers by employing an action research methodology based on a social marketing intervention (McDowall, 2011). Beginning in March 2010, young people in care over the age of 15 years (the age when planning should have commenced, based on the National Standards) were sent a collection of marketing material focusing on planning. They were given information sheets, flyers, and brochures, but most importantly they received a calendar that, month by month, reminded them of the advantages of having a leaving care plan, and what they could do to obtain one. Caseworkers received emailed messages, posters to place on office noticeboards, and visits from CREATE staff with the invitation to "have a break on CREATE" and enjoy a cup of tea and biscuits while they reflected on the importance of supporting the young people for whom they were responsible through their planning process. Carers also received newsletters outlining the campaign, and presentations were given at all the major foster-care conferences throughout the country.

Part way through the 12 months over which the campaign was conducted, reminders were sent to the various groups, with the young people being given a collection of essential contact details on a fold-up card they could keep in their wallets. At the end of the intervention period, an evaluation was conducted to determine whether or not, after all the attention directed to the planning process, the number of young people with a leaving-care plan had increased. After the considerable effort involved in the project, 31% of the 605 young people in the sample reported having a plan; for the 193 of those who were in the 17 years age

group, and about the exit the system, 44% knew about their plan.

It was thought that perhaps not enough time had been allocated to enable the necessary behaviour changes to take effect; the evaluation component was implemented too soon. However, in the national survey CREATE conducted in 2013, questions were again asked about the incidence of leaving-care planning. Here again, of the 15–17 year age group, around 33% reported being aware of a personal transition plan. Little has changed over the last eight years in ensuring that young people leaving care have considered plans for their future.

1.6 Go Your Own Way Project

The current attempt on CREATE's part to ensure more young people transitioning are better prepared for their life ahead revolved around the *Go Your Own Way* resource. Review of the previous approaches suggested that too much might have been expected of the young people without having anything tangible to act as a catalyst to facilitate the necessary interaction between them and their caseworkers that is the precursor to plan preparation. Hence it was proposed that, if young people had in their possession a planning template or checklist that caseworkers and carers also knew about, then this might work as the necessary focus to achieve more satisfactory planning outcomes. Young people could think about the content of the Kit, discuss it with carers and caseworkers, and in working through the topics, produce a comprehensive plan addressing their individual needs.

When commencing this project in 2013–2014, CREATE also was responding to an initiative proposed in the Second Three-Year Action Plan developed under the *National Framework for Protecting Australia's Children* (Department of Families, Housing, Community Services, and Indigenous Affairs [FaHCSIA], 2012) that called on parties to:

Integrate support for young people leaving care that is tailored to their individual needs and builds on a lifespan approach, including the Transition to Independent Living Allowance and State and Territory leaving care packages for care leavers. (p. 19)

The *Go Your Own Way* Kit became a mechanism for achieving consistency in preparation for transitioning, and had the potential to enable more young people to develop more comprehensive and relevant transition plans. The following evaluation looks at whether this potential was realised?

The **Go Your Own Way Kit** became a mechanism for **achieving consistency** in preparation for transitioning, and had the potential to **enable more young people to develop more comprehensive and relevant transition plans.**

method



create
FOUNDATION

Go Your Own Way

INFO KIT

TFC
JOURNAL

TRANSITION
INSPIRE
GROW
SKILLS
EMPOWER
POWER
STRENGTH
CHANGE

2.0 Method

2.1 Stage 1: GYOW Kit Production and Distribution

2.1.1 Kit Contents

All state and territory governments throughout Australia were asked to support the production of a resource that would provide those aging out of the care system with necessary information, guidance, and support for mapping their immediate futures once their statutory orders ceased at 18 years. CREATE began by reviewing, in consultation with young people, those leaving care packages that already were being used throughout Australia. Young people determined what they thought were the most useful components and added some extra features to produce a contemporary resource that should meet the needs of most care leavers. Young people decided to call this package the *Go Your Own Way (GYOW) Kit*.^a

Each Kit contained items that were considered likely to be of value to those transitioning, including the compendium enclosing the key documents, a USB flash drive with the most current state-based information, a journal for recording personal details, and the colourful satchel in which everything was stored. However, the most important element was the *GYOW Info Kit* workbook that contained a checklist designed to help the young people identify where they might need more help and support in the areas of Identity; Education and Training; Employment and Job Searching; Money; Health and Well-being; Housing and Accommodation; Life Skills; Relationships; and Legal Rights and Responsibilities (see Appendix A for a link to the current *GYOW Workbook*). The Kits also included a letter to the young person's carer and a flyer explaining the purpose of the kit, and suggesting possible actions the young person

could take to get the most out of the resource (see Appendix B for examples of this documentation).

Governments contributed by funding the acquisition of the Kit components; they also were given the opportunity to review and sign-off on the final Kit contents. CREATE organised packing the satchels in each state and territory. Although it is recommended that planning for leaving care should begin at 15 years (see *National Standards for Out of Home Care*; Department of Families, Housing, Community Services, and Indigenous Affairs [FaHCSIA], 2012), as an introductory exercise it was planned to provide a Kit for each 17 year old in 2014 who was intending to age out of the system in 2015. This would give them and their caseworkers the opportunity to work together to identify the support needed in each case and produce a clear leaving-care plan that would guide the young person's transition to independence.

CREATE relied on governments to indicate how many Kits had to be produced in each state and territory. Table 1 shows the number of Kits funded by jurisdictions that were to be distributed to 17-year-old care leavers.

2.1.2 Kit Distribution

Initially, CREATE planned to obtain, from the respective governments, the contact details for all the young people for whom Kits had been produced, and then organise the distribution of Kits directly to the intended recipients. Unfortunately, representatives from the governments thought that policy stipulations precluded the sharing of contact details with CREATE, because of privacy concerns, even though CREATE had been funded by departments to produce the Kits. Therefore, an alternative, acceptable method of Kit allocation had to be found. Most jurisdictions opted to

^a This name already had been used for the transition resource that had been distributed in Queensland since 2010 (see Appendix F).

nominate a distribution service to which CREATE sent the Kits, and the governments supplied mailing addresses for the young people (see Table 1). ACT, SA, and WA required that Kits be sent to department offices from where they would be given to

young people by caseworkers. WA also was different from other jurisdictions in choosing to provide Kits for only 60 young people, rather than all eligible care leavers. A total of 1961 Kits were prepared for distribution.

Table 1: Number of Go Your Own Way Kits Produced for Distribution by the Described Method in Each Jurisdiction

Jurisdictions	Number	Method of Distribution	Date of Distribution
ACT	58	Sent to department for subsequent distribution	11 March 2014
NSW	773	Mailed to young people from distribution centre	18 August 2014
NT	52	Mailed to young people from distribution centre	28 April 2014
QLD	459	Mailed to young people from distribution centre	11 April 2014
SA	163	Sent to district offices for distribution by caseworkers	2 April 2014
TAS	54	Mailed to young people from distribution centre	25 March 2014
VIC	342	Mailed to young people from distribution centre	28 April 2014
WA	60	Sent to department for distribution by caseworkers	11 March 2014
TOTAL	1961		

GYOW Kits were ready to be sent out in March 2014. However, in that month, information for distribution (i.e., names and addresses of young care leavers) was available only from ACT, TAS, and WA. The other states and territory were able to provide the details by the end of April, except NSW where distribution was not completed until August 2014.

It was proposed that, six months after young people received their Kits, CREATE staff would make follow-up contact to check that they were aware of all items in the package, if they had any questions, and if they had talked with anyone about how to use the resources. Because of the distribution process that had to be followed, CREATE had no control over whether GYOW Kits were provided to all young people entitled to receive them. The names and contact details of recipients also were unknown. Therefore, it was not possible to speak with all young people about how to utilise their Kits. CREATE had to rely on caseworkers interacting with young people to maximise the effectiveness of the resource. It seemed most productive for CREATE to direct its primary effort to the next stage of the project: the GYOW Kit Evaluation.

CREATE did attempt to make interim contact with the required age cohort to gauge their interest in participating in a future evaluation of the GYOW Kits. Governments undertook to send letters to all young people for whom Kits had been prepared notifying them of the project, and asking them to contact CREATE if they were interested in participating. In addition, NSW, QLD, and NT governments allowed CREATE staff to call 17-year-olds listed on their official databases from departmental offices to determine their interest in being part of the project. VIC and TAS supplied names and addresses of all young people in the age cohort, but no telephone numbers. CREATE wrote to these

young people inviting them to contact the local office if they were interested, but the response was minimal. SA gave details of service centres and names of caseworkers who could be contacted. ACT and WA could not provide any further information about Kit recipients.

2.2 Stage 2: Evaluation

The GYOW Kits were created as a resource to aid transition planning. Therefore, it was important to ensure that the young people had sufficient time to allow planning to occur and to have an opportunity for the plan to be implemented in their interactions as an independent person. One problem with CREATE's previous "What's the Plan?" campaign (McDowall, 2011) was that it was evaluated after only 12 months, which may not have provided sufficient time for the necessary meetings and discussions to take place between caseworkers and young people. For this study, it was planned to allow at least 18 months to elapse before evaluation. This would include the 12 months while the young people were still in care, and some time after their orders ceased for them to determine the usefulness of their plan.

2.2.1 Ethics Approval

Approval for conducting this study was obtained nationally from the Bellberry Human Research Ethics Committee (Application Number: 2015-08-609; Date of approval: 04-11-2015). Subsequently, ethics approval was required by, and obtained from each state and territory government. Unfortunately, when granting ethics approval for the project, all governments indicated that they would be unable to provide any contact details for the young people because at that stage they would have aged out of care and current records were not retained.



The GYOW Kits were created as a resource to aid transition planning.

Some confusion existed in ACT where, although Kits were sent to the department for distribution, and the Office for Children, Youth and Family Support acknowledged receipt of the Kits, the Executive Director subsequently indicated that since “only a small proportion of young people of those originally identified, actually accepted the Kit” the department decided “not to release such limited participants details” to CREATE (B. Mitcherson, Executive Director, personal communication, 20 April, 2016). Based on this information, it did not seem appropriate to include ACT young people in this study.

Data collection began in February 2016, and continued until May 2016 to allow for the delay in obtaining approval from some states. It was clear that all available methods of contacting the relevant young people had been exhausted within that three-month window.

2.2.2 Participants: Young People

2.2.2.1 Contact and sampling. Since the government departments ultimately controlled the distribution of GYOW Kits to the young people eligible to receive them, CREATE hoped that each jurisdictional government would be able to provide the last known contact details, including telephone numbers, for the young people to whom Kits had been sent. But as departments had indicated (see Section 2.2.1 Ethics Approval), this was not possible.

The number of care leavers able to be reached using departmental information from the interim contact was too low to produce a large enough sample to give reasonable confidence in the results. Fortunately, CREATE maintains a database of the contact details of all children and young

people who joined *clubCREATE*^b while they were in care, and retains these records until the young people reach 25 years of age (unless the members choose to opt out). Currently, there are 14,494 members, of whom 2770 are over 18 years and 1047 are within the age group eligible to receive GYOW Kits. However, at the time of commencing the study, only 668 of these members had telephone numbers recorded that would enable them to be contacted directly to invite their participation in the study.

CREATE also used email within its network of sector contacts, and social media (Facebook, Twitter) to send messages about the project and invite the participation of those young people for whom names and/or email addresses had been provided. Anyone of the cohort who was interested in sharing his/her views on the topic could call the local CREATE office to be interviewed.

Table 2 records the number of young people approached to participate in this evaluation, and the responses received by interviewers in the various jurisdictions. Young people were categorised broadly according to whether or not they could be contacted, and then whether or not they agreed to participate. Those who “could not be contacted” included young people whose phone had been disconnected or who had changed location without a forwarding address, while “Did not respond” referred to those for whom a message was left with carers, housemates, or on an answering machine, but no reply was received.

Towards the end of the data collection period, to boost the number of respondents, the interview was converted to an online survey using the same questions as in the interview.

^b Children and young people are entitled to join *clubCREATE* on entering the out-of-home care system. As members, they receive information about events for young people that might be of interest to them that are happening in their state or territory. They also learn about CREATE’s activities, receive a magazine every two months, and are sent a customized birthday card to mark their special occasion.

Again, email, text, and Facebook were used to send invitations to participate to young people who were known by name or other details (provided by departments), and who had not responded via any other medium. These young people also were forwarded a unique username and password that they could use to access the survey anonymously on line, if they found that more convenient than calling for an interview.

It is important to note that even for those who completed the interview, considerable effort was often expended by CREATE staff in achieving that result. An example of the difficulties encountered in the process of conducting these interviews can be seen in Appendix C. It was decided by the research team that at least four attempts at contact would be made at different times using a combination of available media (e.g., telephone, email, Facebook, mail) before a young person was deemed unable to be found.

Table 2: Number and (Percentage) of Young People Approached to Participate for Whom Contact Information Was Available and the Outcome by Jurisdiction

Outcome of Approach	NSW	NT	QLD	SA	TAS	VIC	WA	TOTAL
Could not contact	75 (32.6)	13 (31.0)	187 (42.6)	92 (47.7)	14 (26.4)	43 (38.7)	22 (28.2)	446 (38.9)
Did not respond	23 (10.0)	9 (21.4)	126 (28.7)	21 (10.9)	9 (17.0)	18 (16.2)	9 (11.5)	215 (18.8)
Declined to participate	40 (17.4)	0 (0.0)	23 (5.2)	33 (17.1)	8 (15.1)	8 (7.2)	12 (15.4)	124 (10.8)
Incomplete / Withdrew	6 (2.6)	4 (9.5)	13 (3.0)	10 (5.2)	3 (5.7)	2 (1.8)	1 (1.3)	39 (3.4)
Completed Interview	86 (37.4)	16 (38.1)	90 (20.5)	37 (19.2)	19 (35.8)	40 (36.0)	34 (43.6)	322 (28.1)
Total Directly Approached	230 (100)	42 (100)	439 (100)	193 (100)	53 (100)	111 (100)	78 (100)	1146 (100)
Sent Username and Password	44	3	0	4	16	26	9	102
Completed Online	7	3	0	4	1	24	8	47
Total Completed	93	19	90	41	20	64	42	369

2.2.2.2 Observations on sampling.

The data reported in Table 2 (particularly when related to Table 1) raise a number of issues. From the government data guiding the production of GYOW Kits, the total number distributed throughout Australia for the identified cohort was 1961. Following substantial effort on behalf of CREATE staff, contact information for 1146 of these was located, representing 58.4% of the 17-year-olds. It is of great concern that the other 815 young people who, only 12 months ago were in the care of the state, now are listed as having their whereabouts unknown. It would be unusual for effective parents to sever all connections with their children when the young ones left home; why is that considered appropriate behaviour for the “corporate parent”?

In addition, an average of 38.9% ($n = 446$) of those for whom contact information was available could not be located (see Table 2 for the range of

percentages across jurisdictions). These young people had changed their address and/or telephone number and email; more information is needed to understand why such significant changes were made, and the impact of these on the individual’s identity and networking capacity. The 18.8% ($n = 215$) who did not respond to messages left for them either did not receive the message or did not feel it was worth being involved in the study. It is reassuring that a relatively small number (10.8%, $n = 124$) actually declined to be involved when spoken to one-on-one.

Because of the small, known population of care leavers^c ($n = 1961$, see Table 1), theoretically it should have been possible to perform a census of the total population. Clearly, based on the data documented in Table 2, this was not achieved. What was obtained was a purposive sample, acquired by a

Table 3: Confidence Intervals Applying to Results from Jurisdictions Based on Achieved Sample Sizes

Jurisdictions	Population	Sample	CI (±%)
NSW	773	93	9.6
NT	52	19	18.6
QLD	459	90	9.3
SA	163	41	13.4
TAS	54	20	18.0
VIC	342	64	11.1
WA	60	42	11.7*
Overall	1961	369	4.6

* For this estimate, the relevant population of care leavers from WA in 2015 was assumed to be 100, based on AIHW (2016) data.

c It is assumed that the number of GYOW Kits commissioned by governments will represent closely the number of young people transitioning at that time. There will be a slight difference in WA where only 60 Kits were requested for an estimated 100 young people likely to be “aging out” of care, based on data from Australian Institute of Health and Welfare (2016) showing that, in WA, 180 of those 15–17 years were discharged from care in 2014–2015.

combination of volunteer and snowball sampling (Gray, 2009, p.153). The numbers of completions in some jurisdictions were low (e.g., NT and TAS), resulting in less confidence applying to findings from these areas. However, the total sample size is adequate for evaluating overall performance of the care system in Australia. Table 3 indicates the confidence intervals able to be claimed for findings from each jurisdiction based on the sample sizes.

2.2.2.3 Demographics. Using all the approaches listed above, 369 young people contacted agreed to participate in this research: 322 responded to the structured interview conducted by telephone (with a few sessions face-to-face), and 47 completed the online survey. At the time of participation, 82% ($n = 304$) of respondents were 18 years old while 18% ($n = 65$) had turned 19. Various other demographic details were recorded for these young people. Table 4 records the distribution of the sexes over the various cultural groups. Overall, 50.9% of the sample were female; 22.8% were Indigenous and 6.8% were from other cultural groups, including four Asian, three African, three European, two Middle Eastern, four Maori, and one young person

from PNG (eight did not state which culture). The proportion of Indigenous respondents is a little lower than the percentage of 15–17 year-olds in care who are Indigenous (28.2%).

Of the 369 respondents, 24.4% ($n = 90$) reported that they experienced a disability. Three did not specify which, but the variety of disabilities listed by the others is presented in Table 5. The most common (29.9%, $n = 26$, of those with disabilities; 7% of the total sample) was Specific Learning Disability (including ADHD) followed by Intellectual Disability (26.4%, $n = 23$; 6.2% of sample). Overall, 6.8% of the sample ($n = 25$) experienced multiple disabilities. It was encouraging that 62.2% of those claiming a disability were receiving appropriate support. These young people with a disability judged that their condition did not preclude their involvement in this study. In the rare situation where a young person who was contacted had multiple or severe disabilities, the carer explained the situation and these young people were included in the Declined to Participate category.

Table 4: Distribution of Participants by Sex and Culture

Sex	Female	Male	Unsure
CULTURE			
Indigenous	44	40	0
Other Culture	15	10	0
No special group	129	128	3
Total	188	178	3

Table 5: Range of Disabilities Experienced by Participants in this Evaluation

Disability	Number	%
Intellectual	23	25.6
Specific learning (ADHD)	26	28.9
Autism	12	13.3
Physical	6	6.7
Neurological	3	3.3
Vision	3	3.3
Hearing	4	4.4
Speech	1	1.1
Psychiatric	9	10.0
Unspecified	3	3.3
Total	90	100.0

Table 6 indicates the highest level of education attained to date by the respondents. Two had not finished primary school, but it was encouraging that 46.9% reported having completed year 12, compared with data from previous CREATE research showing only 35.3% had achieved that goal (McDowall, 2009).

Even though respondents were at least 18 years of age, 22.0% ($n = 81$) indicated that they considered they were still in care. Table 7 shows the current living arrangements for respondents, comparing those still in care with those post care. As expected, most of the former group is in Foster and Kinship care (53.1%), with 14.8% in semi-independent supported accommodation, and 11.1% living alone (self-placed?). By comparison, of the 288 in the post-care group, 33% are living with carers or relatives, while 42.7% are living independently (with

17.4% of those living alone). The number who reported being homeless was lower than documented elsewhere (e.g., Crane et al., 2013), however this is likely to be influenced by the fact that this sample comprised young people who could be contacted.

In addition, respondents gave information about the age they entered care, and the length of time (in total) they had been in the care system. The range of ages is shown in Figure 2. While a slightly greater number entered between ages 3 and 4, and the smallest number came into care as babies, the distribution across other age groups was consistently around 10%. The largest group of respondents (13.5%) had been in care for most of their lives, with only 8.5% having been in the system for less than 3 years (see Figure 3).

Table 6: Highest Educational Level Attained by Participants

Level	Number	%
Did not complete Primary School	2	0.5
Completed Primary (Yr. 7)	18	4.9
Completed Yr. 10	146	39.6
Completed Yr. 12	173	46.9
TAFE Certificate	30	8.1

Respondents also were asked about whether or not they had children, and if so, were they living with them. Of all the young people, 7.6% ($n = 28$) reported having at least one child

(three of these parents were still in care; 19 were females and nine were males). Twelve of the females and four males had their children living with them.

Table 7: Current Living Arrangements for Respondents

Location	In Care	%	Post Care	%
Carer	23	28.4	49	17.0
Relatives	20	24.7	46	16.0
Birth parents	2	2.5	21	7.3
Siblings	2	2.5	12	4.2
Friends	3	3.7	34	11.8
Residential	1	1.2	5	1.7
Semi-Independent	12	14.8	15	5.2
Renting with others	4	4.9	39	13.5
Living alone	9	11.1	50	17.4
Youth Detention	0	0.0	2	0.7
Homeless	1	1.2	8	2.8
Missing data	4	4.9	7	2.4
Total	81	100.0	288	100.0

As well as investigating current living arrangements, the interviewers asked respondents what type of placement they had lived in when last in care. Table 8 indicates that most young people had been placed in Foster Care, while a greater proportion had lived in residential care than is reported in the care population.

