

YOUNG PEOPLE  
TRANSITIONING FROM  
OUT-OF-HOME CARE  
IN VICTORIA:  
Strengthening support  
services for dual clients  
of Child Protection and  
Youth Justice

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# **Young People Transitioning from Out-of-Home Care in Victoria: Strengthening Support Services for Dual Clients of Child Protection and Youth Justice**

## **Abstract**

Young people living in Out of Home Care (OHC) are among the most vulnerable and disadvantaged in our community. Unfortunately, a significant proportion of such young people in numerous countries exit OHC via the Youth Justice (YJ) system – an outcome that is unacceptable in a civilised society, and one that exposes such young people to further risks, and reduces their likelihood of full social and economic engagement in the mainstream. This report presents the initial findings of a research project based on a partnership between Monash University and seven non-government child and youth welfare agencies in Victoria, Australia. The project is intended to identify practices and policies that will reduce the over-representation of young people leaving OHC in the YJ system, and promote their inclusion in mainstream social and economic life. A qualitative, exploratory design has been used to explore the perspectives of a range of stakeholders (including leaving care support workers, and representatives of the Child Protection (CP), YJ, youth drug and alcohol and legal systems) on practice and policy factors that both progress and inhibit successful transitions. Findings pointed to a need for more formalised interagency collaboration, and intensification of the interventions and supports offered both in custodial settings and post discharge from custody or care.

## **Introduction**

There are currently over 37,000 children and young people residing in out-of-home care (OHC) in Australia, of whom approximately 95% live in home-based care (either foster or kinship care), and only 5% in residential care (Australian Institute of Health and Welfare, 2012). It has been estimated that 2889 young people aged 15-17 years were discharged from OHC in 2010-11, and the figure for Victoria was 803 (AIHW, 2012).

Young people leaving state OHC are one of the most vulnerable and disadvantaged groups in society. Their pre-care experiences of abuse and neglect, their often poor in-care experiences, their accelerated transitions to adulthood, and the lack of ongoing support they receive upon leaving care make them vulnerable to a number of poor outcomes (Courtney & Dworsky, 2005; Mendes, Johnson, & Moslehuddin, 2011; Osborn & Bromfeld, 2007; Stein, 2006).

One specific and pressing concern is the over-representation of care leavers in the criminal justice system, particularly in youth detention facilities. Youth Justice (YJ) in Victoria includes the systems which are “*responsible for the statutory supervision of young people in the criminal justice system*” (Department of Human Services, 2011b). YJ orders in Victoria comprise community-based orders and custodial tariffs (including remand), with a strong diversionary focus where possible (Youth Services and Youth Justice, 2010). In Victoria, YJ services may be extended to young people aged 17 at the time of offending, but aged less than 21 at the time of sentencing, enabling adult courts to sentence a young offender to a Youth Justice Centre rather than adult prison (DHS, 2011b). The over-representation of care leavers in YJ systems concerning given that young people who have been under YJ orders are more likely to progress to the adult criminal justice system (Kalb & Williams, 2002), thereby experiencing a range of associated negative health and socio-economic consequences (Lynch, Buckman, & Krenske, 2003). Recent research from Victoria indicates that almost 60 per cent of 17 to 20 year olds return to prison within two years (Holland, Pointon, & Ross, 2007).

In recognition of the need to provide ongoing assistance to young people being discharged from state care, Victoria legislated via the *Children, Youth and Families Act 2005* for the provision of leaving care and after-care services for young people up to 21 years of age. The Act obliges the government to assist care leavers with finances, housing, education and training, employment, legal advice, access to health and community services, and counselling and support depending on the assessed level of need, and to consider the specific needs of Aboriginal young people. Mentoring, post-care support and flexible funding for young people transitioning from care or post-care in all eight DHS regions

(DHS, 2010). At a national level, the Out-of-Home Care Standards introduced in December 2010 include a requirement that all young people have a *transition from care plan* commencing at 15 years of age, detailing proposed assistance with housing, health, education and training, employment and income support (FaHCSIA, 2011). However, neither the Act nor the National Standards make specific reference to the availability of support for those young people involved with YJ during their transition from care.

## **Literature Review**

### ***State Care and Youth Offending***

A number of Australian studies have found a significant correlation between experiences of state care and criminal behaviour (Carrington, 1993; Community Services Commission, 1996; Indig, 2011; Lynch et al., 2003; McFarlane, 2008, 2010; Morgan Disney & Associates & Applied Economics, 2006; NSW Ombudsman, 2010; Raman, Inder, & Forbes, 2005; Wood, 2008). A 2011 report indicated that 9% of a sample of 151 care leavers in Victoria (aged 16 to 21) had spent time in custody since leaving care (DHS, 2011a). Of those who had been incarcerated since leaving care, 69% had been incarcerated once, 8% had been incarcerated twice, 8% were incarcerated three times and 15% were incarcerated four times (DHS, 2011a). Another survey of 60 care leavers in Victoria (Raman et al., 2005) found that nearly half the Victorian care leavers interviewed had had some type of involvement with the police or justice system, and 12% had spent time in detention in the twelve months after exiting care. This included a range of matters such as being charged with an offence, being served an intervention order, being evicted from a residence, and being a victim of domestic violence. A national study by Maunders, Liddell, Liddell & Green (1999) found that more than half the 43 care leavers interviewed had committed criminal offences since leaving care. Four of these young people had spent time in prison. Similarly, two national studies by Morgan Disney and Associates & Applied Economics (2006) and the Australian Institute of Health and Welfare (2008) cite numerous studies from the States and Territories confirming a link between time in out-of-home care and involvement in the youth and adult criminal justice systems. The two national surveys by McDowall for the Create Foundation (2008; 2009) also report a disproportionate number of care leavers (19.2 and 27.8% respectively) involved with the YJ system.

Specific surveys of YJ populations also suggest a high correlation. A study referred to in a 2002 report from the Victorian Department of Human Services noted that 86 per cent of the young people who received a custodial sentence by the Children's Court between January and August in 2001 (n=94) had previously been placed in OHC, and most of these young people (57%) had experienced 5 or more placements (Community Care Division, 2002). A 2008 report by Justice Wood cited two NSW studies which estimated that 21-28% of males and 36-39% of females on community orders had previously lived in OHC (Wood, 2008). Similarly, the 2010 review of the NSW Juvenile Justice System estimated that 28% of male and 39% of female youth detainees had a history of OHC placement (Murphy, McGinness, Balmaks, McDermott, & Corriea, 2010). The past three Annual Reports of the Victorian Youth Parole and Youth Residential Boards have also indicated that one third to one half of young people in custody had a current or previous involvement in state care (The Youth Parole Board and Youth Residential Board of Victoria, 2009, 2010, 2011). This is a particularly significant figure given that less than 5 per 1,000 children aged 0-17 in Victoria were in OHC in 2011, over half of whom were aged under 5 years (Australian Institute of Health and Welfare, 2012).

Overseas studies also show an overrepresentation of young people from OHC backgrounds in YJ systems (Arnull et al., 2005; Barth, 1990; Blades, Hart, Lea, & Willmott, 2011; Cusick & Courtney, 2007; Darker, Ward, & Caulfield, 2008; Dixon, Wade, Byford, Weatherley, & Lee, 2006; Her Majesty's Inspectorate of Prisons, 2011; Jacobson, Bhardwa, Gyateng, Hunter, & Hough, 2010; Jonson-Reid & Barth, 2000; McFarlane, 2008; Packard, Delgado, Fellmeth, & McCready, 2008; Summerfield, 2011; Taylor, 2006). For example, a 2011 report of over 1000 young people in custody in the UK identified that over a quarter of young men and over half of young women in custody had spent time in OHC (Summerfield, 2011). A number of factors appear to contribute to this association as detailed below.

### ***Child maltreatment and youth offending***

Several studies have examined the links between child maltreatment (neglect and/or abuse) and youth offending (Jonson-Reid & Barth, 2000; Ryan, Marshall, Herz, & Hernandez, 2008; Ryan & Testa, 2005). Queensland-based

research conducted by Stewart et al (2002) found that young people with one or more substantiated maltreatment records were more likely to have a later offending record than those with no substantiated maltreatment (17% vs 10%). Additionally, maltreated young people who had experienced an OHC placement were twice as likely (26% vs 13%) to have subsequently offended than those who were maltreated but had never been placed in OHC. This finding has been confirmed in the international literature (Ryan & Testa, 2005), and it has been proposed that “*placement outside of the home is likely to be indicative of the seriousness of the maltreatment*”, based on the finding that young people who had been placed outside the home were more likely to have experienced multiple types of maltreatment (Stewart et al., 2002, p. 5).

Theoretical analysis suggests that the association between child maltreatment and youth offending may be explained within the framework of attachment theory. For example, experiences of abuse and neglect may lead to weakened attachment (or sense of felt security) between a child and their care-givers, subsequently enhancing the influence of any delinquent peers. It has been surmised that together, these constitute strong contributory factors for delinquency amongst young people in care (Weatherburn, 2001).

While the link between abuse and neglect and youth offending is established, it must be emphasised that not all maltreated children go on to offend (McFarlane, 2008; Stewart et al., 2002; Stewart, Livingstone, & Dennison, 2008), and not all young people enter care as a result of abuse or neglect. Indeed, Minty and Ashcroft (1987) found that 41% of a sample of young boys who were admitted into care due to parental illness, death or incapacity had received three or more convictions in adulthood. This emphasises the complex interplay between parental well-being and parenting skills, and challenges simplistic assumptions that maltreatment is the sole cause of delinquency amongst young wards (Taylor, 2006).

Research has identified other factors which influence the risk of involvement in the youth justice system amongst OHC populations, including age, gender, and the type(s) of maltreatment experienced. Studies on delinquency amongst state

wards have consistently reported that males offend at higher rates than females (Cusick & Courtney, 2007; Darker et al., 2008; Jonson-Reid & Barth, 2000; Ryan, Hong, Herz, & Hernandez, 2010; Ryan, Marshall, et al., 2008; Stewart et al., 2002; Taylor, 2006), and that the risk of offending increases with age during adolescence. For example, Wise and Egger (2008) found that 19% of 10 to 14 year-olds in the Victorian care system had been warned or cautioned by police or charged with a criminal offence, compared with 36% of those aged 15 and over. However, both of these findings are fairly consistent with youth offending statistics generally (Cusick & Courtney, 2007; Farrington, 1986).

The developmental stage at which maltreatment occurs and the age at first placement are factors impacting upon risk of youth offending. Children whose first OHC placement or final substantiated maltreatment occurs at an older age are more likely to offend (Jonson-Reid & Barth, 2000; Ryan & Testa, 2005; Stewart et al., 2002; Stewart et al., 2008). Stewart et al (2007) found that maltreated youths who offended were older at the age of final substantiated maltreatment notification (mean=10.6 years) than those who did not offend (mean= 8.6 years). Stewart et al (2008) later confirmed the finding that children who experienced maltreatment into their adolescence were more likely to offend than children whose maltreatment occurred only prior to adolescence.

Additionally, victims of physical abuse are more likely to offend than victims of other forms of maltreatment (Ryan, Marshall, et al., 2008; Stewart et al., 2002). It is worth noting, however that the above studies utilised case file data to categorise the nature of abuse and/or neglect experienced by young people. Such methods are limited in that they risk under-reporting the nature and extent of maltreatment experienced, as well as oversimplifying the complexities of abuse and neglect (for example, failing to recognise that all child abuse entails emotional abuse).

Systemic factors impacting on the risk of offending include OHC placement type and placement stability, as well as the level of support provided during and after the transition from state care. Studies suggest that young people who have experienced a higher degree of placement instability (Community Services

Commission, 1996; Cusick, Courtney, Havlicek, & Hess, 2010; Ryan & Testa, 2005; Taylor, 2006) or who have had placements in group homes or residential care settings (Ryan, Marshall, et al., 2008; Schofield et al., 2012; Taylor, 2006) are more likely to offend. A study carried out by Ryan et al (2008) found that residential placements were associated with a significantly higher risk of delinquency even after controlling for a range of variables including age at placement, race, gender and previous placement instability. The relative risk of delinquency for those young people who had experienced at least one group home placement was two and a half times greater than for youth in foster or kinship settings (Ryan, Marshall, et al., 2008). Indeed, a US study by Herz et al (2006) found that one third of offences from their sample of 580 cases involving dual order clients were placement-related, most often occurring in group homes. This has led some authors to comment on the ‘criminalisation’ of children in state care, where a legal response is adopted to behaviours such as property destruction, which may be managed differently within a family home (Krinsky, 2010; Schofield et al., 2012; Taylor, 2006). A 2011 UK in-depth survey of 23 young people in care identified that some believed that being in care was the primary factor contributing to their offending behaviour. Others viewed it as a secondary factor, citing loss of contact with family and friends, poor relationships with carers and workers, relationships with peers and peer pressure, and type of placement and frequency of placement moves as the main influences on their offending (Blades et al., 2011).

Other individual factors impacting on offending behaviour amongst young people in care include boredom, disengagement from education, substance use, mental health difficulties, intellectual disability, fun or the “rush” of committing crime, intergenerational involvement in the criminal justice system, and financial difficulties (Blades et al., 2011; Haapasalo, 2000; Her Majesty's Inspectorate of Prisons, 2011; Herz et al., 2006; Indig, 2011; Snow & Powell, 2008, 2011; Taylor, 2006).

### ***Youth offending and leaving care***

After a long period of neglect, the subject of young people transitioning from State care has recently become a key target for Australian policy and practice interventions. Leaving care is formally defined as the cessation of legal

responsibility by the State for young people living in OHC. In practice however, leaving care is a major and fraught life transition that involves shifting from dependence on State support and accommodation to so-called self-sufficiency.