Of the 331 who responded to the question regarding what type of agency or organisation provided most support to them while in care, 49.8% indicated it was a government department, 33.5% named a

Placement stability while in care also was a factor documented for each respondent since it was a major concern when the *National Standards* in out-of-home care were established (Department of Families, Housing, Community Services, and Indigenous Affairs [FaHCSIA], 2011b), and has been identified in previous research as a predictor of long-term difficulties for those leaving care (see Osborn & Bromfield, 2007). Young people reported on the number of placements they had experienced over a five-year period in care; 47.7% had lived in one or two placements (an indicator seen

Table 8: Distribution of Respondents in Specified Placement Types When Last in Care

Placement Type	Frequency	%
Foster Care	143	40.1
Kinship Care	75	21.0
Residential Care	60	16.8
Permanent Care	4	1.1
Semi-independent Supported Accommodation	32	9.0
Independent Living	36	10.1
Other	7	2.0
Total	357	100.0

non-government organisation (NGO), and 16.6% were not sure. NGOs played the greatest role in NSW and VIC as indicated by 43.6% and 50% of respondents in those states respectively. Since most of the young people had left care, contact with caseworkers was not common; however, 45.7% ($n = 37$) of those still in care reported having a caseworker, with 58% of these contacting the worker at least fortnightly.

as acceptable in the *National Standards*). Table 9 presents the full distribution; three respondents claimed to have been moved over 40 times.

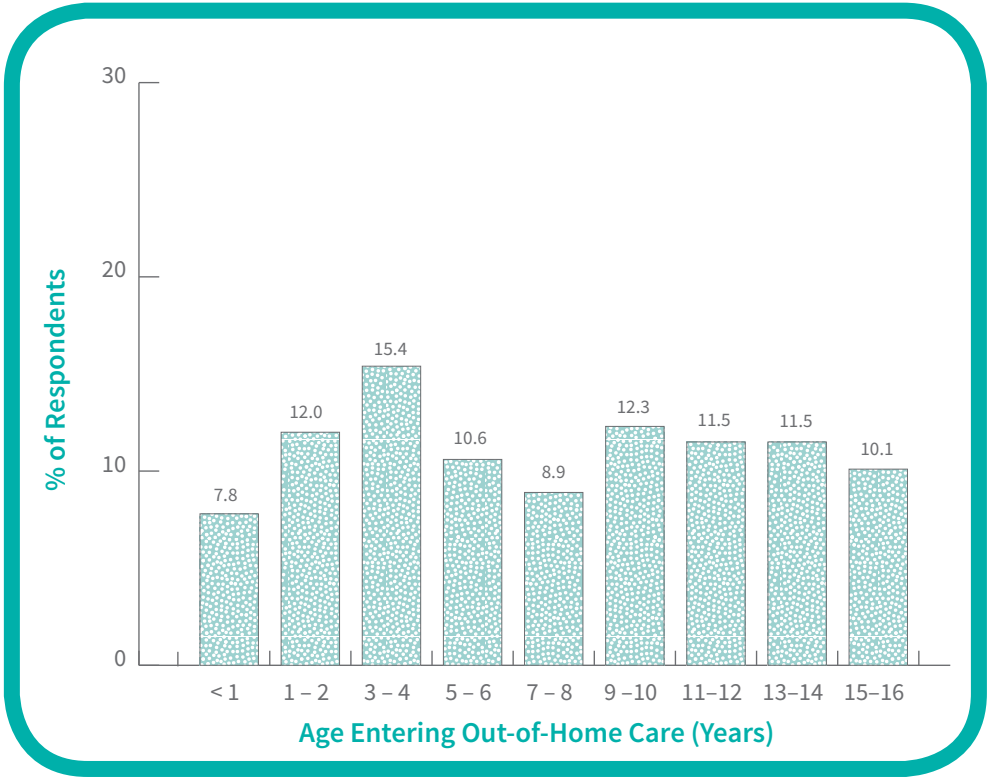


Figure 2. Percentage of respondents who entered out-of-home care at the ages indicated.

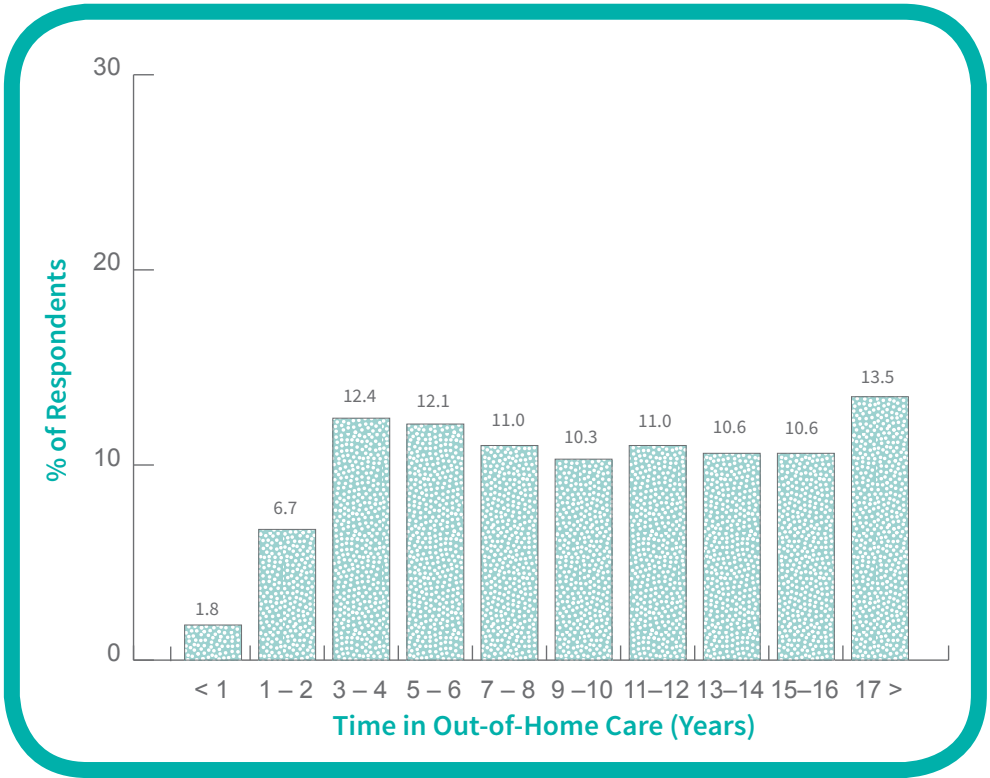


Figure 3. Percentage of respondents who indicated they had spent the various amounts of time in out-of-home care.

Table 9: Number and Percentage of Respondents Experiencing the Designated Number of Placements over Their Last Five Years in Care

Number of Placements	Number of Respondents	%*
1 – 2	166	47.7
3 – 5	98	28.2
6 – 10	51	14.7
11 – 20	22	6.3
21 – 40	8	2.3
40 >	3	0.9

* Twenty-one young people did not complete this question.

2.2.3 Materials

2.2.3.1 Young persons' interview. In an attempt to maximise response rate through increasing rapport with respondents, it was decided to conduct the evaluation as a structured interview, by telephone or face-to-face. It was expected that, because the sequencing through the interview was conditional based on responses to certain binary questions (e.g., Do you know if you have some form of official transition-from-care-to-independence Plan?; Did you receive a *Go Your Own Way (GYOW)* Kit to help with your planning for independence?) four different pathways could be followed by respondents: (a) those respondents who had a Plan and received a GYOW Kit; (b) those who did not have a Plan, but had received a Kit; (c) those who have a Plan but did not receive a Kit; and (d) those who did not have a plan and did not receive a Kit.

To assist interviewers with a mechanism for working through the script and recording responses, all questions were entered into Survey Monkey.

Sections included items gathering information about Demographics, Disability, Children, and past and current Care Experience. Questions also focused on the Planning process, and reactions to the usefulness of the GYOW Kit in Plan preparation, as well as gathering data about how confident respondents felt, and what support they would seek when dealing with a variety of life experiences. The full interview script and questions are included in Appendix D.

2.2.4 Procedure

Young people for whom telephone numbers had been obtained were called by CREATE staff who explained to them what the project involved and asked if they wished to participate. Staff were experienced in communicating with young people, and were given specific training in administering this structured interview. They emphasised to interviewees that: (a) responses were anonymous and confidential; (b) respondents could stop at any time if they didn't want to continue and their answers would not

be used; (c) all information would be stored securely and not shared with others, unless something was revealed that raised concern about the participant's safety or the safety of another young person, in which case relevant authorities would be notified; and (d) non-identifiable comments would be recorded and may be used in reports, publications, and for presentations by CREATE. If young people agreed to continue and completed the interview, it was deemed that they had given informed consent. Contact numbers of the researchers, CREATE, and Kid's Helpline were provided so that young people would have contacts if they felt the need to debrief after the interview.

CREATE staff in each state and territory asked the questions of the young people and typed their responses into the online survey. This proved to be an efficient method in that it avoided double handling of the

data (avoiding later computer entry of information recorded as hard copy at the time of interview), and allowed the data to be collected and prepared for analysis automatically. Data files were exported to Excel and imported for analysis into IBM SPSS v23 (for Macintosh operating system).

No personal data regarding the respondents were retained with the information they provided when interviewed. However, to thank them for taking the time to share their experiences with CREATE, respondents were offered the option to enter the draw for prizes (including four \$100.00 vouchers in the larger jurisdictions and two in the smaller, along with a grand national prize of an iPad Mini tablet). If they chose to enter the competition, their details were recorded on a separate spreadsheet so that there was no connection between their personal details and response data.



results

3.0 Results

3.1 Data Recording

This study involved a mixed-method design (Creswell, 2009) including questions evoking both quantitative and qualitative responses. Items involving ratings, where appropriate, used 6-point unipolar scales, typically in the form 1: Not at all; 2: A little; 3: Somewhat; 4: Reasonably; 5: Quite; and 6: Very. Other numerical examples comprised frequency measures of categorical data. For many questions, respondents were given the opportunity to provide extra open-ended comment to clarify information obtained in a quantified form.

3.2 Issues when Transitioning from Care

Before beginning the evaluation of the GYOW Kits and discussing transition planning in detail, interviewers asked young people how worried they were about transitioning from care to independence, and what their concerns, if any, might be. When rating their level of concern on the 6-point scale (1: Not at all; 6: Very), 36% ($n = 129$) of those who responded to this question ($n = 358$) indicated they were not at all concerned about transitioning. However, 25.4% ($n = 91$) were at least “Reasonably” concerned ($M_{Concern} = 2.6, SD = 1.6$). The key issues raising concern for young people are shown in Table 10.

Table 10: Number and Percentage of Respondents Indicating They Were Worried about the Issues Listed

Concerns	Number	%*
None	113	24.8
Finance and Budgeting	81	17.8
Housing	63	13.8
Being Alone	32	7.0
Maintaining Self	31	6.8
Relationships	26	5.7
Lack of Support	22	4.8
Uncertainty	18	4.0
Getting Employment	17	3.7
Lack of Planning	9	2.0
Other	43	9.5
Total	455	

* Percentages total more than 100.0 because multiple selections could be made.

For those who did express some concerns, the most common related to finance and budgeting.

A total of 352 young people volunteered comments regarding things that were worrying them about transitioning, resulting in 455 concerns being registered (some respondents mentioned more than one concern). One quarter of the comments were by young people who reported having no worries about the transitioning phase of their lives. Some of these clearly were looking forward to a positive future:

Not really as I wanted to live with my current foster family who are my parents now. I have never been more happy! (Female, 18 years)

I wasn't worried because I had a stable home and had already been accepted into Law school. (Female, 18 years)

My workers in resi helped me through everything. I wasn't worried as I've still got contact with them. (Female, 18 years)

However, the claim not to have any concerns did not always indicate that the young person felt supported and that they had their lives under control; rather they believed they were on their own:

No, couldn't wait to get out of out-of-home care. (Female, 18 years)

I didn't get much help from DCP. I mostly did things myself so I wasn't worried. (Female, 18 years)

Not worried because most of my time in care was on the streets and no one helped me at all. (Male, 18 years)

Was not worried; felt like I was already independent at 15 on my own. (Female, 18 years)

For those who did express some concerns, the most common related to finance and budgeting; 17.8% of responses focused on problems obtaining money, and the difficulties encountered in trying to manage it. Young people also were concerned

about finding somewhere to live (13.8% of comments) and about looking after themselves (6.8%) while being on their own (7%). It is interesting that while a relatively large number of respondents were concerned about money, only 3.7% of comments discussed the need to find some level of employment. Many of the opinions expressed showed that it was common for several problems to be experienced simultaneously:

Money, finances, and learning how to do the independent stuff. (Female, 18 years)

Getting a full time job, being able to support myself, and having to pay for everything. Going out in the big wide world. (Female, 18 years)

When you get out of care, you don't have a lot of support. You worry about how you are going to afford stuff, how you are going to pay bills, and how you are going to get support. (Female, 18 years)

Finding a house, and finding a job to pay for the house. (Male, 18 years)

Not being able to find accommodation, pay bills, buy food, survive on so little money. (Female, 18 years)

I was in care since I remember and I never had a stable family or a stable anything. Like I knew how to cook and clean, but I've never been by myself and was scared because I wouldn't have FACS to turn to. Because I seemed I was very independent, nobody tried to teach me anything new like how to budget and pay rent etc. I would have appreciated someone trying to do those things with me. (Male, 18 years)

Money. And then I found there was a grant. I had challenges with Centrelink and finding my way through it, and finding a house and people to move in with. My

caseworker hadn't said or done anything about housing and stuff had happened (my dad who I had lived with for 17 years had just passed away). My caseworker was on leave and by the time I had another caseworker I had sorted out housing out myself – my friend helped me. My caseworker sent me information but left me to follow up myself; I had no idea what I was doing. (Male, 18 years)

I was going through a lot of stress, and in a refuge. I was worried about not finding a place to move. And I had high anxiety and depression and that didn't help. (Female, 18 years)

3.3 Importance of Transition Planning

After asking young people to identify their issues of concern, interviewers checked how important respondents thought it was to have some sort of plan for their future, and with whom they had discussed what might happen after they turned 18 years and they officially moved out of the care system. Although there is a suggestion in the literature that care leavers find planning “anathema” (Hung & Appleton, 2016), many young people in the present study thought that transition planning was important. Overall, 69.2% ($n = 248$) claimed that having some idea of what they might do in the future was “Quite” or “Very” important ($M_{Importance} = 4.8, SD = 1.4$). However, in spite of this, 29.1% ($n = 104$) had not spoken with anyone about what they could expect after turning 18 years.

Caseworkers were the people most respondents approached with whom to discuss leaving-care issues (34.4%, $n = 123$), followed by carers (20.7%, $n = 74$). The remaining 16% were distributed over birth parents, siblings, other family members, and friends.

Only two young people mentioned support from Indigenous communities, and 3.9% ($n = 14$) indicated they spoke with many people including, as well as the above groups, teachers, co-workers, counsellors, and the Public Trustee.

3.3.1 CREATE's Go Your Own Way Kit

3.3.1.1 Receipt of Kits. As explained in Section 2.1.2, the GYOW Kit was developed and distributed to those transitioning from care to aid planning for transitioning. Before attempting to evaluate the Kit's usefulness, it is necessary to determine how effectively the resource was distributed to 17 year-olds aging out of care throughout the country following the various protocols imposed by government departments. The intent was for all eligible young people to receive a Kit.

When respondents were asked if they had received a GYOW Kit, 357 provided information; 51.8% ($n = 185$) indicated that they did receive the resource, while 48.2% did not. As expected, most Kits arrived through the mail (59.8%, $n = 110$), while a reasonable number were distributed by caseworkers (32.6%, $n = 60$). Carers obtained Kits for 10 young people (5.4%), CREATE staff provided one, and the other four respondents were unsure how they came by their Kits. The vast majority had their Kits for at least 6 months (96.7%, $n = 178$), with 88.6% having them for 12 months or more. Only six had received them between one and three months ago (one wasn't sure when).^d

As an indication of the involvement of the states and territory in the distribution of the resources, Figure 4 depicts the proportion of respondents in the various jurisdictions who received a GYOW Kit. These data reveal that TAS achieved the most

^d GYOW Kits were distributed again toward the end of 2015. It is possible that the young people who reported receiving Kits close to when the evaluation was conducted were part of the second wave of distribution.

widespread distribution with 68% of respondents indicating that they received a Kit; greater than 50% was achieved in NSW, QLD, and SA. VIC was conspicuously low at 33%. WA was a special case because only 60 Kits were distributed to an uncertain population of care leavers. However, if this number is assumed to be 100 (as estimated in calculations included in Table 3), it might be expected that if over half the population received a Kit, close to half this sample should have one as well (not just 20%). The observed differences between jurisdictions were statistically significant.¹

3.3.1.2 Reactions to Kit. Young people were asked about their initial reaction to the Kit (whether it was negative or positive) using a 6-point bipolar scale. The Kits generally were well received, with 79.3% ($n = 146$) indicating they felt at least “Reasonably” positive. Comments from young people about the Kits gave some useful insights into their thinking and acting regarding planning. In total, 162 themes were mentioned in comments provided. As can be seen in Table 11, 46.3% ($n = 75$) of statements praised the usefulness of the Kit and its components. A further 14.2% ($n = 23$) found it “cool” and appreciated getting “free stuff” in the

mail. The following examples reflect these views:

When I got the kit, I wasn't thinking about transition very much, but then later on, it became more useful. (Female, 18 years)

All the things became quite useful in being able to help transition into moving on and getting the help for my future as needed, including future study. (Male, 19 years)

It was my first time receiving that kind of package in the mail. (Male, 18 years)

It was pretty cool. It was something different. I never received anything while in care, so it was good to get information. (Male, 18 years)

I wasn't expecting it. It gave me an idea of what to do and how to go about independence, and what I should keep an eye out for, financially and getting a job. (Male, 18 years)

I was curious about what was in it, was glad all the information I needed was in one place. (Female, 18 years)

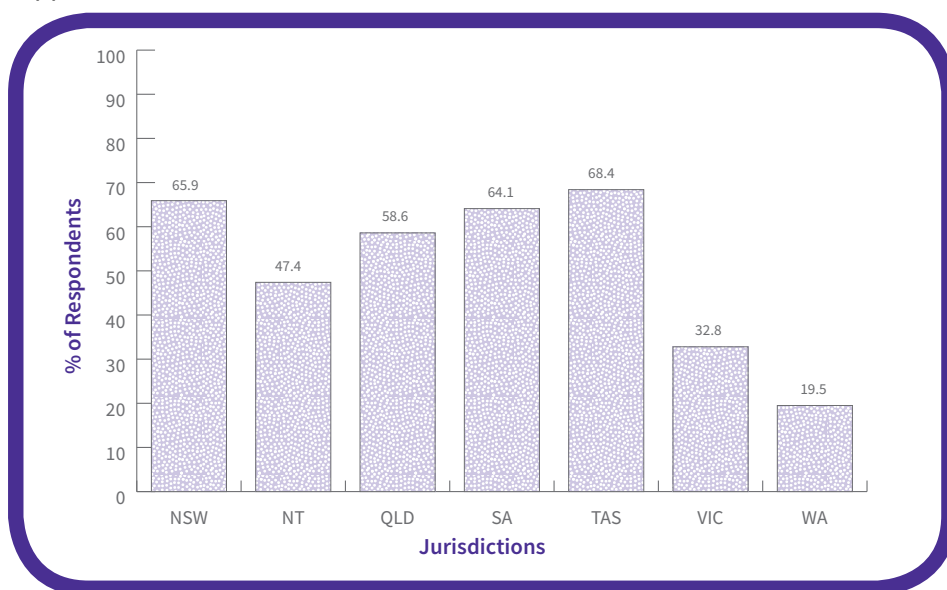


Figure 4. Percentage of respondents who indicated they received a GYOW Kit in the various Jurisdictions.

At the other extreme, 13.0% ($n = 21$) of comments indicated that the young people didn't use the Kits at all, with another 8.0% ($n = 13$) explaining that they didn't know what to do with the Kits. While nine young people felt special to have received the Kit, another six were overwhelmed and worried by the amount of information it contained (although one respondent found the package boring, and another thought it didn't provide enough information).

An indication of why low usefulness scores possibly were given by several respondents can be obtained by analysing with whom the young people discussed the GYOW Kit, and how often they met with caseworkers to plan for their future. Table 12 shows a variety of supporters in a young person's life, and how many of the respondents spoke with these individuals about the Kit. Overall, 30.4% had discussed the Kit with a worker (their own or another

Table 11: Thematic Analysis of Comments about Reactions to GYOW Kits

Reaction	Number	%
Kit components useful	75	46.3
Cool / Free stuff	23	14.2
Interesting material	13	8.0
Felt special receiving it	9	5.6
Felt overwhelmed / worried	6	3.7
Boring / Kit inadequate	2	1.2
Didn't use it	21	13.0
Didn't know what to do with it	13	8.0
Total	162	100.0

When asked specifically how useful they found the Kits as an aid to planning (employing a 6-point unipolar scale, 1: Not at all; 6: Very), 27.7% ($n = 51$) of young people who received them reported their being "Quite" or "Very" useful; 34.3% ($n = 63$) claimed "Somewhat" or "Reasonably" useful; while 38.0% ($n = 70$) thought they were of "Little" or "No" use (the overall rating of $M_{Usefulness} = 3.3$, $SD = 1.7$).

caseworker, or a specialist transition-from-care officer); 26.1% had talked with their carer; 14.1% with a family member (parents, sibling, or other relative); and 11.9% with "Others" including friends, school counsellor, and CREATE staff. However, a relatively large proportion had not spoken with anyone (47.3%).

Table 12: Number and Percentage of Young People Who Reported Speaking with the Designated Individuals About Their GYOW Kits

Person	Number	%*
Carer	48	26.1
Caseworker	45	24.5
Another worker	8	4.3
TFC worker	3	1.6
Indigenous community member	4	2.2
Birth parents	5	2.7
Sister / Brother	10	5.4
Other family member	11	6.0
Friends	8	4.3
Other	14	7.6
No one	87	47.3

*Percentages based on n = 184, the number of those receiving a GYOW Kit who provided comment. Multiple choices were allowed.