No Australian studies have specifically examined youth offending and contact with YJ systems during the period of leaving care (i.e. during late adolescence). Yet this is a significant time for many reasons: first, research indicates that in general, it is during this period that offending increases (Farrington, 1986; Hirschi & Gottfredson, 1983). Secondly, offending behaviour during this time is likely to impact upon the success of the transition from state care, and thirdly, those transitioning into YJ custody appear to be disadvantaged in terms of ongoing support compared to other care leavers (Moslehuddin, 2010). Some international studies have examined offending behaviour during the transition from care, with most focusing on crime rates rather than upon organisational or inter-organisational practice and policy responses.

US researchers Cusick and Courtney (2007) compared the offending behaviours of care leavers with the general population in a large-scale longitudinal study. Results indicated that the care population was about twice as likely to report engagement in a variety of offending behaviours (from property damage to shooting or stabbing) from age 16 to 17. But wards, like their peers, seem to have engaged in less crime as they got older and moved into adulthood, with fewer differences in self-reported offending at the age of 19. While offending was lower for both wards and non-wards at 19, those who had been in care were still significantly more likely to report certain property and violent offences. By the age of 19, more than half of the males (57%) and more than a third of the females (34%) who had been in care reported being arrested at least once compared with 20.1% of males and 2.8% of females in the general population sample. While less than two per cent of males and females in the general population sample reported being arrested since turning 18, 35.9% of males and 17.9% of females formerly in care reported arrest between 18 and 19 years of age.

Cusick et al. (2010) also developed a typology of offending amongst young people transitioning from care (from surveying their samples at 17-18 years, 19

years and 21 years of age) which distinguished between rare or non-offenders (34 per cent of sample); adolescent offenders (28%) whose offending diminished by age 19; desisting offenders (19%) whose offending behaviours diminished by age 21; chronic offenders (11%) who had the highest probability of violent and non-violent offending behaviours over time; and chronic non-violent offenders (8%) who had a high probability of engaging in non-violent offences at each of the surveyed time points.

The age of discharge and level of post-care support may impact upon the risk of offending (Schofield et al., 2012; Taylor, 2006). In her study of 39 care leavers in the UK, Taylor (2006) identified that only one of the eight young people who had left care aged 18 or over had served a custodial sentence, compared to 13 of the 20 individuals who had been discharged by the age of 16. Additionally, Taylor found that regardless of their experiences whilst in care, the young people often had poor leaving care experiences, and commented that those who had become involved with alcohol and drugs were at particularly high risk of becoming involved in crime. Lyon, Dennison and Wilson (2000) similarly found that young people felt that their needs were unmet in trying to navigate the transition to independent living. Crime was described as a necessary response by young people to meet basic needs including maintaining accommodation and providing for children.

### ***Interagency Collaboration***

The benefits of effective interagency collaboration in child welfare service delivery include improved service quality and cost-effectiveness (Darlington, Feeney, & Rixon, 2005; Green, Rockhill, & Burrus, 2008; New South Wales Department of Community Services, 2010). Research has identified mutual trust, a shared understanding of roles and priorities, clear legislation and policy, effective leadership and adequate resourcing as key factors for fostering cross-agency cooperation in human services delivery (Darlington et al., 2005; Green et al., 2008; Howell, Kelly, Palmer, & Mangum, 2004; Krsevan, Dwyer, & Young, 2004; New South Wales Department of Community Services, 2010).

Hart (2006) specifically examined the interface between State care and YJ custodial systems in the UK and identified the potential for service gaps and interruptions to care planning as a result of a lack of clarity around processes and roles. CP workers felt unclear about their role in the context of a young person in custody, and were reportedly the least involved in planning for young peoples' releases (Hart, 2006). Some of the young people also experienced difficulties adhering to post-release conditions and nearly half had experienced placement breakdowns following their release from custody. Hart emphasised the importance of CP services maintaining involvement in the life of young people sentenced to youth custody orders both during the custodial sentence and post-release.

A recent thematic review of young wards in custody in the UK found that having dedicated YJ workers specialising in OHC cases was an effective strategy that improved relationships between the two statutory departments (Her Majesty's Inspectorate of Prisons, 2011). A further recent study in the UK recommended that strategies adopted by YJ services for prevention and early intervention with offending behaviour could be similarly implemented in OHC services (Schofield et al., 2012).

### ***Summary***

Young people leaving care have complex needs, which tend to fall “between the cracks” at policy and practice levels. The existing leaving care studies undertaken in Australia and elsewhere consistently report how poorly equipped young people leaving care are to cope with the multiple transitions they have to make in a short period of time, and with little support (Mendes et al., 2011; Morgan Disney & Associates & Applied Economics, 2006). The involvement of young care leavers in the YJ system adds further complexities to an already compressed and accelerated transition to independence, and although the Australian and international research has identified a number of factors that contribute to the high offending rates of young people in care and transitioning from care, there remains a significant lack of knowledge concerning the precise impact of YJ involvement upon the leaving care process, particularly in the Australian context. Additionally, it is unclear how effectively current policies and practices in both the OHC and YJ systems function individually and

collaboratively to address the needs of this vulnerable client group during both the leaving care and post-care periods.

This study builds on a Victorian pilot study conducted by two of the authors which suggested that collaborations between CP and YJ aimed at supporting young people in custody are poor, and that effective case planning is more often the result of commitment and dedication by individual workers than of organised inter-agency processes (Mendes & Baidawi, 2012). The aim of this study, therefore, was to examine the inter-relationship between the CP and YJ systems, and particularly to explore the processes that take place when young people involved in the YJ system leave state care. Further objectives were to examine the availability of targeted preventive social and educational programs to assist this group of young people whilst still in care, to understand how leaving care plans and policies address and minimize involvement with YJ, to understand the role, if any, of formal consultations with YJ regarding this group of care leavers and to understand the ongoing role of YJ post-care particularly when young people are in custody at the time of their exit from care.

## **Methodology**

This study was conducted in partnership with the Victorian Office of the Child Safety Commissioner and a consortium of non-government organisations delivering services in the OHC and YJ systems in Victoria (Berry Street, Jesuit Social Services, OzChild, The Salvation Army Westcare, The Youth Support and Advocacy Service and Whitelion).

Data was collected from a non-probability sample of key stakeholders in the OHC, YJ, drug and alcohol, and legal fields. Most participants were self-selecting from the project partner agencies and other organisations, and other individuals were purposively sampled based on their expertise with the key issues. In-depth semi-structured interviews and focus groups took place at various agencies across Victoria or other convenient locations. Data was

gathered around six key issues: why care leavers are over-represented in YJ; knowledge of ongoing support provided by CP services to dual order care leavers; the role of leaving care plans in addressing involvement with YJ; effective collaboration and consultations between CP and YJ during the leave care period; actions taken by YJ organisations to address the needs that care leavers; and best practice social and educational programs. These topics were developed based on a review of the existing literature and consultation with policy and practice experts.