Caseworkers comprise a group that is critical in the planning process with care-leavers. When reviewing the number of meetings respondents had with caseworkers, it was found that 48.9% of young people who received Kits contacted these supporters between one and four times to discuss their future. Some respondents estimated they had contact with caseworkers over 20 times during the planning cycle. However, in contrast, 20.1% did not see their caseworkers at all (see Table 13). Comments from young people gave an insight into how they were approaching planning at the time of receiving Kits:

I wasn't really sure what to do with it ... they were just like, "This is for you, leaving care soon, if you want to have a look at it." I didn't really do much with it. Female, 18 years)

Because at the time I didn't really go through it, but now thinking about it, it could have helped to go through the different things. (Male, 18 years)

I wasn't bothered to look at – I was pretty complacent at the time – the plan was for me to stay with my carers and so I didn't think I really needed to do anything. But now situations arose that meant I had to take some action; my carer got really sick and couldn't have me at home anymore. I started planning my transition in the last 12 months, after I had officially left care. (Female, 18 years)

I didn't know what it was. I didn't know what I was supposed to do with it. (Female, 18 years)

It was too much information and it made me more nervous about all the things I was already worrying about. (Female, 18 years)

Wasn't really interested because wasn't ready to think about moving out and "leaving care." (Male, 18 years)

Table 13: Number and Percentage of Young People Who Reported Meeting Caseworkers with the Frequency Indicated

Meeting Frequency	Number	%
1 – 4	90	48.9
5 – 9	27	14.7
10 – 14	11	6.0
15 – 19	8	4.3
20 >	11	6.0
None	37	20.1
Total	184	100.0

3.3.1.3 Usefulness of Kit contents.

As well as being asked about the usefulness of the GYOW Kit as a whole, respondents also were questioned regarding their use of the five main components of the Kits: the Workbook (with Plan checklist); the Journal (Notebook); zipped Folder (compendium); USB Flash Drive; and

the Satchel (blue or red bag containing components). Over 30% of respondents indicated they were not aware of, or did not use the Kit components, excepting the USB containing the most updated, relevant information on transitioning (only 20% did not use this item, see Table 14).

Table 14: Number and Percentage of Respondents Receiving a GYOW Kit Who Reported No Awareness of, or Not Using the Designated Kit Components

Component	Number Not Aware	%*	Number Did Not Use	%*	Total	%*
Workbook	18	9.8	39	21.2	57	31.0
Journal	18	9.8	42	22.1	60	32.6
Compendium	21	11.4	36	19.6	57	31.0
USB	15	8.2	22	12.0	37	20.2
Satchel	19	10.3	39	21.2	58	31.5

* Percentages based on $n = 184$, the number of those receiving a GYOW Kit who provided comment.

The USB appeared to be the most popular component, with 61.2% of people who accessed their Kit rating that item “Quite” or “Very” useful. Table 15 shows these values for all components. A comparison of the

to include food vouchers (15.8%, $n = 9$), which, though beyond the scope of the function of the Kit, shows that a need exists in this group for support with obtaining life’s essentials.

Table 15: Number and Percentage of Respondents Accessing a GYOW Kit Who Reported Finding the Designated Kit Components Quite or Very Useful

Component	Number	%
Workbook	55	43.3
Journal	53	42.7
Compendium	65	51.2
USB	90	61.2
Satchel	71	56.3

mean usefulness ratings (1: Not at all; 6: Very useful) found that the Compendium, USB, and Satchel were perceived to be significantly more useful than the Workbook or Journal.²

3.3.1.4 How to improve the GYOW Kit? For CREATE’s benefit, young people were asked to share any ideas they had for improvements to make the Kits more functional; 157 comments were received. While 15.9% of these indicated that respondents were unsure what to suggest or had not used the Kit, 48.6% reported that the Kits were fine as is, and that nothing needed to be changed.

No you don't need to improve on anything, it's fantastic. (Male, 18 years)

No. It was great. Read from cover to cover while in rehab. It was motivating for me to focus on achieving something when I got out. (Male, 18 years)

Apart from three young people who hoped for rather special inclusions (a car, laptops, and tablets), 54 others provided more achievable suggestions. Sadly, the most common response was

The next most common view, expressed by 12.3% ($n = 7$), was to have someone explain what the Kit was for. This would not have been an issue had CREATE been able to distribute the resource as intended. Information was included in the Kit to assist carers and caseworkers to explain how to use the material, but clearly in some cases this did not happen.

I would find it better if someone had come to and actually spoke with you rather than just receiving a package in the mail. I would rather chat with people. (Female, 18 years)

Two other areas where response clusters occurred related to including more “fun” elements in the Kit (10.5%, $n = 6$) and providing a larger capacity USB (8.8%, $n = 5$).

Have more fun stuff in there like a mini-board game. (Female, 18 years)

Add something a bit more exciting, instead of just receiving it and it's full of paperwork; have

The next most common view, expressed by 12.3% ($n = 7$), was to have someone explain what the Kit was for. This would not have been an issue had CREATE been able to distribute the resource as intended.

something fun or inspirational – like a quote or something ... something to make you realise that transition is not that scary, maybe something from someone a bit older with care experience? (Female, 18 years)

USBs didn't store much; used the notebook and satchel and folder a lot. (Male, 18 years)

Other suggestions, while proposed by only one or two respondents each, will be considered in future editions of the GYOW Kit. These included providing more information about Indigenous issues, budgeting, courses that might be relevant and details of scholarships that are available to support study, mental health services, and Centrelink processes. One young person felt that young people needed to be reminded of their rights in out-of-home care that all governments support. The overall design of the package is being reviewed regularly, but pleasing everyone in this regard will be difficult. Three respondents thought the current version of the workbook was “too pretty” and it needed to be more professional with more text and fewer pictures; another three claimed it was too “business-like” and appeared too much like government publications. CREATE will endeavour to find the happy medium.

3.4 Transition Planning Outcomes

All respondents were asked whether or not they knew if they had some form of official transition-from-care-to-independence Plan (these can have various names in different jurisdictions). A total of 357 replied to this question; 41.7% ($n = 149$) were clear they knew about their Plan, 23.5% did not know anything about a Plan, and 34.7% were unsure. Of those who claimed to be aware of their Plan, 52.7% ($n = 79$) had

a final version of the Plan, 30.0% believed it was incomplete, even at this stage after having left care, and 17.3% were not sure what stage their Plan development had reached. A critical question asked if young people had a copy of their plan, to which 48.0% ($n = 72$) indicated they did, 37.3% did not, and 14.7% were not sure.^e While planning had begun for 6.6% ($n = 9$) of those aware of it before age 15, this process commenced as stipulated in the *National Standards* at 15 years for only 11.3%. However, 32.0% didn't discuss their future seriously until they were 16, and the remaining 50.0% had to wait until they reached 17 years and were just about to leave the care system. No differences were found in the possession of a transition Plan between Cultural groups, or based on the Placement type young people had lived in when last in care.³

3.4.1 Distribution of Plans over Jurisdictions

Figure 5 documents the percentage of respondents in each state and territory who reported being aware of some form of personal transition plan. Again considerable variability was found over jurisdictions. More than 50% of respondents were familiar with their plans in NSW, NT, and WA (recognising that the NT result was based on only 19 observations). Particularly low numbers were found for SA, TAS, and VIC (although again the TAS result was based on only 20 records). This difference between jurisdictions was statistically significant.⁴

3.4.2 Involvement in Planning

It was of interest to explore the level of involvement of all young people and their supporters in the planning process. When asked to rate the extent of their own engagement with planning for their future (1: Not at all; 6: Very involved), 243 young people

^e It is possible that those who were unsure could include some respondents who may have received a Plan but have since misplaced it.

responded. Of these, 28.8% ($n = 70$) felt "Very," 19.8% "Quite," and 14.0% "Reasonably" involved. This number included 49 respondents who were not aware of having a formal Plan, but reported being at least "Reasonably" engaged in planning for their future.

Table 16 reports the number of times young people selected the various forms of contact as indicators of their type of involvement. The most

common form of engagement for young people when planning was in face-to-face meetings with their caseworker. Telephone contact also was popular, more so than emailing or texting, and actually visiting potential support services. Even young people who were not aware of having a transition plan had spent some time talking with caseworkers about their future.

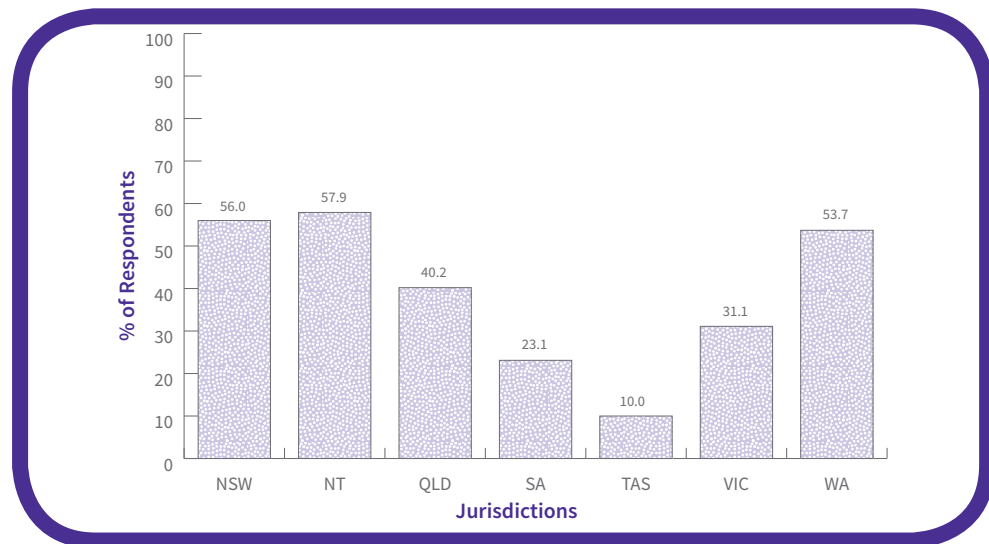


Figure 5. Percentage of respondents who reported they were aware of having a transition plan in the various Jurisdictions.

Table 16: Number of Respondents Using the Forms of Contact Listed When Involved in Transition Planning

Forms of Contact	Number (with Plan)	%	Number (no Plan)	%
Face-to-face meetings with caseworker	127	34.4	52	14.1
Telephone conversations with cw.	55	14.9	25	6.8
Emails / texts with cw.	29	7.9	9	2.4
Visits to support services	30	8.1	9	2.4
Other	10	2.7	0	0

Questions also were posed regarding the involvement of other supporters in helping young people plan for the future. Comparison of mean ratings of the extent of involvement by carers, caseworkers, birth parents, siblings, other relatives, and friends (using the 6-point scale 1: Not at all; 6: Very involved) showed that carers and caseworkers were significantly more helpful than the other groups.⁵ It should be noted that, when the Indigenous group rated the support they received from their Cultural Community members for planning, a low mean rating, comparable to that found for Siblings and Friends ($M_{\text{Cultural Community}} = 2.2$) was obtained (see Endnote 2).

3.4.3 GYOW Kit as an Aid to Planning

An essential question to be addressed in this evaluation is whether or not receiving a GYOW Kit helped increase the number of young people who left care with a plan for their future, preferably in a form that would allow continued reference and would not be forgotten. A cross-tab analysis compared the likelihood of respondents who had received a Kit also claiming that they had a transition plan. Table 17 shows the observed and expected frequencies of respondents in the four categories: Kit and Plan; Kit but No-Plan; No-Kit but Plan; and No-Kit and No-Plan. More young people who received a GYOW Kit also had a transition plan than would be expected by chance. Conversely, more who didn't receive a Kit also didn't have a Plan than was expected by chance.⁶

Table 17: Observed and Expected Frequencies of Respondents Classified by Their Possession of a GYOW Kit and a Transition Plan (Unmatched Data)

		GYOW Kit		
		Yes	No	Total
Yes	Observed	90	59	149
	Expected*	77.6	71.4	
No	Observed	96	112	208
	Expected*	108.4	99.6	

* Based on 2 X 2 Chi-Square analysis; see Endnote 6.

More care leavers who received a GYOW Kit had plans than did those without a kit.

While this result indicates that possession of a GYOW Kit was associated with an increase in the likelihood of a young person having a transition plan, from this analysis it cannot be claimed that a causal link exists. In an effort to clarify this, propensity score matching was used to approximate a controlled comparison.^f These matched groups were then subjected to the same analysis comparing Kit and Plan possession. Now only 117 respondents remained in each of the Kit and No-Kit groups. Even after this rigorous treatment of the data, the same pattern of significance was obtained. Those young people who received a GYOW Kit were significantly more likely to have a Plan than were those who did not receive a Kit.⁷

Figure 6 depicts the relationship between Kit possession and planning for the matched data. Unfortunately, overall, there are still more young people without a Plan than with one. However, the graph shows that more care leavers who received a GYOW Kit had plans than did those without a Kit. Conversely, more who did not have a Kit were more likely to not have a Plan than were those with Kits.

Another factor that would be expected to co-vary with the prevalence of planning would be the number of meetings young people had with caseworkers. It was expected that young people who had a Plan would be likely to have had several meetings with their caseworker to cover all the life domains. For those young people who received a GYOW Kit, a point-biserial correlation was calculated between having a plan and number of meetings with caseworker. A value of $r = .20$ ($p = .008$, $n = 184$) was obtained. While this value is significant (given the relatively large sample), meeting with caseworkers accounts for only 4% of the variance in plan possession. Having a Kit did not appear to be a strong catalyst for instigating planning meetings; the number of meetings may not be critical. It would seem that what happens at the meetings and the outcomes in terms of actions are far more important for young people.

^f As Stuart (2010) explained, “When estimating causal effects using observational data, it is desirable to replicate a randomised experiment as closely as possible by obtaining treated and control groups with similar covariate distributions” (p. 1). Following this procedure (Thoemmes, 2012), the propensity score indicating the probability of receiving a GYOW Kit was estimated using logistic regression. Covariates included in the calculations were Sex, Culture, Age Entering Care, Last Placement, Time in Care, and Type of Placement Agency. Participants then were matched using a simple 1:1 nearest neighbor process with a caliper of .15 of the standard deviation of the logit of the propensity score.

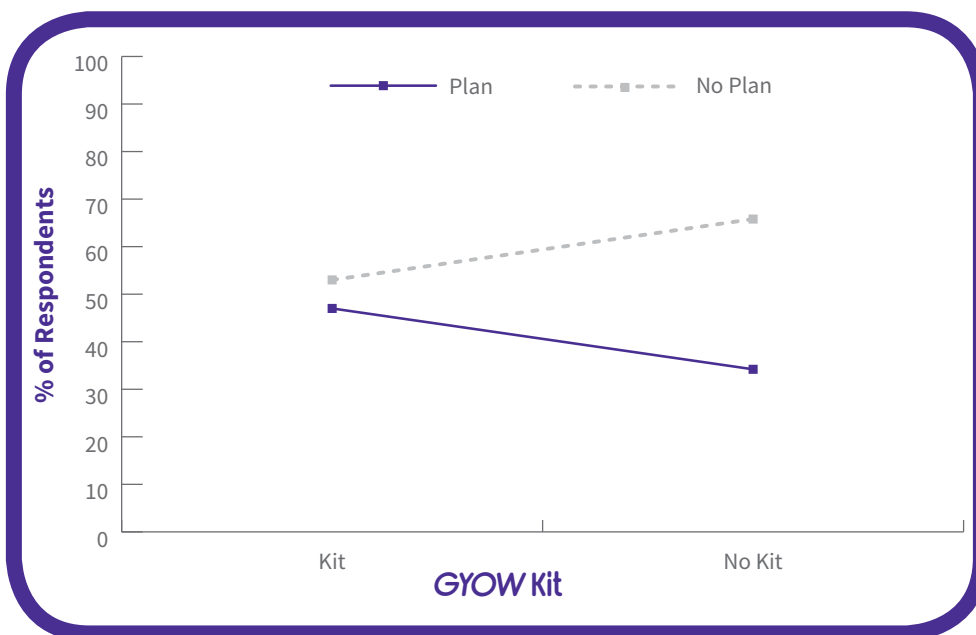


Figure 6. Comparison of percentages of respondents who did or did not receive a GYOW Kit, and who did or did not report being aware of having a transition plan (matched data).

3.4.4 Caseworker Improvement

Respondents were given an opportunity to express their thoughts on what caseworkers could have done to improve the planning process for them. Overall 152 young people provided comment on 184 separate issues. It was somewhat reassuring that 37.5% ($n = 69$) of these were statements that the treatment received from the caseworkers was fine (see Table 18); several volunteered high praise for the caseworkers' efforts:

No. She did everything she could! And above! (Male, 18 years)

No, because she's really a good CSO and is always on top of things. (Male, 18 years)

No, it was pretty straightforward. I had a very good caseworker. (Female, 18 years)

However, more young people were concerned with what could be termed "general practice issues." Here, 41.8% ($n = 76$) of respondents complained that caseworkers needed to improve in a range of behaviours including: take more time with the young people

and to involve them more in meetings and discussions; explain options at these meetings in language young people could understand; start planning earlier; do what they were supposed to do (their job); attend appointments and return telephone calls; try to do things more quickly, avoid unnecessary delays; and develop rapport with young people in a professional relationship. Others mentioned specific assistance needs such as obtaining help with finding accommodation, organising finances, selecting courses, and completing requirements to qualify for a driver's licence. A third category of comments dealt with systemic issues such as the importance of actually having a caseworker; continuity of caseworkers; and the need to have caseworker support beyond 18 years. A few young people just wanted to be left alone, so that they would have nothing more to do with the departments.

Table 18: Number and Percentage of Respondents Who Suggested the Various Improvements to Caseworker Behaviour Supporting Planning

Improvement	Issue	Number	%
Nothing		69	37.5
Practice	Involve Young People more	19	10.3
	Communicate in simple language/explain options	16	8.7
	Start planning earlier	9	4.9
	Take too long to respond	7	3.8
	Do what supposed to do	7	3.8
	Set realistic goals	5	2.7
	Attend meetings/return calls	4	2.2
	Build relationships	4	2.2
	Involve carer more	4	2.2
	Explain TILA	1	0.5
	Show respect	1	0.5
Assistance	Help with accommodation	7	3.8
	Help with driver's licence	4	2.2
	Help with education	3	1.6
	Help with finances	2	1.1
	Help with documentation	2	1.1
Systemic	Have a caseworker	6	3.3
	Continuity of caseworkers	6	3.3
	Continue support beyond 18 years	2	1.1
Leave alone		6	3.3

These issues are illustrated by the following comments:

If they had guided me and provided me ideas on how to make decisions. More meetings, more advice, more warning on how hard it would be to leave care. Advice on housing issues, such as paying a bond.
(Female, 18 years)

Attend the appointments she set for us instead of cancelling them, and actually following through on what was recommended.
(Female, 18 years)

Do their job. Involve me in the planning process, talk to me about the planning process. Start the process at 15/16 years old.
(Male, 18 years)

Talk to me more. Prepare me better for the place I live in now. Tell me more about leaving care; should have given me more time, not just a month before my birthday. (Male, 18 years)

It was all left until the last second. I didn't get my leaving care plan until the week after my 18th birthday. So I would have liked the planning to start sooner.
(Male, 18 years)

One statement seems to capture the range of frustrations experienced by many young people on their transition journey, giving several clues to where caseworkers could assist:

It would have been good to have practical help instead of just meetings. Like coming to places with me, like buying white goods to get quotes, been clear with the budget. Would have been good to have support to figure out Centrelink and dental entitlements; would have been good to find low cost health options. I just don't know. When I was in care they took me to the dental place but now that I've left, how do I do that myself? I didn't

know anything about credit history. I don't know how it works. I wish I had have been told. If you are going to throw a kid out on their own in the world, they need to know these things.
(Female, 18 years)

3.5 Transition Plan Content and Effectiveness

The final section of the interview dealt with an analysis of transition plans that had been completed. First, young people were given a list of issues and asked to indicate if these topics had been addressed in their leaving-care plans. As seen in Table 19, three quarters of the plans prepared did consider housing followed by education (63.8%). Other critical areas, including Employment, access to TILA and Support Services, Finances, Family Contact, and Life Skills, were covered to some extent in from 51.0% to 58.4% of cases. Cultural Support was addressed in 71.8% of cases for Aboriginal and Torres Strait islander young people with a plan (but this number comprises only one third of the Indigenous sample). Surprisingly, areas not well addressed included access to Personal Documentation (49.0% of plans) and the developing and maintaining of supportive Relationships (38.9%). Other issues that were considered in particular plans were specific health needs including dental, obtaining a driver's licence, and parenting advice and support.

Table 19: Number and Percentage of Respondents Who Reported That the Topic Areas Listed Were Addressed in Their Transition Plans

Topic	Number	%*
Housing	112	75.2
Education	95	63.8
Employment	78	52.3
Finances	84	56.4
Life Skills	87	58.4
Family Contact	80	53.7
Relationships	58	38.9
Cultural Support	28	71.8
Personal Documentation	73	49.0
Access to TILA	76	51.0
Accessing Support Services (including health)	80	53.7
Other	13	8.7

*Percentages were based on the number of young people who had indicated they had a plan (n = 149). Cultural support related only to Indigenous young people who had a plan (n = 39).

When asked how easy it had been for them to suggest items to be included in their transition plan, 80.5% (n = 108) of young people with a plan indicated the process had been at least "Reasonably" easy; only 19.5% found any difficulty. The mean rating for ease of suggesting plan content (using the 6-point bipolar scale 1: Very difficult; 6 Very easy) was 4.6 (SD = 1.4), indicating that young people were comfortable raising issues. Reasons given for finding the process easy centred on feeling listened to and supported. Of the 118 comments provided, 39.8% were positive about the planning process, with young people feeling that they could have their say and that they were heard:

They listened to me and showed understanding. (Male, 18 years)

They were very encouraging, always wanted me to put my opinion out there, never put me down. I felt very comfortable. He is very passionate about his job. (Female, 18 years)

I could tell them what it is important to my future, and they would do what they could. (Male, 18 years)

The Department listened to me, and my carers let me decide what I wanted to do when I turned 18. (Male, 18 years)

I felt very comfortable with the people around me, and that I could say what I wanted. (Female, 18 years)

Several young people (15.3%) took responsibility for the part they needed to play in planning and guiding the development of their plan:

*I literally wrote the whole thing.
(Male, 18 years)*

*You got to have the state of mind to be able to say what you want, and know what you want.
(Male, 18 years)*

*Because I asked them what I could get, and what they could help me with. I asked anything, and it would be a "yes" or "no." But kids these days don't know what they can have. It was very easy for me.
(Female, 18 years)*

Difficulties experienced when attempting to raise issues in planning were commented on by 25.2% of young people. Some were concerned that people in authority didn't listen to them, or that they didn't think that the young people knew what was in their own best interests. Decisions sometimes were rushed and choices available were limited. However, again, there were times when respondents admitted they needed to be more proactive if they were to obtain the outcome they desired. The following comments address these concerns:

Because everyone thought I was too young to know what's best for me. But it is my life, and my child's life, and I wanted to have a say, instead of having them tell me what I have to do and not listen to me. (Female, 18 years)

You don't suggest anything. You make the choices based on what your CSO gave you. They picked it. When you're picking from a limited selection and they're not your ideas you don't have a choice. They base it on what suits them, and how they think it works and helps people. The Department just does enough to not be caught out for being slack. (Male, 18 years)

It was very rushed, swapped caseworkers, things got lost. Suggestions needed to be brought up again; people talking over the top of each other, and it got messy. (Male, 18 years)

They weren't flexible when I changed my mind. (Male, 18 years)

I haven't been there much to suggest things. (Male, 18 years)

Several young people (15.3%) were appreciative of the help and advice they were able to gain from key people in their lives, particularly caseworkers and carers. When a strong, respectful relationship was formed between the young person and their caseworker, the planning process seemed to flow smoothly.

My CSO [Child Safety Officer] was very passionate and caring. She treated all of her kids under her files the same way. She went above and beyond. (Female, 18 years)

*Caseworker was awesome.
(Male, 18 years)*

My carer ensured that everything was done that was best for me. My carer constantly talked me through it all. (Female, 18 years)

One young person expressed well what should be the true nature of the transition plan: A living document that needs to be updated regularly, "because I'm still planning my future" as this female respondent observed.

3.5.1 Transition Plan Usefulness

The perceived usefulness of their Plan was assessed by requiring young people to rate (on the 6-point scale 1: Not at all; 6: Very) how well they thought their transition plan would help them access the support services they might require to meet their future needs. The overall mean rating was 3.8 (*SD* = 1.5) indicating a qualified expectation of usefulness

respondents with and without a transition plan. A 2 X 9 (Plan X Domains) mixed ANOVA with repeated measures on the Domains variable found significant main effects for both Plan and Domain, but no significant interaction. Those young people who had a transition Plan reported feeling more confident overall in living independently than did those who did not have a Plan.

Table 20: Number and Percentage of Respondents Who Gave the Various Ratings for Estimating How Well Their Transition Plan Would Help Them Access Services

Rating	Number	%
Not at all	9	6.7
A little	27	20.1
Somewhat	15	11.2
Reasonably	31	23.1
Quite	33	24.6
Very	19	14.2
Total	134	100.0

(“Somewhat–Reasonably”). Table 20 shows the number and percentages of respondents with plans giving each of the ratings. It is clear that the distribution is spread reasonably evenly over all except the lowest score. To determine how well prepared all young people in the sample felt to handle transitioning, whether they had a plan or not, respondents were asked to estimate, again using a 6-point scale (1:Not at all; 6: Very) how confident they were about being able to engage satisfactorily in a variety of essential life domains. Figure 7 plots the mean confidence ratings given by

Furthermore, significant differences were observed in the confidence with which respondents handled the various life Domains. Least confidence was expressed in ability to manage finances, find suitable accommodation and employment. Most felt reasonably comfortable maintaining their social relationships and looking after themselves.⁸

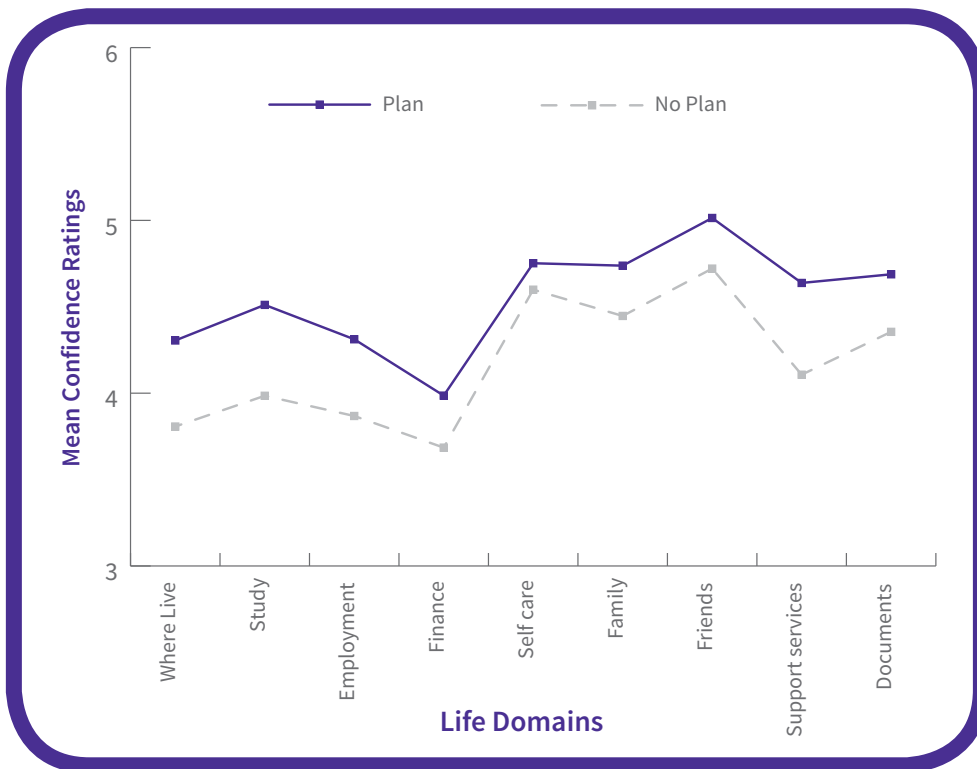


Figure 7. Mean confidence ratings for various life domains reported by respondents who were aware of having a transition plan compared with ratings by those without a plan.

Data collection regarding planning concluded with young people being questioned about any area that they felt had been omitted from their plan, but should have been included. A total of 142 comments were provided, of which 54.2% ($n = 77$) indicated that the Plan they had seemed adequate:

Everything was in there that I wanted. (Female, 18 years)

I think they were all covered pretty well. Some things you can only learn yourself. (Female, 18 years)

My foster carer made sure everything was in there. (Male, 18 years)

While 14.8% didn't know what to suggest, a number of ideas focused on areas that would have been expected to feature in a transition plan: Housing (4.9%), financial management (4.9%), driver's licence (3.5%), education and after care services (2.8% each), and

employment and health (2.1% each). Some comments contained important points that need to be considered in planning:

The only thing covered was funding; practical things weren't e.g., how to access services, basic things to learn for self-care. (Female, 18 years)

I feel like [agency] don't tell us about money. It has been hard to apply for stuff, like TILA. I didn't know about that. Like access to services for my carers. Like I have a disability and my carers don't get extra for having me. (Female, 18 years)

I needed a backup plan because my housing fell through. (Male, 18 years)

I haven't seen it [my plan] so I don't know. (Male, 18 years)

It was more with counselling and everything that wasn't included. I couldn't talk to [department] about anything on my plan because I didn't want to have my son taken off me. They didn't listen to me. If I had an option for counselling available, then it would be good. (Female, 18 years)

3.6 Outcomes Post 18 Years

3.6.1 Knowledge of Available Support

As a way of determining how well prepared young people were for coping with an “independent” existence, interviewees were given an opportunity to indicate, by naming support people and services, who they would contact for assistance in the areas relating to the life domains discussed in Section 3.5.1. Respondents were categorized into those who already knew and could name a specific organisation, or a specific person from whom they would seek help, compared with those who would find out using their own initiative, and those who did not have any suggestions. The results for the eight domains are shown in Table 21 and Figure 8.

Of interest in Table 21 is the number of unique agencies identified in the specified domains. The variability in the responses could indicate that young people have a greater breadth of knowledge concerning housing, employment, and general support, than they do regarding family contact, locating personal documents, or handling finances. Alternatively, the numbers could indicate that a greater range of services is provided in the former domains. These results, when combined with the lower confidence scores assigned to Finances (Figure 6), suggest that finance management in particular is an area that needs addressing within the transition support framework.

Of considerable concern in these data is the observation that over one third of the young people were unsure what support was available in the various domains, with over one half not knowing what support services were available to meet their other needs such as Health. The higher proportion in this category could reflect uncertainty in the young people's minds about which supports they might need in the future, particularly if attention to these needs had been overlooked in transition planning. Analyses revealed that uncertainty was significantly related to not having a plan for five of the eight domains (Housing, Education, Finances, Life Skills, and Family Contact).⁹

... over one third of the young people were unsure what support was available in various Domains.

Table 21: Number of Respondents Who Nominated Support Persons or Agencies (Single or Multiple Listings) in Each Life Domain, Number of Unique Supports Listed, and Number Who Were Unsure of Support Available

Domain	Single Listings (N)	Multiple Listings (N)	Unique Agencies	Unsure (N)	% Unsure*
Housing	297	50	83	116	33.4
Education	303	43	51	111	32.2
Employment	306	35	69	120	35.2
Finances	319	25	43	133	38.7
Life Skills	301	41	46	145	42.4
Family Contact	333	10	18	141	41.1
Other Support Services	314	25	65	184	54.3
Personal Documents	323	18	36	124	36.4+

* Percentages are based on the number of interviewees who responded to each item: Housing = 347; Education = 345; Employment = 341; Finances = 344; Life Skills = 342; Family Contact = 343; Other Support Services = 339; Personal Documents = 341.

+ The uncertainty expressed here possibly reflects lack of knowledge about the range of documentation that might be required. When respondents were asked if they had obtained any documents, such as their birth certificate, 80.9% indicated that they had.

Comparisons were made between the percentage of young people who were able to name an agency or organisation that they knew could help in a particular life domain and the percentage who chose to name a particular person, or who indicated they could handle the problem themselves (through personal contact or internet searches). It was noteworthy that the type of engagement changed depending on domain. For assistance with Housing, Education, Employment, Finances, and general Support

Services, more young people tended to nominate an organisation from which they would seek help, rather than particular people, or relying on themselves. However, for developing Life Skills, achieving Family Contact, and accessing personal documents, contacting certain people seemed to be more effective. Only maintaining Family Contact appeared to be an area where young people felt they personally needed to play a significant role.

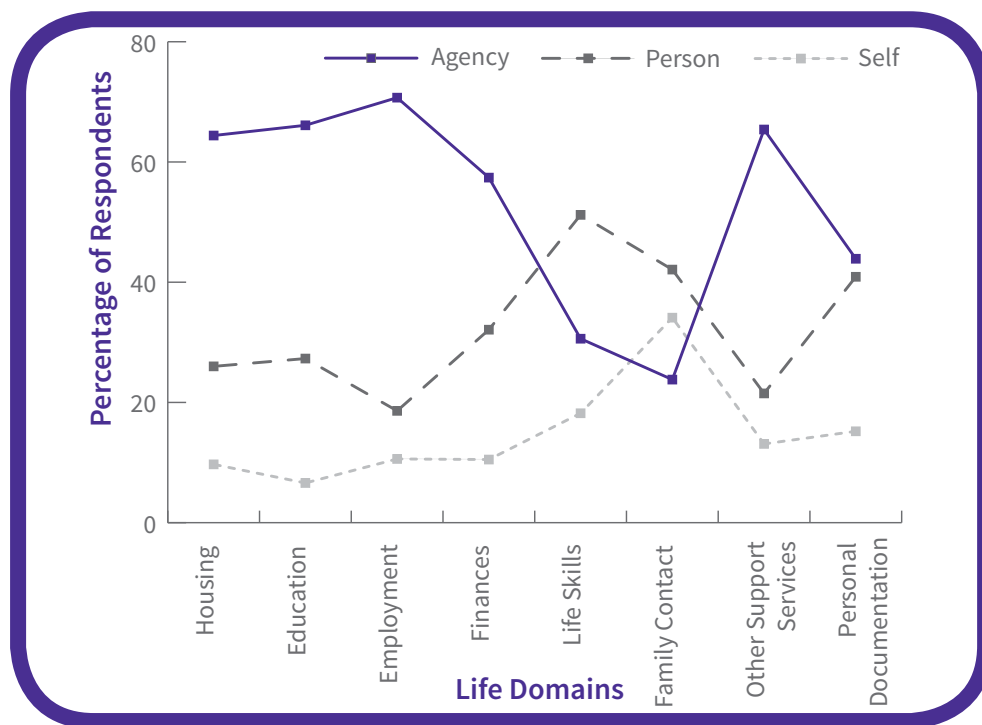


Figure 8. Percentage of respondents who indicated they would seek support from specific agencies/organisations, specific people, or would rely on themselves to obtain assistance with life domains.¹⁰

3.6.2 Living Arrangements Post-Care

Where young people choose to live after aging out of care is of critical importance in establishing a stable base for their future activities, including employment, study, and general self-care. Participants in this study were asked to indicate where they were living after cessation of their orders. The alternatives and numbers of respondents are summarised in Table 22. Overall, 21.3% of the sample remained with their carer, while 14.1% lived with relatives (and 6.6% with siblings). A further 13.3% rented with friends; 11.8% lived in their own accommodation. Comparison of responses from females and males revealed sex differences. More males than expected were likely to stay with carers than were females, whereas more females than expected were living with partners than were males.¹¹ Only 4.0% of this cohort were unable to find any accommodation; however,

it must be remembered that this sample comprised young people who were able to be contacted and hence were more likely to be living in a stable setting.

3.6.3 Financial Support Post-Care

As well as finding somewhere suitable to live after aging out of the care system, knowing how to support themselves financially is another vital ability young people must possess if they are to transition successfully. The range of alternatives proposed by the young people in this study is included in Table 23, along with the proportion adopting the listed approaches. A positive outcome was that 24.7% were already employed, with a job or an apprenticeship. A substantial 45.2% were receiving or hoping to obtain youth allowance from Centrelink (a further 4.5% planning to top up a part-time income with Centrelink support). Only 2.0% had obtained financial assistance, in the form of scholarships, to continue study.

Table 22: Number of Females and Males, and Overall Percentage, Who Reported Living in the Specified Arrangements

Living Arrangement	Females	Males	Total %
Stay with carer	30	44	21.3
Return to birth parents	8	15	6.6
Live with siblings	13	10	6.6
Live with relatives	21	28	14.1
Live with unrelated family	5	1	1.7
Supported Accommodation	21	18	11.2
Live with partner	26	6	9.2
Rent with friends	27	19	13.3
Rent alone	22	19	11.8
Couldn't find accommodation	5	9	4.0
Total	178	169	100.0

Table 23: Number and Percentage of Respondents Who Reported Accessing the Specified Financial Supports Post-Care

Financial Support	Number	%
Already employed	87	24.7
Look for work (without Centrelink)	22	6.3
Financial assistance to study	7	2.0
Youth allowance (Centrelink)	159	45.2
Disability Support Pension	41	11.6
Parenting payment	10	2.8
Support from carer	5	1.4
Support from birth parents	4	1.1
Centrelink plus part-time work	16	4.5
Unsure	1	0.3
Total	352	100.0

Table 24: Number and Percentage of Respondents Who Intended to Continue Their Education Undertaking the Specified Programs

Study Area	Number	%
Complete secondary school	18	4.9
Trade apprenticeship	37	10.0
TAFE Certificate	126	34.1
University undergraduate program	74	20.1
Online course	5	1.4
Undecided/No response	109	29.5
Total	369	100.0

However, 70.5% ($n = 260$) indicated that they intended to continue their education (a plan perhaps associated with an application for youth allowance, since continuing study is one eligibility requirement). The majority of these young people (34.1%, $n = 126$) wished to study at TAFE while 20.1% ($n = 74$) planned to undertake a university degree. The distribution of future educational activity is shown in Table 24.

A specific question focused on the respondents' access to TILA (the

Commonwealth's Transition to Independent Living Allowance). Overall, 43.4% ($n = 149$) of respondents indicated they had applied for TILA, however 29.2% ($n = 100$) had not, and 27.4% ($n = 94$) did not know what TILA was. The TILA analysis also revealed sex and jurisdictional differences. More males than expected by chance did not know about TILA; for females, fewer than expected were not familiar with that support. Table 25 reports the numbers in each category.¹²

Table 25: Number and Percentage of Respondents (Female and Male) Who Reported Having Applied, or Not, and Those Who Did Not Know About TILA

TILA	Sex		Total	%
	Female	Male		
Yes	80	69	149	43.4
No	60	40	100	29.2
Don't know about TILA	36	58	94	27.4
Total	176	167	343	100.0

Significant differences in TILA access also were found when comparing Jurisdictions (see Figure 9). Significantly more than expected by chance had applied for TILA in QLD, whereas significantly fewer than expected had applied in SA and VIC.

In addition, significantly more than expected did not know about TILA in VIC.¹³ Not surprisingly, significantly more young people than expected, who had a transition plan, knew about and had applied for TILA (see Table 26).¹⁴

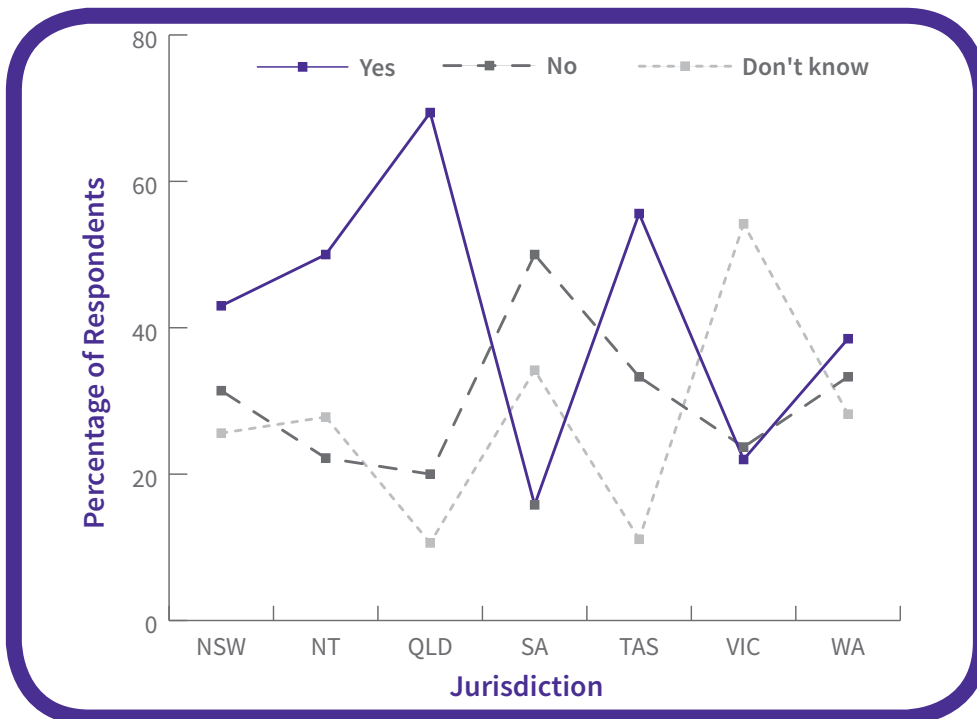


Figure 9. Percentage of respondents who had applied for, or not, or did not know about TILA in each Jurisdiction.

Table 26: Number (and Percentage) of Respondents With or Without a Transition Plan Who Had Applied For, or Not, or Did Not Know About TILA

TILA	Plan	No Plan
Yes	82 (57.7)	67 (33.3)
No	34 (23.9)	66 (32.8)
Don't know about TILA	26 (18.3)	68 (33.8)
Total	142 (100.0)	201 (100.0)

3.6.4 Improving the Transition Experience

To conclude the interview, young people were given an opportunity to share their thoughts on anything that could have been done to help make their preparation for transition to independence better. A total of 312 respondents provided 431 comments; 46 of these indicated they were unsure of what to suggest. A substantial group from the remainder (22.9%, n = 88) responded that nothing extra could be done; 6.0% of these were clearly positive.