Focus groups have been established as an effective method for qualitative data collection in social work research (Linhorst, 2002). This methodology was aimed at stimulating discussion between agency staff around the key issues, which according to Alston and Bowles (2003, p. 120) may enable the generation of responses which may have not have been previously considered by individual participants. Where focus groups were impractical or not possible, individual interviews were conducted, generating in-depth reflections and case examples from professionals regarding their experiences and views around the key issues. The use of multi-method approaches is also widely accepted in social work research (Linhorst, 2002). Combining focus group and individual interview methods allows for the uncovering of both broad macro concepts and micro-level individual experiences, generating a more complete understanding of the issues being examined.

Approval was obtained from the Monash University Human Research Ethics Committee. All interviews and focus groups were audio-taped and transcribed and the data was then entered into NVivo9 for coding. Thematic analysis was conducted by categorising recurring ideas within the transcript data (specifically where a response or concept was raised on three or more occasions) in order to identify the key findings. Multiple coding of a selection of transcripts by two members of the research team was utilised to check inter-rater reliability of the coded themes. This method has been suggested as useful for enhancing rigour in qualitative data analysis (Barbour, 2001; Mays & Pope, 1995).

## Results and Discussion

A total of 77 individuals participated in interviews or focus groups in this phase of the study. Most respondents were self-selecting from the agencies where the study was advertised, and were recruited from a range of fields including the OHC system, the YJ system, youth drug and alcohol services and legal services. In some instances, individuals were approached directly based on their expertise in the study area, or as a result of snowball sampling from previous participants. Table 1 summarises data collection processes.

**Table 1 – Research Respondents**

<b>Respondent source</b>	<b>Interviews Completed</b>	<b>Focus Groups completed</b>	<b>Total participants</b>	<b>Victorian Department of Human Services (DHS) Regions</b>
<b>Agency1</b>		2	20	Southern Metropolitan & Gippsland
<b>Agency2</b>		1	9	North & West Metropolitan
<b>Agency3</b>	1	3	8	Southern Metropolitan
<b>Agency4</b>		3	9	North & West Metropolitan
<b>Agency5</b>		1	8	North & West Metropolitan
<b>Agency6</b>	4	2	10	Southern & Eastern Metropolitan
<b>Other (Ex-CP /Ex-YJ /OHC /leaving care)</b>	4	1	10	Grampians & Southern Metropolitan
<b>Other (Legal)</b>	2		3	State-wide
<b>Total</b>	<b>11</b>	<b>13</b>	<b>77</b>	

Overall, interviewees possessed extensive experience in working with current or previous dual order clients and represented perspectives from CP, YJ and associated support services across a number of DHS regions. Table 2 outlines the professional experience of the respondents in working with dual order CP and YJ clients.

**Table 2 – Respondent experience of contact with dual order clients**

<b>Child Protection</b>	Case workers, case managers, program coordinators and program managers
<b>Out of Home Care</b>	Residential care, kinship care and foster care case managers, supervisors and program managers
<b>Leaving care &amp; post care services</b>	Leaving care workers and program managers, post-care workers and program managers
<b>Youth Justice</b>	Youth Justice case management and program managers (community and custodial)
<b>Post-Youth Justice Services</b>	Youth Justice Community Support Services (YJCSS) and Youth Justice-Transitional Housing Management (YJ-THM) case workers and program managers
<b>Other services</b>	Education, training (JPET), legal aid, drug and alcohol outreach and residential rehabilitation/detox workers and managers, housing/ homelessness services (Supported Accommodation Assistance Programs (SAAPs), Lead Tenant programs and other Transitional Housing Management (THM) services/programs), mentoring services (volunteers, workers and managers; both custodial and community-based services), early intervention services for young people at risk of entering the Youth Justice system

The following discussion presents a summary of the views of the 11 interviewees and the 66 focus group participants consulted.

***Factors contributing to the over-representation of young people leaving care in Youth Justice System***

Respondents pointed to a range of interrelated individual, environmental and systemic factors which influenced the overrepresentation of care leavers in the YJ system.

Participants identified the most significant individual factor leading care leavers to become involved in YJ systems as their backgrounds abuse and neglect. This view echoes previous research (Darker et al., 2008; Jonson-Reid & Barth, 2000; Ryan, Marshall, et al., 2008; Stewart et al., 2002; Stewart et al., 2008), indicating that young peoples’ in-care experiences were insufficient in providing positive attachments to overcome their histories of trauma. It was also pointed out that some young peoples’ in-care experiences further exacerbated pre-existing attachment issues, and one respondent commented that, “...it is the *traumatisation through the system that I think is the frustrating part*”. As a

result, these young people were regarded as more vulnerable to a range of circumstances contributing to offending, including emotional dysregulation, mental health issues and substance abuse problems. Overseas expert commentary has similarly drawn attention to the *“failure to attend to the needs and concerns of youth at risk”* as a contributing factor to offending behaviour (Krinsky, 2010, p. 323). Other individual factors seen to be influential paralleled results of previous research, including having extended family involvement in the criminal justice system (Indig, 2011), boredom (Blades et al., 2011), and experiences of school exclusion (Darker et al., 2008).

In the absence of positive attachments, interviewees believed that young people in care sought a sense of identity and belonging wherever it could be found. One worker explained, *“Our young people we know throughout their time in out of home care, they’re constantly looking for an attachment. It’s never specific as to whether or not that’s a negative or a positive attachment – more often than not it’s negative - but they’re getting their needs met, that’s what the attachment’s doing”*. In order to fulfil this *“craving for connection”* (Krinsky, 2010, p. 323), the interviewees stated that their clients were drawn to be involved with other young people, including peers in residential care settings, their local neighbourhood, older siblings or extended family networks. Environmentally, respondents stated that residential care in particular presented opportunities for engagement with offending peers. A former YJ worker made the following comment, *“...where you’re chucking young people into a residential unit together who have a multitude of different issues, or the same issues they’re going to gravitate towards each other, and if they’re not feeling as though they’re living in a family environment, then they’re going to be making connections with people that make them feel that they belong”*.

Consistent with previous findings (Taylor, 2006), respondents expressed the view that YJ custody may provide a sense of stability, familiarity and containment for young people, who would often have friends or acquaintances in custody. A leaving care worker explained that *“... some of the kids actually prefer to be incarcerated, because the routine’s set, they know where they’re going, they’re going to eat, they have a sense of belonging”*. Conversely, other interviewees said that their clients had negative views of YJ custody, having

experienced bullying and victimisation, and resenting adult “control” in their lives.

A lack of post-care supports, including insufficient finances and inappropriate accommodation were also seen as contributors to offending post-care. One leaving care worker commented that in such cases “...*the exit is temporary or to homelessness and so they’re just surviving they’re doing what they can to survive... they’re relying on the networks that they’ve established whilst they’re in care*”. A legal representative similarly reported working with care leavers who had been charged with theft for items such as “...*runners or clothes.... Food is a common one*”. The idea that some care leavers commit crimes for welfare-based reasons has also been raised in other research (Lyon et al., 2000; Taylor, 2006). A leaving care worker described the following case of a young care leaver, “*He actually went out, robbed a guy at knife point, only took enough to eat with and gave the man his phone number and said, ‘look call me next week, when I get paid I’ll come and give you the money back’. That’s a true story*”. Another case manager stated, “*I’ve heard young people say ‘well at least at Parkville I know I’m going to get three meals a day’. That’s what young people were sort of saying in desperation almost, knowing that they didn’t have anywhere else to go which is a bit of an indictment*”.