No, it all went smoothly and I feel like I was able to be assisted easily. (Female, 18 years)

Not really. No. Mine was pretty steady. I don't think anything else could have been done to make it better. (Female, 18 years)

No. It was a really smooth transition. (Male, 19 years)

Nah, I'm pretty good. I had a really good transition. What can go wrong (from what I have seen with other a young person) is when there is no communication from the Department and the foster carer. (Female, 18 years)

However, of the others, there were mixed reasons for believing that "nothing" could improve the experience. A closed "No" or "Nothing" could not be interrogated further; but other reasons expanded a little:

Nothing, as I have been very independent on my own for a while. Maybe help with better furniture. (Female, 18 years)

No, I just gave up. (Male, 18 years)

No. I wish there was a CREATE Your Future camp in my area. (Female, 18 years)

I'm not really sure. All I know is that I'm happy to have care and protection out of my life. (Female, 18 years)

Some young people took partial responsibility for difficulties they might have faced in transitioning:

Nothing. Because I was the one who stuffed it up. The help was there for me. (Male, 18 years)

Didn't really think that much about it. I had been in a foster placement for a while. I thought I'd be there for a while as things were going really good. But things changed and I ended up moving out with some friends. (Female, 18 years)

Department should be more involved. I was OK because I was independent, but I know one of my twin sisters will need a lot of support; someone checking in on them regularly. (Female, 18 years)

The most common call (19.2% of responses) was for more support during transition and post leaving care. Others gave more specific suggestions for better communication (9.9%), and more help with housing (4.9%), finance (4.7%), employment (2.3%), and education (1.3%). Comments covered a range of areas where extra assistance would be appreciated:

It's good to give young people notice, and have someone sit down and give you direction on where to go and what to do. Housing is a big thing. (Female, 18 years)

Talk about different options. Help me find a job and get experience, qualifications and experience. It's really hard getting a job. When you turn 18, the Department basically stops contacting you. It would be good to have a phone call or some support and someone to check in. (Female, 18 years)

Explain to me what was going on. There were too many restrictions, so nothing I wanted could ever happen. So I took off at 17 and self-placed with Dad. Didn't have any contact with [Department] so don't know anything about my leaving care plan or what I could've got. (Male, 18 years)

I was struggling with depression when planning for leaving care/post care; more support needed. (Female, 18 years)

Instead of just the Department doing it there should be more services to help. One person that can be your contact prior to turning 18 that comes in at 16. (Female, 18 years)

I guess more support with advice on how I can move on, because I don't know how at all to give myself motivation to get stuff done, I don't know where to start. (Female, 18 years)

They need to support us more when we turn 18. I had nowhere to go and no one to turn to. I came out Jail, not in care, so had no support. (Male, 18 years)

Helping us and teaching us about what rent would be like, and what areas are and what housing there is. (Unsure, 18 years)

TILA was a bit of a pain. More communication about that. (Female, 18 years)

More effort from the Department to chase people up and ensure their leaving care plans are finished and they are enrolled and under support [agencies] so they can make that transition and have their support there - its like a safely blanket essentially. (Male, 18 years)

Caseworkers attracted considerable comment (11.2%); some views were positive, but many proposals were for improvements:

Nothing. Caseworker was great. (Male, 18 years)

Plenty. Talking to me more. They could have kept me on the housing list and helped me find a job. They could take us to Centrelink and help us with that before we leave. (Male, 18 years)

My worker to stick around for a while. (Male, 18 years)

More communication from caseworker, and caseworker should have been more organised. Caseworkers should be honest and not lie. Caseworker to do the leaving care plan with me and help me and not let the carer do all the work and stay positive. Caseworker to be patient and to get the information that the foster child should need. (Female, 18 years)

Caseworker should build a relationship and actually see you and have more contact in general. (Female, 18 years)

Another 10.1% of responses addressed the planning process, generally indicating that it could have started earlier and involved the young person more:

Them preparing me for transition period. I started my transition 4 months before my 18th. Would've liked a longer transition period. (Male, 18 years)

Should have been given more time to prepare leaving care plan before turning 18. (Female, 18 years)

Starting younger and having same caseworker for more than a year. (Female, 18 years)

More meetings where I was involved. There were lots of meetings with my carer but not so much me. (Female, 18 years)

I was struggling with depression when planning for leaving care/post care; more support needed. (Female, 18 years)

3.6.5 Concluding Comments

The final question asked young people for any general comments they had about the planning process. A collection of the more detailed responses is contained in Appendix E. The views expressed reinforce the claim by many (e.g., Mason & Danby, 2011) that young people are indeed the experts in their own lives. A small sample of comments is included here to reflect the wisdom young people drew from their transitioning experience. What is striking is the variability in treatment that members of this cohort had to confront within a protection system that exists only to care for the young. While some could refer to a positive process and outcome, others documented a struggle that could have been reversed with more support from those responsible for caring.

When it comes to my transition it was really down to me; I ran the show. It was done my way. They should work with you; they should do it your way because it's your transition. (Female, 18 years)

I hope for everyone in the future it runs as smoothly as it did for me. (Male, 18 years)

It helped having someone to care about me, and someone to go to for support. I had a really good relationship with my carer and case manager. I had the same case manager for 4 years and she was great. (Male, 18 years)

Leaving care is challenging but once you know what you are doing it becomes easier. (Male, 18 years)

My plan was great. I made everything happen with my caseworker and got everything dealt with. (Female, 18 years)

Every kid is different, but for me I had to pull my head in and mature. [Department] has to understand this, and to be more responsive and return calls, and be there for the kids, not just the pay cheque. (Male, 18 years)

Leaving care is a very anxious time for young people. Young people need to have all the help they can get. There are many gaps in services. Caseworkers appear not to help as much as they can. Services need to be improved and support should be increased. (Female, 18 years)

Once you're 18, your workers don't want to know you. How am I supposed to find housing when I live in a country town? There's nothing. They need to help you understand what to do to be OK. (Female, 18 years)

There needs to be a consistent procedure for caseworkers doing the plan. Of course, everyone's plan will have different stuff in it, but there needs to be a framework for the plan, a set number of activities and actions that they have to do. (Female, 18 years)

You have one plan and it goes kaput, and there needs to be a plan B. It is hell scary and you feel stuck and don't know what to do next if your plan doesn't work out. Having a youth worker through [leaving care service] is awesome because you have that support and can go to [agency]. You're in the system still, but can get the help you need. (Female, 18 years)

While some could refer to a positive process and outcome, others documented a struggle that could have been reversed with more support from those responsible for caring.





discussion

4.0 Discussion

This evaluation of CREATE's *Go Your Own Way* Kit as a resource to aid those transitioning from care in their planning for the future has revealed that the young people who received a Kit were more likely to have a leaving-care plan than were those who did not receive a Kit. The resource, even as employed at present, is a significant support for young people transitioning from care. However, during the evaluation process, a number of issues were identified that, if resolved, have the potential to enhance the effectiveness of the Kits and lead to better outcomes for young people during transition and into the future.

4.1 Issues in Kit Distribution

The first of these issues concerned the level of knowledge of who should have received a Kit. Governments, except in WA where a set number of Kits were commissioned, funded the production of GYOW Kits for all 17 year olds about to exit the system, as documented in Table 1. However, there now are data available from various sources that question the accuracy and comprehensiveness of these figures. For example, 773 Kits were produced under instruction for NSW. However, as reported through NSW's Open Data Dashboard, published FACS information indicates that the number of children and young people exiting OOH in 2013–2014, aged 18 years, was 953 (Family and Community Services [NSW], 2016). Possibly not enough Kits were produced to meet the existing need. There is no reason to believe that NSW would be unique in having discrepancies in its data. But this does indicate that some eligible young people might have been overlooked.

A more certain problem surrounded the distribution of the GYOW Kits. Because of the relatively large numbers of Kits involved, CREATE had planned to post the Kits to the young people with information for them and their carers about the purpose of the resource and how it could be used.

Following Kit distribution, CREATE staff were to phone young people to check that the Kit had arrived and to answer any questions that they might have regarding its use. Unfortunately, because of the various interpretations of privacy legislation in the states and territories, this could not happen. In some states, CREATE staff were permitted to call numbers supplied by departments from the government offices, but only during office hours when young people were likely to be at school. The process would have been far more effective if CREATE staff had been able to call Kit recipients at times convenient for the young people.

This situation is an example of the cases to which Keeley, Bullen, Bates, Katz, and Choi (2015) referred when reviewing the exchange of personal information between government agencies, and between government and other sectors, for the NSW Government Department of Premier and Cabinet. They noted that their research:

did not identify any significant legal or policy barriers to exchanging information. Most barriers occurred in the interpretation of the legal and policy constraints rather than in the actual legal or policy provisions. (p. 3)

A similar theme has been explored in a comprehensive review of information sharing conducted by Adams and Lee-Jones (2016) in a variety of institutional contexts requested by the *Royal Commission into Institutional Responses to Child Sexual Abuse*. In concluding the section on child protection and out-of-home care, these authors note:

The information sharing arrangements, legislation and terminology in the child protection context differ markedly across jurisdictions. This is likely to create impediments to information sharing due to lack of clarity and understanding among those with

responsibilities in this area. It would be worth considering working towards greater consistency to better facilitate and support appropriate information sharing, particularly where information must be shared across jurisdictions, as has been done, for example, in the early childhood services sector (see section 8). (p. 72)

They also made the clear point that:

all privacy legislation across Australia, and the SA Instructions, allow agencies and organisations to use or disclose information where it is required or authorised by law, although there is a level of inconsistency in how the provisions are framed. (p. 61)

For information sharing to occur, an organisation needs to be recognised as a “prescribed body” and have a legal agreement with the respective government controlling the use of information shared. It would seem reasonable that an NGO such as CREATE, funded by all Australian governments to provide a service (provision of the GYOW Kits) to young people in care, could be included in this category, and have protocols developed with governments to facilitate the sharing of non-sensitive information such as an address and telephone number.

Assuming the data provided by governments are accurate, if CREATE staff had been able to access this information for all those who received a Kit, the confusion expressed by several young people about what they were to do with the package could have been avoided, and more eligible young people might have received the resource. This certainly would be consistent with the intent espoused in the *National Framework* (Council of Australian Governments, 2009), Supporting Outcome 2 (2.2), which emphasises the need to “develop new information sharing provisions between Commonwealth agencies, State and Territory agencies and

NGOs dealing with vulnerable families” (p. 18). Everything possible should be done when acting in accord with Article 3.1 of the *UN Convention on the Rights of the Child* (United Nations, 1989) to which Australia is a signatory, that requires in

all actions concerning children, whether undertaken by public or private social welfare institutions, courts of law, administrative authorities or legislative bodies, the best interests of the child shall be a primary consideration. (p. 4)

Under the *National Framework*, and the successive Action Plans that have attempted to operationalize its aspirations, CREATE has been endorsed to take the lead in developing nationally consistent resources for leaving care. It would seem that this organisation, given its collaboration with governments, should be one that qualifies for the sharing of appropriate information.

4.2 Ethics requirements

Another important policy area, impacting on the conduct of research in out-of-home care with a vulnerable population, concerns the requirements for obtaining ethical clearance for a project of this nature. Following CREATE’s own ethical standards, before beginning any study involving children and young people with a care experience, approval is sought from a Human Research Ethics Committee adhering to the guidelines provided in the *National Statement* (National Health and Medical Research Council, 2016). After an extensive process taking several months, involving a review of the application by a peak Indigenous body because some of the potential respondents were likely to be Aboriginal and/or Torres Strait Islander (given the over-representation of this group in out-of-home care), approval was obtained from a respected national ethics organisation (Bellberry). Following this level of scrutiny and acceptance, it was expected that the

research could proceed.

Unfortunately, this was not the case. All governments, and even some NGO service providers, had their own ethics requirements. Responding to these began a process similar to that described by Campbell (2008) involving complicated ethics approval procedures. Separate applications had to be completed, using different forms with slightly different questions, and slightly different emphasis on similar content. Then the “approval” process had to begin again, some jurisdictions taking longer than others. One government was able to sanction the project with two weeks remaining in the allocated data collection period (which extended over three months); one declined approval after data collection for the other jurisdictions had ended.

Ethics in the social sciences currently are the subject of much discussion among researchers. The “dismay, discomfort, and disorientation” about the “research ethics review” that many experience led to an Ethics Rupture Summit held in 2012 and documented in a subsequent publication (van den Hoonaard & Hamilton, 2016). In his chapter, Dingwall (2016) warned that “as ethics regulation directs research away from ‘difficult’ populations, topics, and methods, it creates systematic areas of ignorance about social conditions” (p. 38). This view is consistent with that of many others, working with children and young people in child protection (Parsons, Abbott, McKnight, & Davies, 2015; Powell, Fitzgerald, Taylor, & Graham, 2012). Indeed, Daley (2015) strongly argued that because the “ethical review of research is so heavily focused on minimising risk ... young people’s right to participate in discussion is often overlooked” (p. 121).

While it is critical that young people are protected from possible exploitation and coercion in a research context by ensuring any treatment they receive adheres to the strictest

ethical standards, it is equally important that they are not effectively silenced by making it unduly difficult for researchers to give them the opportunity to share their views on aspects of their lives, while respecting the requirements of informed consent. It would seem that if a research project satisfies the rigors of ethical review by a nationally accredited HREC, it should not be necessary to repeat the process another eight or more times before the young people can have their collective voice heard.

4.3 Recruiting Young People

Another factor critical to this evaluation concerned the sampling or recruitment of young people as participants. Since the research focused on a targeted group (17-year-olds in 2014, about to leave statutory care in 2015), and governments had undertaken to send GYOW Kits to all eligible young people, theoretically it should have been possible to produce a random sample of respondents in the larger states, and to interview all recipients in the smaller jurisdictions. However, many factors contributed to the failure of this aspiration.

Some governments provided CREATE staff with names and phone numbers and allowed them to make interim calls from the departmental offices to try to contact young people after Kit distribution. Only a small proportion of the young people could be reached at that time. Unfortunately, after the 12–18 months they were given to use the Kit in developing transition plans before exiting the system, the young people became even more “invisible” or “hard to reach” (Hendry, 2007). Departments did not keep records of to whom the GYOW Kits were sent, and CREATE was not permitted to retain the contact details from the interim calls.

In Australia, once young people leave care, they no longer are seen to be the responsibility of the jurisdictional child protection agencies or governments.

In Australia, once young people leave care, they no longer are seen to be the responsibility of the jurisdictional child protection agencies or governments.

While legislation in all states and territories stipulates that support for those previously in care must be available at least until 21 years (and five jurisdictions extend this to 25 years), no formal records of who is eligible for this support, or the monitoring of who accesses support, are retained. After-care services may keep their own records, but these are not aggregated and published. Evidence from a recent review of the TILA program (Durham & Forace, 2015) indicated that the budgeted allocation was underspent by almost half. It is unclear why this situation exists, but the disengagement of youth would play a part, especially those with complex needs (Malvaso et al., 2016). Young people post-care can become, if not totally forgotten by the system, largely overlooked.

If the state is to be an effective corporate parent (Dixon & Lee, 2015), better records need to be kept of who the children were, where they might be living after leaving home, and what they might be doing with their lives. This need has been recognised in the UK and USA. The Children (Leaving Care) Act 2000 (that amended the Children Act 1989) introduced the position of Personal Advisor into the leaving care framework in Britain. These workers have a key role both in identifying need and providing personal support and advice. As stipulated by the Act, the responsible authority that cared for the young person has a duty:

to keep in touch with young people up to the age of 21 or beyond if in an agreed programme of education or training. Where, in the case of a relevant child, they lose touch, the authority must immediately take reasonable steps to re-establish contact and to continue doing so until they succeed in making contact...This duty reflects the underlying philosophy of the 2000 Act that local authorities should treat care leavers in the same

manner as a responsible parent by being proactive in expressing interest and concern. (Department of Health UK, 2000, p. 50)

By these standards, the official neglect experienced by many care leavers in Australia would not be tolerated.

Berry Street's *Stand By Me* trial (Antonucci, 2016; Mendes et al., 2015) has confirmed that such a program can work in Australia. Funding allocated in the 2016 Federal Budget of \$3.9 million "over four years for an intensive case management trial to support young people in out-of-home care as they transition into adulthood and independent living" (Morrison & Cormann, 2016, p. 144) perhaps could be better spent in implementing such programs involving personal advisors, that are well-known to be effective, as soon as possible to support *all* young care leavers in Australia.

In 2010, the US established the National Youth in Transition database (Dworsky & Crayton, 2009). The legislation underpinning the development of the database required States to engage on two data collection activities:

First, States are to collect information on each youth who receives independent living services paid for or provided by the State agency that administers the CFCIP [John H. Chafee Foster Care Independence Program]. Second, States are to collect demographic and outcome information on certain youth in foster care whom the State will follow over time to collect additional outcome information. This information will allow ACF [Administration for Children and Families] to track which independent living services States provide and assess the collective outcomes of youth. (Childrens Bureau, 2012, p. 1)

Both these systems require that those young people who have transitioned still have someone who is interested in

their welfare, follows their progress, and checks on what supports are required for them to achieve satisfactory future outcomes. A serious question is: Why does Australia not have a similar personal advisor program in place, or at least a database of those who have transitioned, to ensure care leavers receive the support to which they are entitled in this country? These possibilities have been raised before (e.g., (McDowall, 2008b; Mendes, 2012); now it is time for action.

An Australian database of this kind, one that was comprehensive, that would allow young people to be contacted by supporters to check that they were coping, and enable them to be invited to engage with programs that could address some of the needs they might have, would help overcome the difficulties encountered in this and other studies in reaching out to young people so that their voices can be heard. Gilbertson and Barber (2002) raised the key issues many years ago when they attempted to obtain the views of children and young people in care, including high non-response rates (of between 70% and 80%) and lack of cooperation from workers in some agencies in encouraging young people to participate. A similar situation has been encountered in this study.

Because governments were unable (or unwilling) to provide information about the current whereabouts of those who had transitioned in the previous year, CREATE had to rely largely on its own developing database (recording *clubCREATE* membership) that is far from comprehensive and, because inclusion is voluntary, records only those who actively choose to be involved. CREATE does not have the resources to monitor and update this database systematically; changes are recorded when brought to the attention of staff, on an ad hoc basis.

Consequently, as shown in Table 2, of the 1146 "contacts" on record, around

58% still could not be reached. When combined with the 14% who declined to participate or withdrew, the "non-response" rate is comparable to that reported by Gilbertson and Barber (2002), 14 years ago. While, from a researcher's point of view, this is far from ideal, it is more concerning, from a supportive organisation's perspective, to realise that these figures reveal that a large proportion of our most vulnerable young people choose disengagement rather than seek support to ensure they access their entitlements. As has been documented in many major reviews (e.g., Mendes, Johnson, & Moslehuddin, 2011; Smith, 2011; Stein, 2012), care leavers require, and can benefit from a range of supports; the "corporate parent" has a responsibility to ensure that access to these is not left to chance. Continuity of caring contact between the government and those who have transitioned is essential. Any mechanism that helps achieve this is to be commended.

4.4 The Go Your Own Way Kit's Effectiveness

A key reason this evaluation was undertaken was to determine if the YOW Kit, as a transitioning resource, was found to be useful in aiding planning, and providing essential information that would help instill confidence in the young people that they will be able to meet life's fundamental challenges. Unfortunately, as discussed previously (Section 3.3.1.1), the inefficient distribution of Kits limited the scope of these findings. The observation that, of the young people who responded to CREATE's contact and who were eligible to receive a Kit, only a little over one half reported receiving one, raises questions about the distribution method. Relying on departments, even when they expressed the best of intentions, to distribute the Kits did not produce a satisfactory outcome. Many young people potentially were disadvantaged by not receiving the

resource. As seen in Figure 4, distribution was variable across jurisdictions, but nowhere exceeded 70%. In future, a more reliable distribution method must be developed, preferably under the supervision of CREATE.

4.4.1 Reactions to GYOW Kit

Almost three quarters of respondents expressed a positive reaction to receiving the GYOW Kit. The way it was presented and its usability did not attract major criticism. The most critical issue was what was done with the Kit. Because CREATE's plan for follow-up contact with all the young people after delivery of the Kit did not eventuate, young people largely were left to their own devices. Just over half discussed the Kit with anyone, but 20% never had any meetings with a caseworker at which they might have been able to incorporate it into their transition planning. Young people, at a time of uncertainty in their lives, cannot be given a resource such as this, full of information, without someone taking responsibility for working through it with them to explain its relevance.

4.4.2 Usefulness of GYOW Kit

Receiving a Kit was important, but then the question became what was done with it, and how useful was it found to be as a source of guidance for planning. The various components of the Kits, particularly the physical elements (Compendium and Satchel) were found useful by just over half the respondents. These items had practical applications in their daily lives, as did the USB drive which, although it was included as a way of providing young people with the most current documentation relevant to their state or territory, probably was used (based on comments received from several respondents) more as a personal storage device than a source of information. However, the fact that around one third of Kit recipients were either unaware of the components or

did not use them (apart from the USB) emphasises the inappropriateness of delivering such a package to a young person without providing a meaningful explanation of how it can be used. Relying on written material, brochures and information sheets, is not sufficient with this cohort, many of whom could have literacy issues.

4.5 Transition Planning Outcomes

A major motivator for the production of the GYOW Kit, and in particular the Workbook, was to provide young people with a checklist of areas to be considered when developing their transition-from-care Plan. A measure of the effectiveness of this intervention would be an indication that the incidence of planning had increased, or that more young people were aware of their Plan and had been involved in its preparation. Results here revealed that, overall, around 42% of respondents knew about having a personal transition plan. This is a higher percentage that was reported in CREATE's last Report Card (McDowall, 2013a) in which 33.1% of the 281 respondents in the 15–17 age group indicated knowledge of a plan. However, it is lower than the figure reported in the recent *National Standard's* survey (Australian Institute of Health and Welfare, 2015b) where it was reported that 59.5% of the 15–17 year age group had a leaving care plan. Given that governments provided the AIHW data, and the observations in this study were based on young persons' reports, it is not surprising that some discrepancy exists. However, both sets of data indicate that transition planning must be better handled to benefit a greater proportion of care leavers.

Variability in plan possession/awareness across jurisdictions, as recorded in this evaluation, needs addressing. While some findings were based on small samples, extremely low values (compared with the already low overall proportion, see Figure 5)

Young people... cannot be given a resource such as this... without someone taking responsibility for working through it with them

should sound a warning that more consideration needs to be given to the planning process in these jurisdictions. It was a little encouraging that 63% of young people who were thinking about their future felt at least reasonably involved in their planning. Future research could explore what changes might be necessary to encourage a greater proportion to become engaged in this vital activity.