### **Other variables – Gender, culture, placement type and offending history**

- **Gender**

Participants consistently stated that the majority of dual order clients were male, however in discussing gender differences amongst dual clients, workers commented that they had recently observed young females being arrested for increasingly violent crimes. They stated that while their numbers are smaller than the males, they have found female dual order clients to have complex histories of abuse, mental health issues and associated behavioural problems. Conversely, respondents stated that male dual order clients often became involved with YJ due to an accumulation of offences including thefts, robberies and property destruction, and were often more difficult to verbally engage than the young female clients.

- **Culture**

Interviewees further observed that the majority of dual order clients came from Anglo-Saxon backgrounds, however some regions reported an overrepresentation of young people from Aboriginal and Torres Strait Islander (ATSI) backgrounds, and a minority reported higher numbers from New Zealander and African backgrounds. Respondents stated that other than referral to culturally-specific support services, the same approach was generally adopted for dual clients from culturally-diverse backgrounds. The exception to this was the response to ATSI dual order clients, who were able to access Koori Children's Courts and in some cases Koori YJ Programs and other specific housing and support services. It was also noted that cultural issues may affect young peoples' engagement in and response to YJ systems. One respondent noted that young people from culturally diverse backgrounds sometimes, "*say yes to anything in order to get out [of detention]*". Others observed that young people from culturally diverse backgrounds "*don't think it is alright to say no or that we don't understand*".

It was pointed out that the over-representation of ATSI clients in the YJ system may simply be a consequence of their higher numbers in the OHC system. The research participants further described some difficulties in engaging young ATSI dual order clients, who generally had extensive family networks where they might gravitate to for support.

- **Placement type and Offending History**

The research participants consistently stated that the vast majority of dual order clients were from residential care backgrounds. However, this may not necessarily indicate that young people only become involved in offending behaviour after entering residential care. Analogous to overseas findings (for example Schofield et al., 2012), workers reported that foster carers were usually reticent to be involved with young people who were already involved with YJ or who have begun engaging in more serious offending behaviour. The following comment was made by a foster care case manager: "*That mid-teen range I think, that sort of 14, 15, 16 can get quite problematic. They start*

*running away, staying out, getting involved with drugs and alcohol. It can be quite a big issue at that age, which carers sometimes won't have a bar of".*

It was observed that while young people that entered residential care generally had some offending history, “...*once they're in the resi system their offending does get worse, and it becomes more regular*”. Conversely, staff from home-based care (foster and kinship) services observed that only a small proportion of their clients had YJ contact prior to entering the service, however they also reported a perceived recent trend of more higher-risk adolescents entering foster care with behaviours that are unmanageable by their biological families. One case manager explained, “...*we're even getting a lot more adolescents being referred to us... we don't have a lot of information on how to manage them, and it is an area we need to get better at dealing with, these more high risk adolescents who we don't normally have in our program.*” Further investigations could be warranted to understand the drivers, incidence and outcomes of adolescent referrals to foster care services.

### ***Child protection support to care leavers involved with Youth Justice***

In accordance with DHS protocols (DHS, 2005), respondents stated that CP or the case contracted non-government organisation (NGO) retains case management role for dual order clients serving community-based orders, and maintains involvement with clients in custody for three months after the CP order expires. Typically, participants who worked for NGOs stated that case management would involve co-ordination of services involved, development of leaving care plans and referral to leaving care services.

However, it was reported that CP workers – aside from mandated case conferences – generally reduced their involvement with young people in custody at the time of leaving care. As a result, respondents felt that the work around leaving care was often “...*pushed onto other people*” whether leaving care services or YJ. Similar findings were reported in a recent UK study of dual order clients in custody (Her Majesty's Inspectorate of Prisons, 2011), where one third of YJ workers surveyed felt that CP workers tried to end their

involvement with young people in custody. A leaving care worker explained, “...that leaves the young person sitting behind bars with the same impression they always had of [Child Protection] which is, ‘Who are these assholes? They don’t care about me’”. Whilst current protocols do indicate that YJ generally case manage dual order clients who are in custody (DHS, 2005), it is unclear whether other agencies or the young people themselves are aware of this change in responsibility. A former CP worker explained that reducing the intensity of intervention with young people in custody is generally a case of prioritising high workloads, “You’ve got a young person who is safe and they’re in custody and they’re being cared for by custodial staff... you’d tend to think, ‘I’ve got other kids on my case load who aren’t involved in any other services, or any other systems, so I’ll prioritise these other kids on my case load and let Parkville and Youth Justice think about the kid that’s in custody’. You know they’re safe”. Other interviewees believed that, “Child Protection take the back seat ... because [DHS] see it as the Department, like all one, and we don’t need both [Youth Justice and Child Protection]”.

It was also reported that CP orders were more likely to be closed when YJ were involved, or where the young person was in custody. According to a former CP worker, “If Youth Justice were involved, Child Protection might be less likely to extend the order because they would just say, ‘well youth justice are involved, they can case manage, what can we do that you can’t do?’”. However, this was contradicted by other interviewees, who stated that while this was formerly the case, presently most young people exiting custody aged under 18 years usually still had CP involvement. Access to more empirical data concerning dual order clients exiting custody is necessary to examine whether CP involvement is usually still present in these cases.

It was pointed out that a lack of ongoing case management from either their former NGO or CP is less than ideal during the leaving care period, as YJ have usually had minimal involvement in young peoples’ lives compared to the “...wealth of knowledge and history” generally held by CP. Furthermore, young people in custody often lose contact with former workers and friends, particularly where the CP orders are due to expire during the custodial sentence. A residential care worker outlined the impact of one such scenario, “... [Child

*Protection] closed on him. So the 6 people at the resi unit who were his family were not allowed to basically visit him from that day... he was in Youth Justice with no supports, and nothing to come out to". Another respondent stated, "We fight it, but the likelihood is that if they're incarcerated, we can't continue to maintain that relationship with them... Which happens a lot".*

Many participants believed that it was advantageous for young people to be in YJ custody at the time of leaving care, as it enabled ongoing access to additional supports and resources including case management, support services and counselling. Most notably, young people would have improved access to housing if being released from YJ custody on parole, as an approved accommodation option forms a mandatory part of each parole plan. As one participant stated, *"I actually think - I know it sounds terrible - that they might be better off"*. It was pointed out, however that YJ resources and supports were minimal and stretched, focused on offending behaviour rather than being holistic in nature, temporary for the duration of the YJ order, and less available in rural or regional locations. Furthermore, it was emphasised that many post-custodial supports are voluntary, and young people may choose not to engage with the available services.