4.5.1 GYOW Kit and Planning

The important question to be addressed in this study was whether or not having a GYOW kit contributed to an increase in the number of young people with a transition Plan. The analysis of raw data produced a significant finding; more young people who had received a Kit had leaving care plans. However, with observational data lacking the rigor of a randomized controlled study, it is not possible to say with certainty, from this analysis, that a causal link exists between Kit possession and the development of a transition plan. To counter this weakness, a further analysis was conducted using groups matched on a range of covariates (see Section 3.4.3). The fact that the results of this comparison still revealed a significant association between receiving a GYOW Kit and having a transition Plan gives more confidence that the Kit did make a positive contribution to increasing the incidence of transition plan development.

What it was about the Kit that had the greatest effect needs to be explored further. The hope that it would function as a catalyst to generate substantially more meetings between caseworkers and the young people for whom they were responsible was not realised. Clearly, more action will be needed to change caseworker behaviour than merely supplying young people leaving care with planning resources.

Comments respondents made about what caseworkers could do better to assist planning were insightful (see Section 3.4.4). Although a little over one third of the views expressed showed that young people felt their caseworkers' actions were commendable, the others included suggestions largely focusing on practice issues involving the need for demonstrations of honesty, reliability, and respect in the workers' dealings with their clients.

4.6 The Transition Plan

4.6.1 Transition Plan Content

Young people who had a plan were asked about its content. The domains provided for their consideration covered all the important life pursuits (see Table 18). Given that all the areas should have some relevance to everyone (excepting Cultural Support which, in this context, applied only to Indigenous young people), it is surprising that these topics are included only in about half the plans produced. Housing is the one area that is most common, with three quarters of young people indicating that this area was referred to in their plan. These results suggest that it would be beneficial to develop a template for a universal plan, applicable across agencies and jurisdictions so that plans are more consistent and areas are not overlooked. This recommendation has been made previously (Department of Families, Housing, Community Services, and Indigenous Affairs [FaHCSIA], 2010); if *National Standards* are to be meaningful, this is one area where small changes could be made to benefit many young people. It must be emphasised that while the framework of the plans would be consistent, the support required would be unique to each young person, based on a needs analysis conducted before transitioning.

4.6.2 Transition Plan Usefulness

Around 60% of respondents with a transition plan thought it would be at least “reasonably useful” in guiding their journey to independence. Results also confirmed the expectation that those with a plan would feel better prepared and have more confidence in being able to handle life’s challenges than their peers who had not planned. Young people without a plan were less sure about finding somewhere to live, obtaining a job, and managing their limited finances. Programs such as *CREATE Your Future* are available that provide training in these specialist areas (<http://createyourfuture.org.au>), but young people must know that they exist before they can enrol or be referred. Since least confidence was expressed in managing finances, and given that this can be a problem area for many young people, not just those in care (Ali, McRae, & Ramsay, 2014), it might be advisable to run more courses on managing money and budgeting in schools as part of the general curriculum. Resources such as the web site produced by the Australian Securities and Investment Commission (2016) also could be employed by carers and caseworkers to provide individual instruction to young people who need financial guidance.

4.7 Outcomes Post-Care

4.7.1 Awareness of Available Support

While it is positive that around two thirds of respondents reported that they knew of a service or an individual they could approach to receive help with basic needs such as housing, employment, financial advice, education, and retrieving personal documentation, it is concerning that another one third had no idea what to do. The proportion who were unsure was even higher for life-skill assistance, maintaining family contact, and locating other services they might need. Having a plan certainly reduced

the uncertainty in some areas, increasing the respondents’ “readiness to leave” (Benbenishty & Schiff, 2009), but for employment, other services, and personal documentation plans were not providing sufficient guidance to make a significant difference. As indicated in Figure 8, agencies are seen as the primary source of support for all areas except life-skill development and maintaining family contact. Here, relationships with significant others are important, or young people feel they have to rely on themselves. Given the needs and expectations young people have of support services, it is critical that adequate supports are available both in number and quality of assistance provided. As Mendes (2009c) discussed in his review of international policy and practice, various services operate in Australia, but little is known about their effectiveness. It would be useful to have detailed annual reports from after-care services collected and published so that their contribution could be appreciated and unmet demand identified.

4.7.2 Living Arrangements Post-Care

Around the world, policy makers are accepting what researchers have been advocating for many years that there are considerable benefits associated with extending care beyond 18 to at least 21 years (Dworsky & Courtney, 2010; Peters, Dworsky, Courtney, & Pollack, 2009). *Staying Put* has been introduced in the UK (UK Government, 2014), and there are moves to extend the same rights to young people who have been living in residential care (Winterburn, 2015). In the sample here, 21% of respondents remained living with carers after turning 18 years, more males choosing this than females who were more likely to be in live-in relationships. Fortunate young people, with the option for extended care, are voting with their feet. How beneficial would it be for Australia to legislate to support extended out-of-home care (foster, kinship, and

residential) as a principle, giving all young people who want it, stability and certainty, and better prospects for the future, while assisting carers with the consequential financial impost? This call is gaining momentum (e.g., see the special February, 2016 edition of the journal *Parity*; Beauchamp, 2014); lack of action in Australia in support of this change now would appear indefensible.

4.7.3 Financial Support Post-Care

The results of this study revealed that around one quarter of the care leavers sampled already had achieved a measure of financial independence by being employed. With the exception of 2.5% who depended on carers and birth parents, the remainder needed to access some form of government pension or payment to survive. This is a much higher proportion than has been reported in the US, where Byrne et al. (2014) found around 28% of care leavers received public assistance. This discrepancy could reflect more the differences in the welfare systems of the two countries than a disparity in need. Most young people here were accessing youth allowance, the eligibility criteria for which stress the need to be looking for work or undertaking approved activities including courses of study/training (Department of Human Services, 2016).

While 30% of the sample did not answer the question about their intention to continue study, two thirds of the cohort did have clear goals involving TAFE and university programs. These aspirations must be nurtured to turn the “aspirers” into “completers” (Jurczynszyn & Tilbury, 2012). Funding support is necessary but not sufficient to maximise success. The policy reforms advocated by Harvey, McNamara, Andrewartha, and Luckman (2015), including the collection of nationally consistent data to help understand the scope of the problem, greater recognition within Higher Education of the needs of this under-represented group, as well as

many of the sector changes needed to provide greater support to those transitioning, require urgent attention so that young people have the best chance of reaching their potential.

One financial resource to which those transitioning are entitled is the Commonwealth Government’s TILA grant of \$1500.00 (the comparable amount available for care leavers in the UK is £2000.00 [approximately AU \$3500.00]; Gov.UK, 2016). The recent review of the TILA program by Durham and Forace (2015) produced interesting statistics and raised some concerns. It points to a budget allocation of approximately \$3.5 million to support those transitioning. This clearly would be an inadequate amount if all those entitled made a claim. The number leaving the system in 2014 alone would consume close to \$3.0 million of this amount; in addition, support still can be accessed by young people formerly in care up until age 25 years. However, the review demonstrated that for some reason, the projected drawdown on the allocation would result in an underspend of about 50%. Many young people are not exercising their right to access this support. As shown in this study, 43% had applied for TILA, but the others had not applied or did not know about this support.

More work must be done to communicate with young people about the availability of TILA. Some jurisdictions are doing well in this regard (e.g., QLD); but others (e.g., SA and VIC) need to review their processes to ensure the information about this resource is more widespread. The results here show that one factor that can play a part in maximizing awareness of TILA is having a transition plan. This can be explained by the fact that officially, TILA cannot be accessed unless a leaving care plan has been prepared. While this requirement is well intended, it does create a barrier for all those who do not have a plan. At present, caseworkers are pivotal to producing a TILA application, even to



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the extent that the funding, when awarded, is paid into the caseworker's bank account and the caseworker controls the expenditure or purchase. For those young people who have no contact with caseworkers, access to TILA would be difficult. Also, this somewhat paternalistic approach is not helping develop in young people responsibility and skills for independent living. If funding were allocated directly to young people in recognition of their working toward established personal goals for independence, as in some states of the US (e.g., Department of Human Services, PA, 2014), not only would those transitioning be supported, but also their skills would be enhanced.

4.8 Conclusion and Recommendations

This report has presented an evaluation of CREATE's GYOW Kit as an aid in preparing young care leavers for a more independent future. Those who were fortunate to receive a Kit were more likely to develop a transition plan, which in turn led them to reflect on important personal goals, and provided the young people with information about support services that could be accessed to help meet their needs. As well, the plan generated, in those leaving care, more confidence in their ability to meet life's challenges.

However, in addition to satisfying the basic evaluation, young people also were extremely forthcoming with comments about how the system could be improved in many areas surrounding transition. An attempt has been made to capture the essence of these views in the quotes distributed throughout this document. Statistics are valuable, and rigorous analyses vital, but the voices of the young people, outlining their struggles within the system, provide the greatest insights. It is to be hoped that those authorities, charged with the responsibility of being effective "corporate parents," will find fruitful

ideas in this report that can be incorporated into policy and practice to improve the transition experience.

The following recommendations are derived from this study's findings:

1. Given the positive outcomes for young people transitioning from care that resulted from possession of a GYOW Kit, it is suggested that the Kits should continue to be provided to young people leaving care. They could be given to young people whenever appropriate within the 15–17 year age range. Earlier distribution would maximise the time available for planning; however, this also could create more opportunity for the Kits to be misplaced by recipients, a situation that would need to be avoided.
2. A more controlled distribution of the Kits should be implemented than was achieved in this project. CREATE welcomes the continued contribution of governments to the production of the Kits, but stresses that official protocols need to be established to allow the effective management of the distribution process. This will involve governments' sharing non-sensitive contact details with distributing agencies, and developing innovative methods for ensuring a Kit reaches each intended recipient.
3. It is essential that, after Kit distribution, follow-up contact be made with recipients within one month to explain the content of the Kit and how its components can be used. Governments, NGOs, and caseworkers must collaborate to ensure that young people understand the value of the Kit in planning to meet their needs.
4. It also would be desirable to review the use of Kit's resources by young people every six

months. This can be done through a phone call to touch base with the recipient and to enquire as to his or her progress with planning.

5. It is proposed that, within the worker training programs undertaken by CREATE for child protection staff, attention be directed to the availability of the GYOW Kits and the value of this resource in facilitating planning and enhancing the dialogue between workers and young people.
6. Because of the collaborative nature of this project, governments are encouraged to promote the use of the GYOW Kits within departments using established internal communication systems.
7. CREATE should continue to review and update the *Go Your Own Way* resource, incorporating suggestions contained in this report where relevant.

From the broader experience gained while conducting this project, and from a review of Australian and International literature, the following general recommendations are made. All governments (state, territory, and federal) should collaborate to:

8. consider extending out-of-home care until 21 years, to provide more time over which transition can occur. This would make the process more gradual and less compressed, similar to the experiences of young adults in the general population;
9. develop a national database similar to the *National Youth in Transition Database* operating in the US. This would allow the outcomes for young people to be monitored after they exit the care system, and would enable better analysis of their ongoing needs so that appropriate supports can be targeted;
10. establish a system of continuing support for care leavers, similar to the effective Personal Advisors program in the UK, and programs already trialed in Australia, that provide individual mentoring for those who have transitioned to help address their ongoing needs, until the age at which legislation in the respective jurisdictions determines that government support ceases. Mentors could be specialist paid staff or significant people (who receive training) from the young person's own social network.



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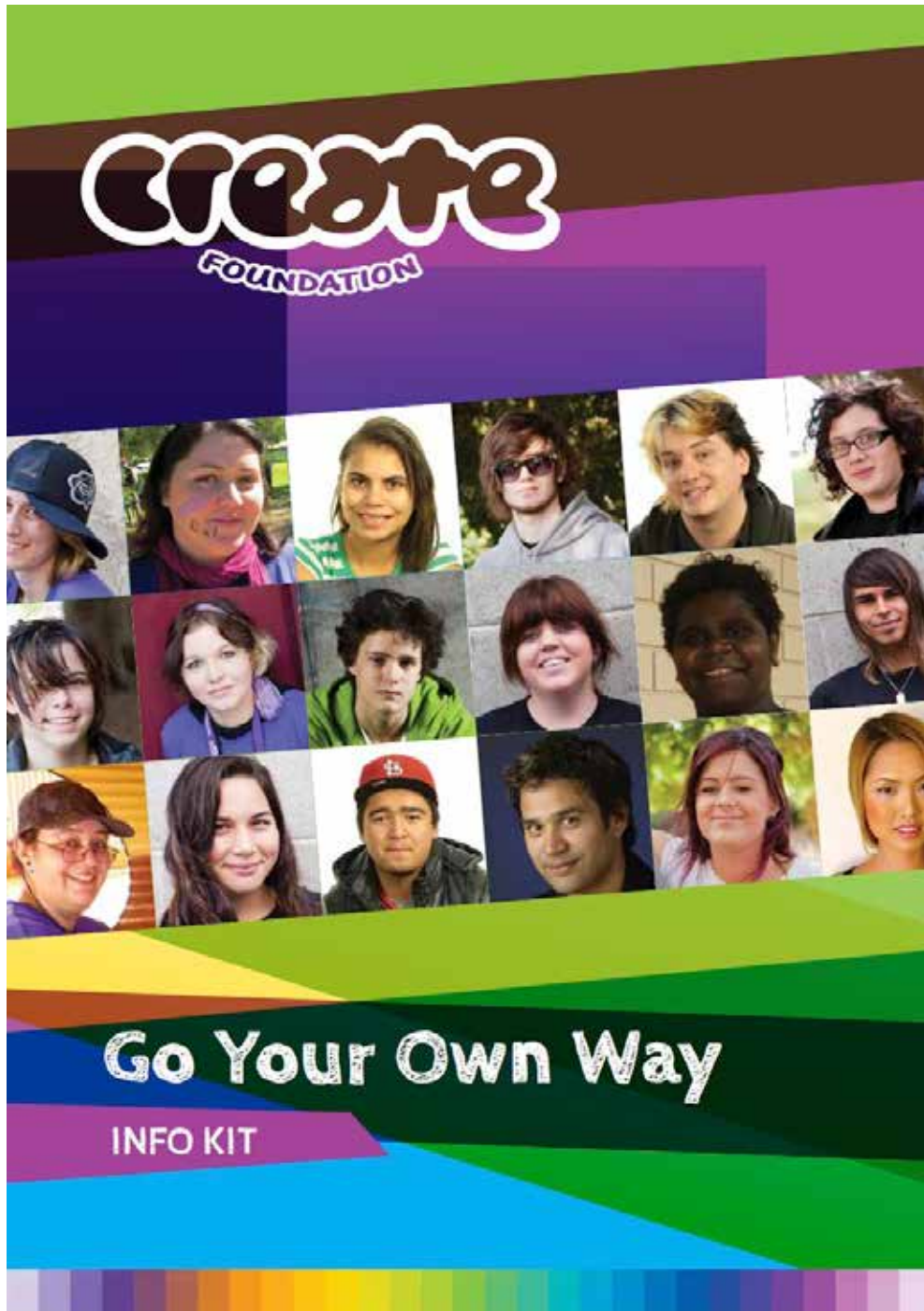
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appendices

6.0 Appendices

Appendix A: The Go Your Own Way Information Kit Workbook



Copies of the current Workbook are available online:
http://create.org.au/wp-content/uploads/2015/09/CRE068-C_GYOW_Workbook2-web.pdf

Appendix B: Information for Young Person and Carer about Go Your Own Way Kit



What's the plan?

Have you been wondering about what will happen when you turn 18?
Have you asked your carer or caseworker what will happen?

It's an exciting time but it can also be a bit scary. There are lots of different things that might happen when you turn 18.

- You might be staying with your carer or going to live with family.
- You might move out into a house with friends or you might like to get a place by yourself.
- You might still be at school or be planning to study at TAFE or Uni.
- You might be starting a job or an apprenticeship.

It's good to have a plan so you know what's ahead

- Have you thought about what you might need?
- And where to get the help and the skills needed to be more independent?

CREATE Foundation is sending you this *Go Your Own Way Info Kit* and other goodies to help you plan for your future. It would be ideal to work through the book with your caseworker. Your carer may also be able to help. The *Info Kit* on the USB has the most up to date details.

If you have any questions or want to join clubCREATE call CREATE on 1800 655 105 or go to:

www.create.org.au
www.createyourfuture.org.au



We want to hear what you think of the kit!

Text your name and number to 0424 694 938, call 1800 655 105 or email create@create.org.au (subject GYOW) & we will be in touch.

Everyone who replies goes into the draw to win a \$100 JBHIFI Gift Voucher (drawn 31/5/14)



CREATE thanks each of the Australian state and territory governments for funding these kits to help young people plan their transition from care

Please give this flyer to your carer



QLD National Office
CREATE Foundation Limited ABN 69 088 075 058
PO Box 3689, South Brisbane BC, QLD, 4101
T 07 3255 3145 | 1800 655 105
www.create.org.au

Go Your Own Way Info Kit

Information for carers about transitioning to independence for young people in care

Evidence shows that young people leaving care have better outcomes where the transition to independence is gradual, supported and planned. It's really important for young people to talk about and plan for:

1. Where they want to live,
2. How they will support themselves financially, and
3. Who they can go to for help, when they need it.

CREATE Foundation knows that young people turn mostly to their carers if they want to talk about any concerns with transition from care¹, so CREATE is letting carers know about a new resource for young people who may be thinking about transitioning to independence.

CREATE Foundation has consulted extensively with young people across Australia to develop a nationally consistent "leaving care" resource – the *Go Your Own Way Info Kit*.

The *Info Kit*, presented in a useful satchel, is a workbook for young people and their caseworker who, with support from carers or other significant persons, can plan for the young person's transition to independence. The workbook incorporates general information, planning checklists, and contact details for organisations that may be able to support the young people as they become more independent. Also included in the satchel is an updated electronic copy of the workbook on a USB Flash Drive.

Throughout March and April 2014, CREATE, with the support of the state and territory governments, will send the kit to all young people who are preparing to leave care over the next 12 months.

CREATE acknowledges and thanks carers for their important role in young peoples' lives. We encourage you to talk to young people in your care about the *Info Kit*, and support them to talk to their caseworker about planning for independence.

¹ McDowall, J.J. (2013) *Experiencing out-of-home care in Australia: The views of children and young people (CREATE Report Card 2013)*. Sydney:CREATE Foundation.

Creating a better life for children & young people in care

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Appendix C: Examples of CREATE Staff Involvement to Establish Interview Contact

State	Attempts to Contact
NSW	<ul style="list-style-type: none"> • 15/3/16 BW: Called, left voicemail. SMS sent.; 21/03/16 AM: Called mobile but went straight to voicemail; Called 'home number' however it was her previous service who answered and said she is no longer in their care so best bet would be to try her mobile. 22/03/2016: LM/VM mobile; 31/3 - called and left VM 4/4 mobile disconnected
	<ul style="list-style-type: none"> • 4/4 FB friend request Spoke with new caseworker, passed on mobile number but mentioned that the YP doesn't like speaking with people but we can try. He is living in independent living with CW dropping in every few days. CW mentioned YP phone is broken. Called YP, left VM, and sent SMS - 23/3 called and left VM on mobile 29/3 VM on mobile from CC database 31/03/2016 LM/VM. Numerous attempts of contact, cease contact.
	<ul style="list-style-type: none"> • Recorded msg: "Number is currently busy"; not at home right now, message left w/family. Called back, booked time for survey Thursday afternoon (24/03) 24/3 tried calling, YP not home, advised to try again next week. 29/03 no answer. Called 2/4 - spoke to YP, interested. Please call Monday 4/4 after 4pm. 4/4 Not at the house, unsure of when they will return, try again tomorrow.; 4/5 AM: Spoke to a member of the family who said L***** was out and wasn't sure when she would be home; seemed happy for us to try again later or another time.
NT	<ul style="list-style-type: none"> • 11.02.16 referred from agency, willing to do survey need to contact after 2 pm. 01.04.15 sent friend request, accepted, R**** to follow up. 10.03.16 Phone call attempted. No answer. 29.03.16 Phone call attempted, dialed number went straight to voicemail. R**** spoke to grandpa - another new number he doesn't have it but sister does (YC) she's been encouraging her to get in touch. 08. 04 sister doesn't have number and says prob won't do it. 15.04 Staff sent FB message to see if prefer to do it online 16.04 said yes, sent online link. Sent FB saying closing soon and really want voice included and replied she'd done it online, awesome!
	<ul style="list-style-type: none"> • 09.03.16 - sent Facebook with message asking for number. 10.3.16 - rang number and spoke to him about what going on, said battery was about to die will ring back tomorrow. 11.03.16 didn't ring, CREATE will ring Monday.01.04 no answer on phone 04.04 phone still off sent message asking if he would like me to send the link online and he can do it in own time. no reply 06.04 word on the street is has been arrested for high profile stealing, may need to check with corrections.13.04.16 sent email to contact within corrections to see how could verify this info and org appt 1404 email back, sent request for visit 15.04 meeting visit approved via paper consultation - 18.04 at 11am. Appt missed due to incorrect information from prison. Rescheduled to 19.04 at 11am - visit done - survey done on paper and entered on return - did well, also linked him in with aftercare service - likely release soon. Asked if other yp - only identified one unknown to me will follow up no more in prison he says. Completed.

	<ul style="list-style-type: none"> • Unknown whereabouts - brother says thinks in Katherine, not replying on Facebook, other friend confirmed in Katherine, asked him to make contact 05.04 Sam trying to get in touch via ***** who their friendly with 14/4/16 S**** has returned to Darwin as informed by his brother. 19.04.16 Sam went for a drive to Cas shops and spoke to YP that know S**** who said he might be staying at his Dad's in Palmo. CREATE sent him another FB message to say we heard he was back and give us a call. 21.4.16 have got S****'s number and have sent text and tried calling but no response so far. Will try again this afternoon-Sam. 26.04.16 spoke to S**** at 17:30, said to doing the survey on Wednesday or Thursday. 27.04.16 Sam called, no answer. R*****. 28.04.16 called in the morning, no answer. Will try again in the afternoon. R***** called again, agreed to have Sam to call out to house with lunch - did survey
QLD	<ul style="list-style-type: none"> • Happy to do SRVY/ 24.2 msg left/ 27.2 msg left/ 2.3 phone number is previous carer, didn't provide updated phone number. Msg sent on Facebook/9.3 No information on CC database. Toowoomba Youth Service YHARS and Next step contacted - awaiting response./ 14.3 No next step contact/ 17.3 Email sent to T'Ba CSSC for any information/ 20.4 email sent to Toowoomba Zonal manager CV for information
	<ul style="list-style-type: none"> • Disconnected - called SG 08/02. Investigated services: QLD Youth Services / YHARS. I**** new caseworker is R*****. Townsville YHARS. To call me back. SG 09/02. R***** returned call. Said he is seeing I**** tomorrow (10/02). Have emailed R***** blurb of what GYOW is and given I**** the option of doing the survey. SG 09/02 No reply from R*****. Follow up email sent 12/02. SG. M**** W**** got I****'s consent for CREATE to call her, so I phoned I****. I**** having lunch. Said to call back. Survey time allocated 3:15pm 15/03. Phoned back at 3:15pm, there was no ring tone, no answer SG 15/03. Called and left message 21/03. Tried calling – I**** rejected call 22/03 after 5pm SG. Sent text message SG 04/04
	<ul style="list-style-type: none"> • Updated details 16/1/2016 (SL). Called on 23/02 there was no answer and phone didn't ring SG. 1/3 - Called Forest Lake service centre, emailed name of YP to caseworker and they will try to put us in touch. Also have sent YP's name to YHARS service for Brisbane region (via K**** B who was sending some of her YP) S**** H**** responded 16/3 saying she has texted the YP to ask about consent for YHARS to pass on their number to us (K*****). SG emailed and posted SG 22/03. A lady on FB tagged O**** in the GYOW survey post on Next Step After Care. SG msgd O**** from X***** CREATE FB and NS FB. No response. Sent second FB msg SG 20/04
SA	<ul style="list-style-type: none"> • Spoke with A****. R***** no longer at this site (Muggies) A***** not willing to provide further info. Spoke with M**** at FSA Marion. M**** going to call R**** and have her contact CREATE when available. 5/3/15 1.30pm// left a msg with Muggies south to call back 2/2/2016., 2/2/2016 A**** from Muggies called back and going to pass our number onto R***** for her to call us.
	<ul style="list-style-type: none"> • Left message with carer but still unable to get in contact with her, Max 4 calls 17/02/16. * Sent flyer to Murray Bridge FAMILIES SA as PO BOX wasn't completed
	<ul style="list-style-type: none"> • D**** (father/guardian) Call back later in the day, M**** is currently at school call back after 4:30pm 3/2/16// called back 11/02/2016 and not interested

<p>TAS</p>	<ul style="list-style-type: none"> • Have spoken to case worker from Salvos who is asking if he can pass on young person's number 22/02, have also FB follow up with Case workers from Salvos 7/03/2016. Followed up with caseworkers, who said he hasn't had contact but thinks young person might be staying with another young person, follow up with and spoke that young person who says that he was living with young person but met up with some people and has moved to the mainland with them and is currently not able to be contacted 08/03, called case workers again 21/4, still has had no contact with young person. <ul style="list-style-type: none"> • Spoken to M*****, who said he is hopefully going to T***** this Friday when released from R***** Prison. There number for T***** was called but number is disconnected 08/03. CREATE worker googled number was for Qld. Spoke with worker from T***** who said that young person is not with them and he believes that he is still with *****. CREATE worker tried to call again on Tuesday the 15th in the morning, spoke to M*****, not on speaking terms with X gave me another number. Young person Completed Survey DA.
<p>VIC</p>	<ul style="list-style-type: none"> • Called 4/2/16 Has Learning disability and English as a second language (Vietnamese) carer happy to support translating but might be a bit tricky as she doesn't speak much English either. Emailed C**** to ask if there is something else we can do. Will get back to her to let her know. Called back 18/2/16 AS. Called back 21/3/16 - not home. Next steps: one more call and an email. Spoke to K*****- said call A**** after 4PM today- 4/4 M*****, called back- went to voicemail 4/4 M***** After speaking with K*****, was best option to send through username and password due to school commitments – C***** 11/4/16- Has she done survey now? Next- send Email/text to remind of closing date. M***** sent final email 19/4/16 completed on line. • 8/3/16 called resi unit and asked for current contact info. Old worker M**** F****, contacted on Facebook 24/3/16 AS He has moved out of G***** and doesn't have a phone but has free Wi-Fi on his iPod. I asked if we can set up a time to do the survey over Facebook video call. Contacted him 13/4/16 AS on Facebook. Next step: offer to send username & password- reconnect on FB & remind of closing date- he may need support/encouragement to do survey. Contacted him on Facebook 20/4/16 AS - completed survey 21/4/16 AS • Has agreed to participate at interim calling. Asked for call back later on 18/2. No answer 11/3. Received a call back from K*****'s carer. Asked for a call back 4pm 16/3. Called 16/3 no answer. No answer 18/3, so sent text. Called- said K***** will be home 4PM & call then *CALL FRIDAY* 8/4/16 Friday CREATE: Called 11:04 no answer and unable to leave message. Same 11:08., No answer 11/4/16 C***** can't leave message, no answer 12/4 can't leave msg- M*****, sent FB friend request 12/4 M***** Next: encourage to do survey via FB. Contact AS 20/4/16 - she said she would do it so I sent through the code - survey completed AS 20/4/16

WA

- Mobile disconnected. Left message with carer 23/2/16 JJ, phoned 9/3/16- no answer EJ. Added on FB and sent message EJ. Replied to message- new number is. ***** let us know when is good for him to chat. 9/3/16 EJ. Follow up FB message 18/3/16 EJ, completed survey 21/3/16 EJ

- Called 23/02 at 3:30 not home - will call back another time JJ called 10/3/16 not home. Phone tomorrow after school. 2.30 Or 3.30. 10/3/16 EJ Phoned- answer but don't think they could hear me. Phoned again but no answer so left a message. 11/3/16 EJ spoke to K*****'s carer- gave us K*****'s contact but wasn't sure if they would be interested 7/4/16 EJ phoned YP's mobile- no response so sent opt in/out text 1/4/16 EJ Re-sent FR on FB (7/4 LF). Phone rang out (7/4LF). Called 11/4/16 no answer, sent text BN Phoned and spoke to carer C*****. K***** was at work but C***** recommended we call tomorrow at 4:00 (14/04 LF). Phoned at 4pm, no answer. No voicemail left. Phone again at 4.30pm 15/4/16 EJ spoke to K*****- she was happy to do the survey online. text her the details and will check in on Monday about how she got on 15/4/16 EJ Sent text about extended closing date and prize draw 27/04 LF. K***** advised she has done the online survey 27/04 LF.

- Confirmed home number with caseworker, R***** is still living with his carers, attempted contact 25/2/16. Emailed carer- 4/3 EJ Added on FB 23/03/2016 LF Message sent and seen on FB- no response. LF Spoke to carer B**** and texted through information. B**** will discuss with R*****- check back in with B**** next week. 1/04/16 LF, emailed R***** on FB to check if he is interested 14// BN phoned carer mobile and home phone no answer. Sent online survey.18/4/16 EJ sent opt out email on FBBN 21/4/16

Appendix D: The Go Your Own Way Structured Interview

1. I have read the Instructions to the young person and he / she has indicated that the details are understood.

(If "True," type an X in the box below.)

Answer Options

2. Do you identify as female or male?

Answer Options

Female

Male

Unsure

3. What is your date of birth?

Answer Options

Date / Time

4. In which state or territory did you live while in care?

Answer Options

ACT

NSW

NT

QLD

SA

TAS

VIC

WA

5. What is the postcode of where you live at present?

Answer Options

6. With what cultural group do you identify (select one)?

Answer Options

Aboriginal and / or Torres Strait Islander

Other cultural group (please say which in box below)

No special group

Other cultural group, please say which:

7. What is the highest educational level you have achieved?

Answer Options

Finished primary school (Year 7)

Finished Year 10 or equivalent

Finished Year 12 or equivalent

TAFE Certificate

Other (please specify)

8. Do you have a smart phone?

Answer Options

Yes

No

9. Do you have a disability?

Answer Options

Yes

No

10. Which of the following has the biggest impact on you?

Answer Options

Intellectual (including Down Syndrome)

Specific learning / Attention Deficit Disorder

Autism (including Asperger's Syndrome)

Physical

Acquired Brain Injury

Neurological (including Epilepsy)

Deaf / Blind (Dual Sensory)

Vision (Sensory)

Hearing (Sensory)

Speech

Psychiatric (Mental Illness)

Other (please say which)

11. Do you receive any support for this disability?

Answer Options

Yes

No

12. Do you have any children of your own?

Answer Options

Yes

No

13. How many children do you have?

Answer Options

14. Do they live with you most of the time?

Answer Options

Yes

No

15. Are you in out-of-home care now?

Answer Options

- Yes
- No

16. Which of the following best describes the orders affecting your care arrangements?

Answer Options

- Statutory Guardianship or Custody order (for Foster, Kinship, or Residential care)
- Parental responsibility to a third party (such as a carer)
- Voluntary care arrangements
- Not sure

17. Where, or with whom are you living now?

Answer Options

- A carer who is not a family member
- A relative (e.g., grandparent, aunt etc.)
- Birth parents
- Siblings
- Friends
- Flatmates (renting with others)
- Living alone (house, flat, unit)
- Semi-independent supported accommodation
- A residential care facility
- A juvenile or youth justice facility
- Homeless

18. About how old were you when you first came into out-of-home care?

Answer Options

- Less than 12 months old
- 1 – 2 years
- 3 – 4 years
- 5 – 6 years
- 7 – 8 years
- 9 – 10 years
- 11 – 12 years
- 13 – 14 years
- 15 – 16 years

19. In what type of placement are you living now?

Answer Options

- Foster care
- Relative or Kinship care
- Residential care (including family group homes)
- Permanent care

Semi-independent supported accommodation

Independent living

Other (please say what type)

20. Do you have a caseworker / case manager (e.g., a worker who may support you in your placement, organize family contact etc.)?

Answer Options

Yes

No

Not sure

21. What is the total length of time you have been in out-of-home care?

Answer Options

Less than 12 months

1 – 2 years

3 – 4 years

5 – 6 years

7 – 8 years

9 – 10 years

11 – 12 years

13 – 14 years

15 – 16 years

17 or more years

22. About how many placements have you been in over the last 5 years or since you have been in care (if a shorter time)?

Answer Options

23. Where, or with whom are you living now?

Answer Options

A carer who is not a family member

A relative (e.g., grandparent, aunt etc.)

Birth parents

Siblings

Friends

Flatmates (renting with others)

Living alone (house, flat, unit)

Semi-independent supported accommodation

A residential care facility

A juvenile or youth justice facility

Homeless

24. About how old were you when you first came into out-of-home care?

Answer Options

- Less than 12 months old
- 1 – 2 years
- 3 – 4 years
- 5 – 6 years
- 7 – 8 years
- 9 – 10 years
- 11 – 12 years
- 13 – 14 years

25. What is the total length of time you were in out-of-home care?

Answer Options

- Less than 12 months
- 1 – 2 years
- 3 – 4 years
- 5 – 6 years
- 7 – 8 years
- 9 – 10 years
- 11 – 12 years
- 13 – 14 years
- 15 – 16 years
- 17 or more years

26. About how many placements did you have over the last 5 years or for the time you were in care (if less than 5 years)?

Answer Options

27. In what type of placement were you living when last in care?

Answer Options

- Foster care
- Relative or Kinship care
- Residential care (including family group homes)
- Permanent care
- Semi-independent supported accommodation
- Independent living
- Other (please say what type)

28. Caseworkers / case managers from which type of organization / agency provided most support for you and your carer in your placement?

Answer Options

- Government
- Non-government organization / agency
- Not sure

If an NGO, what was the name of the agency?

29. Does the caseworker / case manager who gives you and your carer most support work with a government or non-government organization?

Answer Options

Government

Non-government organization / agency

Not sure

30. About how long have you been supported by the caseworker / case manager you have at present (in months)?

Answer Options

31. How often are you in touch with the caseworker / case manager who provides you with most support?

Answer Options

Weekly

Fortnightly

Monthly

Every 3 months

Every 6 months

Once a year

Not at all

32. Overall, how worried are you about the process of transitioning from care to independence? (Use the scale: 1: Not at all; 2: A little; 3: Somewhat; 4: Reasonably; 5: Quite; 6: Very).

Answer Options

1: Not at all worried

2: A little worried

3: Somewhat worried

4: Reasonably worried

5: Quite worried

6: Very worried

33. What issues worry you most about the transitioning to independence process?

Answer Options

34. How important do you feel it is to have a plan for your future?

(Use the scale: 1: Not at all; 2: A little; 3: Somewhat; 4: Reasonably; 5: Quite; 6: Very).

Answer Options

- 1: Not at all important
- 2: A little important
- 3: Somewhat important
- 4: Reasonably important
- 5: Quite important
- 6: Very important

35. Who, if anyone, have you spoken with about what you could expect after you turned 18 years and left care?

Answer Options

- No one
- Carer
- Caseworker
- Birth parent(s)
- Siblings (sister, brother)
- Other birth family member(s)
- Friends
- Indigenous community members
- Other

If Other, please say who:

36. Do you know if you have some form of official transition-from-care-to-independence Plan?

Answer Options

- Have a Plan
- No Plan
- Not sure

37. How would you describe the Plan you have?

Answer Options

- Final Plan
- Incomplete Plan
- Not sure

38. Do you have a copy of the Plan?

Answer Options

- Yes
- No
- Not sure

39. How old were you when formal planning for your future began?

Answer Options

- Younger than 12 years
- 12 years
- 13 years
- 14 years
- 15 years
- 16 years
- 17 years

40. Did you receive a Go Your Own Way (GYOW) Kit to help with your planning for independence?

Answer Options

- Yes
- No

41. Did you receive a Go Your Own Way (GYOW) Kit to help with your planning for independence?

Answer Options

- Yes
- No

42. How did you receive your GYOW Kit?

Answer Options

- Through the mail
- From Caseworker
- From Carer
- What other means?*

43. When did you receive your GYOW Kit?

Answer Options

- Over 12 months ago
- About 12 months ago
- About 9 months ago
- About 6 months ago
- About 3 months ago
- About one month ago

44. What was your initial reaction to the Kit?

(Use the scale: 1: Quite negative; 2: Reasonably negative;

3: Somewhat negative; 4: Somewhat positive; 5: Reasonably positive; 6: Quite positive).

Answer Options

- 1: Quite negative
- 2: Reasonably negative
- 3: Somewhat negative
- 4: Somewhat positive
- 5: Reasonably positive
- 6: Quite positive

45. Why did you feel that way?

Answer Options

46. With whom have you discussed the contents of the GYOW Kit (you may select more than one person)?

Answer Options

- No one
- Carer
- Caseworker
- A worker in placement organization (not your caseworker)
- A worker in a Transitioning-from-Care service
- An Indigenous community member
- Birth parent
- Sister or brother
- Other family member(s)
- Friends
- Someone else

47. About how many meetings have you had with your caseworker to discuss your future after care?

Answer Options

- None
- One to four
- Five to nine
- 10 to 14
- 15 to 19
- 20 or more

48. Can you think of anything your caseworker could have done to make the planning process better for you?

Answer Options

**49. How useful did you find the GYOW Kit in assisting your planning for the future?
(Use the scale: 1: Not at all; 2: A little; 3: Somewhat; 4: Reasonably; 5: Quite; 6: Very).**

Answer Options

- 1: Not at all useful
- 2: A little useful
- 3: Somewhat useful
- 4: Reasonably useful
- 5: Quite useful
- 6: Very useful

50. How useful did you find the following aspects of the GYOW Kit in helping you prepare for the future?

(Use the scale: 1: Not at all; 2: A little; 3: Somewhat; 4: Reasonably; 5: Quite; 6: Very).

Rating

Answer Options

Workbook (with Plan checklist)	<i>I didn't use this item</i>
Journal (Notebook)	<i>Not at all useful</i>
Black zipped folder	<i>A little useful</i>
USB Drive	<i>Somewhat useful</i>
Satchel (blue or red bag)	<i>Reasonably useful</i>
	<i>Quite useful</i>
	<i>Very useful</i>

51. Is there anything that CREATE could do to make the Kit or Workbook better?

Answer Options

**52. How involved have you been in the Planning for your transition to independence?
(Use the scale: 1: Not at all; 2: A little; 3: Somewhat; 4: Reasonably; 5: Quite; 6: Very).**

Answer Options

- 1: Not at all involved
- 2: A little involved
- 3: Somewhat involved
- 4: Reasonably involved
- 5: Quite involved
- 6: Very involved

53. What did your planning sessions involve (you may choose as many as apply to you)?

Answer Options

- Face-to-face meetings with caseworker
- Telephone conversations with caseworker
- Emails or texts to/from caseworker
- Contact with support agencies relevant to your needs
(e.g., health services, educational support services etc.)
- Other activity*

54. How involved have the following people been in helping you plan?

Answer Options

Caseworker	<i>I didn't use this item</i>
Carer	<i>Not at all useful</i>
Birth Parent(s)	<i>A little useful</i>
Sisters / Brothers	<i>Somewhat useful</i>
Other Birth family members	<i>Reasonably useful</i>
Cultural community members	<i>Quite useful</i>
Friends	<i>Very useful</i>

55. Which of the following topics are dealt with in your Transition Plan?

Answer Options

- Housing
- Education
- Employment
- Finances (Manage your money)
- Life Skills (Look after yourself)
- Family Contact
- Relationships
- Cultural support
- Personal Documentation
- Access to TILA
- Accessing Support Services
- Other (please say what)

56. How well do you think your Plan will help you access the support you require to meet your needs in the future?

(Use the scale: 1: Not at all; 2: A little; 3: Somewhat; 4: Reasonably; 5: Quite; 6: Very).

Answer Options

- 1: Not at all well
- 2: A little
- 3: Somewhat well
- 4: Reasonably well
- 5: Quite well
- 6: Very well

**57. How easy has it been for you to suggest things to be included in your Plan?
(Use the scale: 1: Very difficult; 2: Reasonably difficult; 3: Somewhat difficult;
4: Somewhat easy; 5: Reasonably easy; 6: Very easy).**

Answer Options

1: Very difficult	<i>Not at all confident</i>
2: Reasonably difficult	<i>A little confident</i>
3: Somewhat difficult	<i>Somewhat confident</i>
4: Somewhat easy	<i>Reasonably confident</i>
5: Reasonably easy	<i>Quite confident</i>
6: Very easy	<i>Very confident</i>

58. Why did you feel this way?

Answer Options

59. How confident do you feel that you will be able to do the following things to your satisfaction now you are 18 years old and your care orders have ceased?

Answer Options

- Find somewhere suitable to live
- Enrol in appropriate courses of study
- Seek employment
- Manage your money
- Look after yourself
- Contact family members
- Contact friends/mentors
- Contact members of your cultural community (if relevant).
- Access other support services e.g., health
- Locate personal documentation needed for identification

60. Who, or which service, will be able to support your independence in the following areas (possibly as shown in your Plan)? If you do not know, write "Unsure" in the comment box.

Answer Options

- Housing
- Education
- Employment
- Finances
- Life Skills
- Family Contact
- Other Support Services
- Personal Documents

61. Where are you living now you have turned 18 years and your care orders have ceased?

Answer Options

I can't find accommodation

Stay with carer

Return to birth parent(s)

Live with siblings

Live with relatives

Move into supported accommodation

Live with partner

Rent space with friends

Rent space on own

Other (please say where):

62. How are you supporting yourself financially now you have turned 18 years and your care orders have ceased?

Answer Options

Have a job already

Look for work (without Centrelink support)

Seek financial assistance to keep studying

Youth allowance (Centrelink)

Disability support pension

Parenting payment

Rely on carer

Rely on birth family members

Other

If Other, please say what:

63. Do you intend to keep studying now you have turned 18 years and your care orders have ceased?

Answer Options

Yes

No

64. What study would you like to do in the near future?

Answer Options

- Complete secondary school
- Trade apprenticeship
- TAFE certificate/diploma
- University undergraduate program
- Other (please give details)

65. Have you obtained copies of any personal documents (e.g., birth certificate) from the Department or placement agency?

Answer Options

- Yes
- No

66. Have you applied for the Transition to Independent Living Allowance (TILA)?

Answer Options

- Yes
- No
- Not sure what this is

67. Are there any areas that weren't covered in your Plan that you think should have been? Please give details:

Answer Options

68. What else do you think could be done to make your preparation for transition to independence better?

Answer Options

69. Do you have any general comments about the transition planning process?

Answer Options

Appendix E: Respondents General Comments about the Transitioning Process

General Comments

[Department] just said we're dumping you at this refuge, That was it. [Department] are just terrible. I gave up on going there. I get no support, no help, I get told I'm mentally ill when I went to them for help. I mean who tells a child that they are mentally ill when they are coming in for help?