### ***Interagency Collaboration***

While significant improvements had been observed in the relationship between CP and YJ, the level of collaboration was described as variable and overall, *"...very much sort of worker to worker how that pans out"*. This echoes research findings from the UK, which indicated that the commitment of individual CP workers was a significant factor determining ongoing involvement with dual order clients (Her Majesty's Inspectorate of Prisons, 2011). Participants who had experience working within the YJ or CP systems stated that there was good information sharing, collaboration and planning (mainly in the form of regular care team meetings) between the two program areas. However, others described various issues in the relationship between the two statutory agencies, stating that they had either observed or been involved in an *"adversarial"* relationship between YJ and CP, for example: *"Hearing Youth Justice workers speak about the Child Protection workers, there's quite often a*

*lot of conflict between the two agencies...I guess that may go to part of why there is that lack of communication". Another worker added, "They're all the same department but they're like separate little empires. They don't talk very often...And they're very good at blaming each other...Handballing".*

Generally, it was believed that YJ had as much input into planning and decision-making processes around young peoples' welfare as any other agency which may be involved post-care. It was believed that there did not appear to be "...any priority put in Youth Justice" in terms of planning for leaving care, with CP generally holding the decision-making power. Situations where there was a lack of clarity around roles and responsibilities between CP, YJ and other agencies were also described by workers. One residential care manager gave the following example, "...we've had to deal with Youth Justice workers blaming us openly in court for not presenting their clients at their scheduled meetings... then it will be presented in court as [the agency] failed to produce a client for their YSO meetings, and we get asked to sit in the stand and explain why we haven't". Leaving care and post-care services described having a more effective working relationship with YJ as opposed to CP. One leaving care worker explained that, "... [leaving care] will be the person who's coordinating it, and they're not really talking to each other at all". Others also stated that they observed YJ largely pushing CP regarding leaving care planning, stating that YJ seemed to be, "...more focused on it, more aware of it".

Many community-based workers could not comment on the relationship between the two statutory agencies as they were rarely involved in leaving care planning processes. One program manager stated, "*I think our Leaving Care Program's probably always the last to know what the plan is... But if we're being left to the last minute, and we're seen as a service that can support post-care, I wonder what communication is happening within the department?*".

A major source of tension between the various agencies was their differing approaches to managing offending behaviour - a friction noted in the literature (McFarlane, 2010; Shaw, 2011; Taylor, 2006). Some interviewees viewed the

adoption of a legal response to behavioural issues, such as property destruction, theft and assaults (specifically in residential care) as criminalising. As a former CP worker pointed out, “...*you think about it in your own family - if my child smashed a window or nicked something from me, I wouldn't call the police... we go to that criminal response a lot more quickly for young people in care*”. Participants also stated that there were circumstances where system responses, even when engaged for the protection of young people, exposed them to an excessive level of involvement with statutory bodies, authorities and the justice system. “*If a young person... is taken into care, or put on a court order, often police are involved to investigate a crime that's been committed against a young person. Young people need to go to court, they need to have lawyers. If they run away, warrants can be issued and executed, often by plain clothes policemen*”.

Informants reported that young people were unable to distinguish between the use of legal responses for their protection and their use as a form of punishment for wrong-doing. One respondent explained, “*From their perspective, they don't really necessarily distinguish between being locked up for my good, and being locked up because I'm bad. It's just all one and the same. And if you think about it, like from a kid's perspective, they might think 'well I'm going to get locked up and I did nothing wrong, I may as well bloody well do something wrong'*”.

Conversely, other participants argued that a legal response to violence and other high-risk behaviours was necessary to protect staff and other young people, and also educated young people in care as to what was acceptable both within residential units and more generally in society. As one residential care worker explained, “*We're trying to teach kids about what's appropriate, and what isn't... if we say, from a legal perspective... this is actually breaking the law then you're actually showing them a community response*”. These respondents believed the flexible approach adopted by YJ was “*too soft*” and did not provide an appropriate, timely response to offending behaviour, including breaches of bail conditions, community based orders and parole conditions. As a consequence, many participants stated that current policies were setting young people up to fail once they encountered the adult justice system. One residential

care manager explained, *“The kids turn 18, they do a small crime, they get remanded. And they go, ‘what happened there? I’ve done that a hundred times and nothing happened’... so we’re setting kids up to fail”*.

Overall, there appears to be an absence of formal protocols between the gamut of agencies that may be involved with dual order clients at the time of leaving care, as well as a lack of trust and role understanding, resulting in variability in service coordination, information sharing and collaboration. According to Taylor (2006, p.52) such links are *“vital if there is to be an effective response to the offending of looked-after children”*.

### ***Leaving Care plans and Youth Justice***

Participants stated that leaving care plans did not specifically address offending behaviour, and that this was the role of YJ intervention. It was explained that the primary focus of CP or the contracted NGO at the time of the leaving care was on securing housing and establishing supports prior to the young person’s order expiring. Some OHC case managers stated offending issues are indirectly addressed by minimising risk (or “criminogenic”) factors (for example homelessness, substance use, mental health issues and disengagement in education, training or employment).

Various factors affecting the implementation of leaving care plans were identified. Where clients are in custody, leaving care plans were seen to be redundant, as a parole plan would be mandatorily developed as part of discharge. The level of collaboration with post-care services in developing leaving care plans was described as variable, with some post-care services and workers indicating that they had never seen a leaving care plan. One leaving care worker stated, *“I believe we haven’t seen those plans because they don’t exist... I don’t think they’re being kept from us”*. Indeed, recent Australian research published by the CREATE foundation indicated that only 44% of their sample of 17 year olds (n=193) from OHC backgrounds stated that they had a leaving care plan (McDowall, 2011). Similarly, parole services noted that there was a lack of communication between custodial and Leaving Care services, *“We haven’t seen much evidence of the Leaving Care Program. The workers*

*are present and maybe they don't know that they're welcome. We haven't actually seen much documented in parole plans about 'this is the plan', 'As part of the parole period this young person will be exiting care'".*

Engaging community agencies and young people in leaving care planning was seen to be vital to positive outcomes. Workers delivering leaving care, drug and alcohol, education, mentoring and YJ programs said that they were rarely included in leaving care planning meetings, or were engaged too late in the process to effectively establish rapport with young people. Participants also believed that creating a more youth-centered and less intimidating leaving care process would facilitate young peoples' involvement. A manager of drug and alcohol services said she found the process "*depressing*", adding "*...people just talked about [the client] like he was not there*".

Other barriers to implementing leaving care plans were specific to the OHC system: firstly, some care-leavers being too developmentally immature to function independently as a result of maltreatment and inadequate life experiences, and secondly a lack of leaving care resources. Reflecting the literature in trauma and brain development (for example, Avery & Freundlich (2009)), many respondents understood young peoples' lack of engagement as a result of being overwhelmed by anxiety and a sense of abandonment. They cited the fact that while young people may be chronologically 18 years old, due to trauma and other factors they are generally functioning at a much younger age both mentally and emotionally. As one residential care manager explained, "*If you want to know what it's like for our kids, go and grab a 5 year-old, take them to Centrelink and get them to fill out the forms to get youth allowance. Because that's what we're talking about*". Long waiting lists for leaving care programs, minimal suitable housing (particularly for high-risk, complex clients), and stringent criteria in accessing leaving care brokerage were acknowledged as key deficiencies. One leaving care worker explained that, "*...whilst [Leaving Care] want to be able to pick up every young person, we just don't have the capacity because we don't have the numbers of workers on the ground*". Young people who weren't willing to engage with services from the outset, or who were inconsistently engaging were unlikely to be followed up by

workers due to a lack of staff and resources, and these tended to be the more high-risk and complex clients.

### ***Youth Justice responses to child abuse and trauma***

There were many issues raised in relation to the capacity of the YJ system to identify and appropriately respond to the needs of dual order clients. These are outlined below.

- ***Court Processes***

Respondents generally believed that Children's Court processes competently identified young peoples' issues through assessments and pre-sentence reports. In particular, the Koori Children's Court was seen as an excellent model of a youth-centred system. At the same time, the availability of diversionary programs to young people through the Children's Court was seen to be too limited. Additionally, the timeframe between clients being charged and sentenced was viewed as too lengthy, and therefore counterproductive to effectively addressing offending behaviour. In some cases interviewees stated that it was more than a year between clients being charged and completing court processes. They stated that by the time cases were heard, young people had often offended further or could no longer remember the reasons why they were in court, and were unable to therefore mentally link their behaviour with the consequences delivered. Delays in court processes also had the potential to interfere with leaving care processes producing additional anxieties and appointments for young people.

Participants further noted that the level of advocacy present for a young person at court often had significant bearing on their outcomes. Consequently, where young people had been discharged from care and had little supports, YJ was seen to be used as a mechanism for welfare intervention in some cases. Respondents stated while this was a positive outcome in some respects, it still prolonged the exposure of young people to contact with the justice system, and was therefore undesirable.

- **Community-based Youth Justice**

There were mixed perceptions about the capacity of the community-based Youth Justice system to respond to the needs of young people from OHC. It was emphasised that the YJ role is specifically to challenge offending behaviour and ensure compliance with YJ orders, and many respondents believed that YJ officers were able to recognise the issues faced by young people (e.g. mental health, intellectual disability) and make appropriate referrals to outside agencies. On the other hand, it was mentioned that while there had been some improvements in recent years, YJ officers did not have adequate training to appropriately assess and understand trauma and attachment issues and how they might manifest in the OHC group. One drug and alcohol outreach worker said, “[Youth Justice officers] don’t even understand, a lot of them, the difference between emotional health and mental health issues, mental illness... There’s not a basic education on that sort of stuff”.

- **Custodial Youth Justice**

Overall, participants viewed the custodial YJ system as a wasted opportunity for intervention and building relationships with dual order clients, with one participant stating that custodial YJ is, “...good at doing assessments, but not necessarily the next step”. Another respondent stated that he could not see, “any evidence of rehabilitation work while they’re in Melbourne Youth Justice Centre”. Currently the system is seen to be limited to containment of young people, and “about managing behaviour really, not about addressing some of the very, very difficult backgrounds”.

It was argued that custodial staff were not even aware of trauma and attachment issues, and criticised the minimal level of training required to work in a field involving, “...dealing with the most at risk vulnerable people in the state”. Other participants felt that the lack of staff skill was due to the unattractive nature of the work, and the costs involved in employing skilled staff. Others commented that the resources available were insufficient to address dual clients’ complex needs, citing the long waiting lists to access to both YJ-specific and community-based services.

Conversely, other respondents believed that dealing with the complex backgrounds of young people was the role of the OHC sector, rather than YJ services, “*Youth Justice can’t be blamed for what’s happened in the past, or for not addressing something...They only get access to [young people] once they hit the courts*”.

### ***Preventative and Diversionary Programs***

Participants discussed a number of YJ-specific and general preventative or diversionary options which could potentially reduce the flow of care leavers into YJ systems.

- ***Youth Justice system***

The Right Step pilot program currently being run by Youth Connect in conjunction with Victoria Police and Moorabbin Justice Centre (Youth Connect, 2012) and the Youth Support Service (YSS) (DHS, 2012) were cited as effective diversion and early intervention programs respectively. These programs target young people at risk of, or in the early stages of involvement with the YJ system, offering case managed interventions to holistically address young peoples’ needs on relation to offending behaviour. However, it was also noted that the minimal resources devoted to such programs can limit the impact of the interventions on the population as a whole. Overall, however, there appear to be few diversionary options currently suitable for the needs of care leavers, who may not be prioritised for such programs as they already have case management services. It was generally believed that diversion programs should be expanded state-wide (as they are for adult offenders), and seek to specifically target the needs of the high-risk OHC group. This issue was also raised in the recent report released by the Sentencing Council of Victoria (2012), which stated that, “*The absence of a comprehensive statewide diversion program for young people can lead to inequitable outcomes*”, noting that the diversionary programs available in Victoria “*are usually restricted to certain geographic locations*”, “*only suitable for particular offenders*” and “*have no funding*”(p.28). In response to this issue, the Victorian state government has issued a recent discussion paper inviting suggestions for policy improvement around diversionary practices for youth in the state (Department of Justice, 2012; Tomazin, 2012).

In terms of the custodial YJ setting, while it was noted that while some services were present, participants believed more intensive interventions should be adopted. In particular, education and training, mental health interventions, drug and alcohol work and other behavioural change programs were suggested as being likely to promote better outcomes for young people. The interviewees also mentioned the importance of the custodial YJ system being supportive and informed about any outside programs and interventions being delivered in custody.

Enhanced advocacy in court settings was also seen as key for promoting better outcomes for young people. One program manager related the experience of one of his clients, “[he] would say to me “I’ve been to court so many times, I don’t know what happens. Every time I go no one has explained to me why I’m there that time, what the outcome has been that time”. Participants from within the YJ system also questioned the capacity of some young people to understand the various processes occurring, particularly dual order clients with intellectual disabilities, “A high number of that client group has an intellectual disability and it is very difficult for them to understand what is happening to them, very difficult. We’ve had a number of young people with IQs of 56 that we’re paroling. How do they understand a) what has happened to them and b) what is happening to them?”.

- **Out-of-Home Care system**

Participants spoke about the potential for OHC services to strengthen interventions with early offending behaviour. Various workers indicated that this was done to some extent with young people on an ad hoc basis, for example speaking to the young person about why they might be engaging in criminal behaviour. However, other respondents stated that while workers might have a suspicion that a young person is offending, their involvement with YJ is the main indicator that a major problem had emerged. Previous reports have drawn attention to the need for preventative interventions involving co-ordination between agencies (for example education and OHC systems), and have pointed out that limitations on information sharing are likely to hinder such approaches (Marien, 2012).

One suggestion was to strengthen the capacity of the foster care system to respond to early offending behaviour, via training, education and supporting carers to deal with difficult behaviours. Case managers outlined situations where such measures had been successfully utilised, including adopting restorative justice practices with young people, for example, *“It’s done at the school and the carer would attend, the principal would be there, we would be there, the day shift worker if possible and the young person would also be invited to that meeting....And on one of the times, the assistant manager from Coles came over too. So that was pretty good, to know that there was that support there”*. Overseas commentators have also drawn attention to the potential *“windows of opportunity”* for positive interventions toward offending behaviour within the foster care system (Krinsky, 2010, p. 323).