They are just disgusting. (Female, 18 years)

Being able to talk to people alone without the carer there. The Department also needs to realise they need to help the carer through the process as well as they are the ones who provide a lot of support at the end of the day. With people transitioning out of care, once they are out of care they have no one else to look up to (help them decide the best choices for themselves) so I think mentoring and community support networks are really important. (Female, 18 years)

Discussed what would happen in the future but I didn't really know what I wanted to do. It's hell scary going into the real world when you're hell young, you don't know what you're expecting. Felt like had a plan but then it all went kaput. There could be a back up plan coz its hell hard coz you had that plan and you feel stuck when it goes kaput and don't know what to do. Its weird, you can't wait to turn 18, and then you turn 18 and hell scary and being independent. It's so hard. (Female, 18 years)

[Department] took a year and a half to give a signed leaving care plan, and they did not consult me at all. I heard about financial benefits from [agency], not [Department]. I think that the after-care plans are just words without meaning; there is no point in having them. It is a waste of time, and those resources could be spent on something more useful, like an information session, because the plan isn't going to help them in the long run. Or chances to talk to other young people who have already left care. (Female, 18 years)

Nothing really. I guess I'm just glad [agency] has touched base with, their the only foundation I've known for a long time and when I was in care they tried to help me and put lots of things in perspective. (Female, 18 years)

Every kid is different, but for me I had to pull my head in and mature. [Department] has to understand this, and to be more responsive and return calls and be there for the kids, not just the pay cheque. (Male, 18 years)

Getting a good job is difficult. Getting Centrelink is difficult. Accessing services can be difficult. It would be great to have more support workers help in dealing with Centrelink. Having care workers have information. (Female, 18 years)

Housing. Don't rent with friends unless you know them really well. (Male, 18 years)

I am glad to leave care because in my group home the others are annoying, so I would advise that nice kids shouldn't be placed with bad kids. (Male, 18 years)

I had one caseworker who was particularly good and got me a school trip. They need to have trained workers that are able to teach young people about the skills they need especially about money. You don't realise when in care how important it is. (Female, 18 years)

I read all of the GYOW booklet, and figured it out on my own. (Female, 18 years)

I think leaving care is one of the most difficult things I have ever had to do. Personally, it was very difficult learning to live alone, so I was very lonely. It is really hard to do it alone. I contacted [agency] as a start, and researched agencies online to me. (Female, 18 years)

I would much rather live outside care because previous case managers haven't done anything or helped me to find a school. I had disagreements with my worker because she thought that she knew what was best for me but it wasn't. I wanted her to get out of my space and help me do what I knew was best for myself but instead she stopped me because my career idea wasn't what my worker saw as being a career idea that she saw as being worthwhile. Instead I have now found someone who works in that area and can give me advice and get my skills up. Some resi units are good at helping us learn to cook and buy the things we want to cook, cookbooks etc. and others don't. Weekends are good because we have relaxing days. Some workers take you out, or if you wash the cars you can go carting. If you cook on Wednesday's you can go on an outing on the weekends. This is a good idea. I would help the other kids cook if they helped so I got to teach them so they weren't embarrassed if something goes wrong. Some workers don't help you get up for school or drop you off which is irresponsible because you need someone to take the first step with you. They come up with excuses. Kids need to see they won't be in care their whole lives. (Male, 18 years)

It was hard going into care, feel better out of care and independent. (Female, 18 years)

It wasn't that easy with all the stuff you wanted to put in, you had to remember it all. Caseworker was somewhat helpful. (Female, 18 years)

It would of been helpful for my sister. My brother is going well; he has a family of his own! My sister is not as good; she is involved in drugs, its her own choice, I accept it. It would of been better if caseworkers got me involved in her case. When she was younger, caseworkers were involved but not really after that. I still see her now and again, she is happy with her lifestyle but it's not a good lifestyle. She is content with what she is doing. (Female, 18 years)

It's way too uptight. It was like a business meeting. I am here to have fun and there was no joking; it was like a funeral planning. There were no breaks from it; it felt cold. It went a long time. (Male, 18 years)

Leaving care is a very anxious time for young people. Young people need to have all the help they can get. There are many gaps in services. Caseworkers appear not to help as much as they can. Services need to be improved and support should be increased. (Female, 18 years)

Not really. Personally no, I had a bit of an understanding about what would happen with my life after turning 18. (Male, 18 years)

Once you're 18. your workers don't want to know you. How am I supposed to find housing when I live in a country town? There's nothing. They need to help you understand what to do to be OK. (Female, 18 years)

Preparing me. They don't really make sure you are comfortable before you leave; they just give you a date and that's that. Even if you aren't ready to leave, you had to and this was hard. (Female, 18 years)

Probably would be easier, if I could have contacted one person throughout the whole process. (Female, 18 years)

Take your time, don't rush it, be patient. When a young person moves out, help them to stay calm or know where to go to stay calm so they don't fail. When you're planning, make sure young people get a lot of help, so they know how to clean better, treat your self better, and are confident in life skills so you won't live in a messy house all the time or place won't stink. (Male, 18 years)

That I didn't feel a part of it when it was done. They kind of made all of the decisions, then shoved me out. (Female, 18 years)

The good safe area. The apartment I'd love to move to ... the rent is so expensive; the food also is more expensive. (Female, 18 years)

There needs to be a consistent procedure for caseworkers doing the plan. Of course, everyone's plan will have different stuff in it, but there needs to be a framework for the plan. A set number of activities and actions that they have to do. (Female, 18 years)

There needs to be a plan B. You have one plan and it goes kaput, and there needs to be a plan B. It is hell scary and you feel stuck, and don't know what to do next if your plan doesn't work out. Having a youth worker through (leaving care service) is awesome because you have that support and can go to [agen-cy]. You're in the system still, but can get the help you need. (Female, 18 years)

There's a lot of things. Have respect for your carer; you're not really going to see them after you leave. (Male, 18 years)

They shouldn't be slack on it. I didn't receive a transition from care plan. Some of the young people who have more problems seem to miss out and this is awful because they need it most. (Male, 18 years)

When it comes to my transition it was really down to me. I ran the show. it was done my way. They should work with you. They should do it your way because it's your transition. (Female, 18 years)

When you're doing your care plan, if you're not really working with your case-workers I feel like they should try a bit harder to engage with me and understand why I wasn't turning up. More understanding from my caseworkers would have been helpful. (Female, 18 years)

You can't rely on other people. You need to be self actualised and realise its your future not anyone else. You gotta sort of do things yourself sometimes you got-ta get thrown in the deep end. (Male, 18 years)

I have huge medical needs. When foster payment is lost, partial disability payment does not even cover medical costs, it is unfair that carers have to make up difference. Waiting until 21 to get full payment puts a huge strain on families. Foster siblings have had to give up other things to meet expenses. (Female, 18 years)

All in all I think its good, but need to be more communication and listening to what the children want instead of the interest of the carer or caseworker or what they think is best for the person transitioning.
(Female, 18 years)

[Agency] could have started it sooner. Feel they are a little unorganised. [Agen-cy] are super organised. I wasn't a priority as I was in a stable home. (Female, 18 years)

Be prepared. (Male, 18 years)

Better interactions with Department and young people leaving care. (Female, 18 years)

Do it while you're young. (Male, 18 years)

Do not waste what they give you. (Male, 18 years)

Do what you say your going to do.

Don't leave home; mum can look after you instead. (Female, 18 years)

Don't leave it till the last minute. (Male, 18 years)

So just got some pretty good relationships with carers since I left, and good to catch up with them and keep in contact after leaving care. (Male, 18 years)

Fricking sucked. It was terrible. I am barely scraping through. For a little while I was just living off rice and potatoes- I was only able to get more with support from other people which I shouldn't need to do and now feel in debt to. (Male, 18 years)

Good feeling to move into a house. (Female, 18 years)

I am better outside of care than I was in care.

I commend the support that I received from my agency. (Male, 18 years)

I do believe I never got spoken to about the transition. (Female, 18 years)

I don't know. They should change the age of leaving care or better support when transitioning. No matter how difficult the child is or how much they don't want to talk you need to tell them about their leaving care and what they can request and what can go into plan. They need to make young people under-stand how important it is. (Female, 18 years)

I had a really good support group of people and I thank them for teaching me the things I needed.
(Female, 18 years)

I hope for everyone in the future it runs as smoothly as it did for me. (Male, 18 years)

I just reckon that the government need to keep an eye on [Department] because there are some workers who are really horrible. In resi houses too. They wouldn't let me go to the same school as my sister. I was put on drugs that made me drowsy and that was hard. (Female, 18 years)

I shut down completely because I wasn't ready to talk about it. And I hated my youth workers. (Male, 18 years)

I think it really needs to be looked at. It should not be something that you can be afraid of. You need to feel supported. (Female, 18 years)

I think they should definitely allow more time; 2 months wasn't enough. They should do it when it's stable. Having case managers moving and quitting made this process difficult. (Male, 18 years)

I wanted people to listen to me more. (Female, 18 years)

I would have liked to do the plan and have explained what I can get and what help I can get. (Female, 18 years)

I would like to see money given for TILA, and then provide receipts. (Male, 18 years)

I'm free instead of them chasing me. (Male, 18 years)

I'm not really sure what I can say other than it would have been good to be better prepared for the worst case scenarios. (Female, 18 years)

I didn't get enough of a say in where I wanted to go and where I wanted to live, and the company that was going to work with me. (Male, 18 years)

In my opinion transitioning has been really hard. I have gone to [Department] a number of times to ask for bond assistance when renting. This was in January, and I still have not heard anything from them about it. They said that they had put the application in and they'll get back to me. it is now April. I have done it all by myself and I am not happy with the services. I feel I have been chucked into the deep with no information on who I need to speak to about things in my leaving care plan. (Female, 18 years)

It helped having someone to care about me, and someone to go to for support. I had a really good relationship with my carer and case manager. I had the same case manager for 4 years and she was great. (Male, 18 years)

It is good as I can be a lot more independent. I'm not good with rules. (Male, 18 years)

It is very good. I like the way it is. (Male, 18 years)

It should be done a year or a year and a half before the child leaves care, because six months before is like throwing them in the deep end. (Female, 18 years)

It sucks. (Female, 18 years)

It was a bit of a wait, but very happy when I got the news I got a house. (Female, 18 years)

It was a good process. (Female, 18 years)

It was difficult trying to figure things out [after leaving Department] like mov-ing from house to house every week or month. (Male, 18 years)

It was good. (Male, 18 years)

It was handled badly and I should have had a plan. (Male, 18 years)

It was horrible. It was probably the worst thing that happened for me in my time in [child protection]. If me and my partner had split up I would have been homeless. The Housing people said that because the application was put in so late that there was nothing for me. I feel like there should have been more in-formation and education from a younger age. I think I struggled a lot because I had a few different case managers and for a while I was case managed from an office four hours away. (Female, 18 years)

It was made really easy. (Female, 18 years)

It was rather confusing at the start but near the end I found it smoother and more comprehensible.
(Male, 18 years)

It was shit. It wasn't done properly. There was too much focus on the then and there not on the future. CSOs should have more time to invest in young people who are transitioning to ensure it gets done properly.
(Male, 18 years)

It would be nice to have been contacted; I would've liked some help. (Male, 18 years)

It's a bit of bad and a bit of good. (Female, 18 years)

It's OK but they don't give you much help considering how much of a big deal it is for your life.
(Male, 18 years)

It's too rushed. (Female, 18 years)

It's tough. (Male, 18 years)

It's very difficult because of its seen lack of importance by [department]. The process needs more active support and planning. (Female, 18 years)

I've been away from Nan a bit. Need to know that Nan will be OK without me. I think she will be though. I always have friends and people to turn too and con-tact if I need help. (Male, 18 years)

Leaving care is challenging but once you know you are doing it, it becomes easier. (Male, 18 years)

Living in foster care for 11 years will be different to living in the real world. (Male, 18 years)

Maybe if there's more services available. I didn't even know about [agency] until I was just leaving. I didn't even know. So if they [department] kind of adver-tised it a bit earlier. [Agency] helped me a lot; I was grateful for them. Maybe if she [caseworker] discussed it more with me. She just kind of told me about it and I was a bit hesitant, but when I did link in with them it was really good. (Female, 18 years)

Mine seemed to be done very fast. It was supposed to start when I was 16. So, they could have started earlier. (Female, 18 years)

Mine was really great because of the support I had from carers, and so I didn't really need anything from the Department. (Female, 18 years)

More time to get help after you are 18. (Male, 18 years)

My brother and sister; I hope they have a good plan. (Male, 18 years)

My leaving care was pushed up because it didn't happen in time. I wasn't sent until a couple of months until after I turned 18. If it happened on time, it would have caused less confusion. Other than that, it's worked out pretty well. (Female, 18 years)

My plan was great I made everything happened with my caseworker and got everything dealt with. (Female, 18 years)

No. I had to grow up because I had a child. (Female, 18 years)

No not really. It was pretty easy leaving care really. (Female, 18 years)

Plan would be useful if it happened. (Female, 18 years)

Pretty helpful. (Female, 18 years)

Ring up refuges to make sure young people have somewhere to sleep if their carers kick them out. (Female, 18 years)

Happy to not be in care anymore. (Female, 18 years)

Thanks. (Male, 18 years)

They aren't quick enough and I don't think they are organised enough. (Female, 18 years)

They shouldn't help some people and not others. I got nothing from my CSO and they should help all young people the same. (Female, 18 years)

Wasn't really hard.

Wasn't really sure what I was doing. I found it really complicated. (Female, 18 years)

Waste of time.

When I was transitioning from care, my CSO had an RDO on the day she was supposed to go with me to get my furniture and stuff. That was so not cool! They need to be there for young people. (Female, 18 years)

Young people need parents. (Male, 18 years)

Appendix F: Media Release Introducing the Original *Go Your Own Way* Kits in QLD

Media Statements

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Minister for Child Safety and Minister for Sport The Honourable Phil Reeves

Friday, November 19, 2010

New kit to help young people lead independent lives

Young people moving out of care and into independent living can do so with confidence thanks to new kits funded by the Bligh Government.

Child Safety Minister Phil Reeves said \$70,000 in funding was provided to the CREATE Foundation to put together bags filled with valuable resources.

"The *Go Your Own Way* kits are aimed at supporting and preparing young people transitioning from care to function as independent adults in the community," Mr Reeves said.

"The kits are brimming with resources including a cookbook, jobs guide, and an information pack on how to apply for housing, how to access health services, how to find a job and how to purchase a car.

"Transition can be a challenging time for young people who have been living in out of home care.

"It is essential these young people are better equipped and supported so they are confident to make the best decisions for their future."

CREATE Foundation Chief Executive Officer Jacqui Reed said young people, who had made the journey from care to independence had contributed to the design and content of the satchels.

"The *Go Your Own Way* kit includes a transition from care journal with words and inspiration from young people now living independently who wanted to share their own experiences," she said.

"We wanted young people to know that they are not alone and that there are many services and programs available to assist and support them."

The *Go Your Own Way* kits are being distributed through Queensland Government Child Safety Service Centres.

"Our community partners like CREATE Foundation and the services they provide help children and young people who are unable to live with their own families because of neglect and abuse," Mr Reeves said.

"Protecting children is everyone's business, and we appreciate the hardwork of our non-government organisations.

"We are committed to working with NGOs across the state.

"The Bligh Government has made the tough economic decisions to ensure we can continue to support our NGO partners so they can deliver these vital services."

Media contact: 3224 7081 or 3235 9236





end notes

7.0 Endnotes

- ¹ GYOW Kit Distribution X Jurisdictions: $\chi^2_{(6)} = 39.5, p = .0005$.
- ² $M_{\text{Workbook}} = 4.0, 95\% \text{ CI } [3.7, 4.3], M_{\text{Journal}} = 3.8, 95\% \text{ CI } [3.5, 4.2], M_{\text{Compendium}} = 4.3, 95\% \text{ CI } [4.0, 4.7], M_{\text{USB}} = 4.6, 95\% \text{ CI } [4.2, 5.0], M_{\text{Satchel}} = 4.4, 95\% \text{ CI } [4.1, 4.7]$.

A univariate repeated-measures ANOVA (employing the Greenhouse-Geisser correction) was conducted comparing GYOW Kit usefulness of components: $F_{(4, 308)} = 7.2, p = .0005$, partial eta squared = .08. Paired comparisons showed: $M_{\text{Workbook}} < M_{\text{USB}}, p = .012; M_{\text{Journal}} < M_{\text{Compendium}}, p = .025, M_{\text{USB}}, p = .0005, M_{\text{Satchel}}, p = .03$.

- ³ Cultural group X Plan: $\chi^2_{(2)} = 3.0, p = .225$.
Placement type X Plan: $\chi^2_{(6)} = 3.2, p = .783$.
- ⁴ Jurisdiction X Plan: $\chi^2_{(6)} = 28.9, p = .0005$.
- ⁵ $M_{\text{Carer}} = 4.2, 95\% \text{ CI } [4.0, 4.5], M_{\text{Caseworker}} = 4.3, 95\% \text{ CI } [4.1, 4.6], M_{\text{Birth Parents}} = 1.8, 95\% \text{ CI } [1.6, 2.0], M_{\text{Siblings}} = 2.0, 95\% \text{ CI } [1.8, 2.3], M_{\text{Other Family Member}} = 1.7, 95\% \text{ CI } [1.6, 1.9], M_{\text{Friends}} = 2.4, 95\% \text{ CI } [2.1, 2.6]$.

A univariate repeated-measures ANOVA (employing the Greenhouse-Geisser correction) was conducted comparing involvement of supporters: $F_{(5, 920)} = 150.3, p = .0005$, partial eta squared = .42. Paired comparisons showed: M_{Carer} and $M_{\text{Caseworker}} > M_{\text{Birth Parents}} (p = .0005), M_{\text{Siblings}} (p = .0005), M_{\text{Other Family Member}} (p = .0005), M_{\text{Friends}} (p = .0005); M_{\text{Birth Parents}} < M_{\text{Friends}} (p = .001); M_{\text{Other Family Member}} < M_{\text{Friends}} (p = .0005)$.

- ⁶ Kit X Plan (raw data): $\chi^2_{(1)} = 7.1, p = .008$.
- ⁷ Kit X Plan (matched data): $\chi^2_{(1)} = 4.0, p = .046$.
- ⁸ $M_{\text{Plan}} = 4.5, 95\% \text{ CI } [4.3, 4.7], M_{\text{No Plan}} = 4.2, 95\% \text{ CI } [4.0, 4.3], M_{\text{Where Live}} = 4.1, 95\% \text{ CI } [3.9, 4.2]; M_{\text{Study}} = 4.1, 95\% \text{ CI } [3.9, 4.2]; M_{\text{Employment}} = 4.1, 95\% \text{ CI } [3.9, 4.3]; M_{\text{Finances}} = 3.8, 95\% \text{ CI } [3.7, 4.0]; M_{\text{Self Care}} = 4.7, 95\% \text{ CI } [4.5, 4.8]; M_{\text{Family}} = 4.6, 95\% \text{ CI } [4.4, 4.8]; M_{\text{Friends}} = 4.9, 95\% \text{ CI } [4.7, 5.0]; M_{\text{Support Services}} = 4.4, 95\% \text{ CI } [4.2, 4.5]; M_{\text{Documentation}} = 4.5, 95\% \text{ CI } [4.3, 4.7]$.

The 2 X 9 (Plan X Life Domains) mixed ANOVA, with repeated measures on the Domains factor produced significant main effects for Plan ($F_{[1, 336]} = 7.9, p = .005$, partial eta squared = .02) and Domains, applying the Greenhouse-Geisser correction ($F[7, 2282] = 26.9, p = .0005$, partial eta squared = .07). Paired comparisons showed: $M_{\text{Where Live}} < M_{\text{Self Care}} (p = .0005), M_{\text{Family}} (p = .0005), M_{\text{Friends}} (p = .0005), M_{\text{Documentation}} (p = .0005); M_{\text{Study}} > M_{\text{Finances}} (p = .0005), M_{\text{Study}} < M_{\text{Self Care}} (p = .0005), M_{\text{Friends}} (p = .0005); M_{\text{Employment}} < M_{\text{Self Care}} (p = .0005), M_{\text{Family}} (p = .0005), M_{\text{Friends}} (p = .0005), M_{\text{Documentation}} (p = .0005); M_{\text{Finances}} < M_{\text{Study}} (p = .0005), M_{\text{Self Care}} (p = .0005), M_{\text{Family}} (p = .0005), M_{\text{Friends}} (p = .0005), M_{\text{Support Services}} (p = .0005), M_{\text{Documentation}} (p = .0005); M_{\text{Self Care}} > M_{\text{Support Services}} (p = .003); M_{\text{Family}} < M_{\text{Friends}} (p = .02); M_{\text{Friends}} > M_{\text{Support Services}} (p = .0005), M_{\text{Documentation}} (p = .002)$.

- ⁹ Comparisons of Awareness of Support (Sure vs. Unsure) X Plan (Yes or No) found the following results for the various Domains: Housing: $\chi^2_{(1)} = 4.9, p = .03$; Education: $\chi^2_{(1)} = 5.1, p = .02$; Employment: $\chi^2_{(1)} = 0.7, p = .39$; Finances: $\chi^2_{(1)} = 4.9, p = .03$; Life Skills: $\chi^2_{(1)} = 6.8, p = .01$; Family Contact: $\chi^2_{(1)} = 4.5,$

$p = .03$; Other Support Services: $\chi^2_{(1)} = 1.5, p = .22$; Personal Documentation: $\chi^2_{(1)} = 1.1, p = .29$.

- ¹⁰ Percentages here were based on the number of listings made by young people that did not indicate uncertainty. Housing = 289; Education = 286; Employment = 263; Finances = 237; Life Skills = 242; Family Contact = 214; Other Support Services = 191; Personal Documentation = 237.
- ¹¹ Comparison of Sex X Living Arrangements: $\chi^2_{(9)} = 24.1, p = .004$.
- ¹² Comparison of Sex X Access to TILA: $\chi^2_{(2)} = 9.7, p = .008$.
- ¹³ Comparison of Jurisdiction X Access to TILA: $\chi^2_{(12)} = 63.4, p = .0005$.
- ¹⁴ Comparison of Plan X Access to TILA: $\chi^2_{(2)} = 21.0, p = .0005$.



Notes



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1800 655 105 is a free-call number that young people in care and their carers can use. However, there may be fees charged if calling from a mobile.