The need for supportive attachments in young peoples’ lives was also seen as a key to reducing offending behaviour, whether this be through supporting foster carer relationships, through schools or mentoring programs. Previous research has similarly indicated that positive attachments are correlated with decreased delinquency for youth in OHC (Ryan, Testa, & Zhai, 2008). According to one case manager interviewed, *“It’s connection to peers, connections to others in the community, it’s those family sort of connections or understanding who am I, where do I come from, what’s my identity? Thinking about some of those kids, they’re just lost, they’re lost little souls.”*

The importance of supporting young people to maintain involvement in some form of education or training was emphasised - a view previously raised in the international literature (Krinsky, 2010). Many respondents noted the limited education of most dual order clients, *“I can’t count how many times I’ve met kids coming out of care that cannot read or write. It’s like well who the hell is looking after these kids to make sure he’s getting an education so that he can actually get on with life?”*. The limited numbers of flexible, alternative education programs (e.g. early school leavers programs) or the stringent admission criteria of these programs were seen as a potential barrier to young people engaging with education. Strengthening the capacity of the education sector to identify and respond appropriately to managing disability, behavioural and welfare issues was also highlighted as a potential preventative approach.

One AOD worker stated that the education system lacked the ability to identify and support young people that may be facing difficulties, “[the young person] might still be in school or just disengaging, I’ve talked to them about talking to the welfare worker and they had displayed all these aggressive behaviours and have issues at home, and the welfare worker will have never heard about them.”. Additionally, the need for flexibility within the OHC sector to assist care leavers in completing school-level education was also raised, as outlined by a residential care manager, “It doesn’t matter if they’ve got the exam on the day of their 18<sup>th</sup>, they cannot return back to that lead tenant placement that night. They are 18”.

Finally, the need for additional resources in the mental health and AOD sectors was raised. In particular, early psychological intervention (e.g. individual treatment or therapeutic residential care programs) focusing on emotional regulation, trauma and identity issues was seen to be fundamental to curtailing involvement in the criminal justice system.. As Krinsky (2010) previously has previously asserted, “The mental health needs of foster children frequently are overlooked until the child exhibits extreme and harmful behaviour”.

- **Leaving Care and Post-Care Systems**

The lack of housing in general, but more specifically voluntary, long-term intensive supported accommodation options was cited as the biggest difficulty faced by young people transitioning from OHC. Respondents highlighted the connection between homelessness and involvement in crime, akin to that described in the literature (for example McCarthy & Hagan (1992) and Schwarz, Sorensen, Ammerman & Bard (2008)). Examples of interstate and international supported accommodation programs were cited, however participants stated that there was a lack of such programs in Victoria. Many programs were only funded at the pilot stage and were therefore not sustained or expanded, even when they were shown to promote positive outcomes. The interviewees believed there was a lack of willingness to invest in preventative housing options for this particular cohort. Additionally, increasing the capacity and enhancing the consistency of leaving care programs was believed to be necessary if the program is to be able to deliver genuine outcomes to this client group.

Interviewees mentioned many other service options which they saw as producing positive outcomes for dual order clients, including flexible alternative education options, mentoring, day programs, group based therapeutic programs, sporting and music programs. They saw such programs as offering experiences of positive, prosocial engagement capable of meeting a variety of identity, connectedness and self-esteem needs, at the same time reducing the tendency for boredom to attract young people to offending behaviour. However a number of barriers to accessing and utilising these services were outlined.

First, there seems to be insufficient numbers of these programs, or NGOs were unable to access funding for young people in OHC to participate in these programs. An OHC worker spoke about accessing psychological support for foster care clients, *“I mean it’s a very expensive service, we have to pay for it, and it’s not cheap at all. But, it’s a service that we know works, and does very well. So you know, with kids we obviously have to advocate for that money to make that happen”*. Second, the lack of flexibility in such programs meant that more high-risk, chaotic young clients were either excluded, or were unable to participate in a meaningful, ongoing way. The need for programs that could provide a youth-focused, intensive service was emphasised. The respondents also noted difficulties in motivating young people to attend voluntary programs, particularly more disengaged and transient clients, or clients who felt stigmatised by their OHC backgrounds. Some respondents believed that the programs themselves further isolated dual order clients from the mainstream population, for example, *“...they are quite stigmatised, and discriminated and they’re grouped together ... so the programs are always problem focused”*, and that integration of dual order clients into mainstream or generalist programs with a strengths-based focus was a better option. However other interviewees believed that dual order clients would not cope or feel comfortable in mainstream services and programs and require flexible, alternative options.

It was mentioned that young people from OHC require a level of support and advocacy to access and maintain involvement with community-based programs. One leaving care worker stated that, *“...these programs are great; these programs work, and you see the change in the kids. But there’s no support to get the kids to the program. And if there’s no support and encouragement for*

*the kids to get to that program then they're not going to attend*". Such support could entail transporting young people to programs, having a support worker present during the initial stages of engagement, and advocating for young people to enter or stay involved with services and programs where they may have a variable level of engagement.

### **Implications for policy and future research**

This research canvassed the views of 77 individuals from across the state with backgrounds in CP, YJ, legal services, and various support services for vulnerable youth. The findings highlight key areas for both future research and policy change, in order to potentially reduce the over-representation of care leavers in the YJ system.

The findings are consistent with previous research, anecdotally indicating that dual order care leavers for the most part are male, have come into contact with residential care environments and have disengaged from education and other support systems. However, more systematic data collection concerning the profiles of these clients (including their pre-care experiences, OHC, YJ and post-care trajectories, experiences and supports, educational and developmental histories) is necessary for the development of effective preventative and diversionary measures. International researchers have also drawn attention to this lack of information and the need for collaborative efforts between researchers and practitioners if effective interventions are to be implemented (Herz et al., 2006; Schofield et al., 2012). Importantly, such research should canvass the views and experiences of young people who have had experience with both the CP and YJ systems, as this perspective has been sorely lacking in the literature to date. Future research needs to examine the nature of interagency responses to offending behaviour in the residential care context, as this appears to be a particularly complex area of the service system where current policies are producing unsatisfactory outcomes.

The findings also highlighted conflict and confusion between services delivering support to dual order clients at the time of leaving care, including CP, YJ, the non-government OHC sector, leaving care and post-care services. While

some formal protocols may be present in terms of the roles of the two statutory agencies in relation to dual order clients, it is critical that a consistent approach be adopted by all of these programs in responding to offending behaviour and supporting dual order clients exiting care. A mutual understanding of the programs, respective roles and obligations of each agency in supporting dual order clients exiting care and/or custody appears to be lacking at present. Additionally, strategies for maximising collaborative care-team approaches for dual order clients leaving care, particularly in engaging post-care and community-based services would appear to be of benefit in creating a more streamlined system. Mechanisms for enhancing the involvement of both young people and any services to be involved post-care would be advantageous. Finally, strengthening the resources and supports available to dual order clients both from the OHC and YJ sectors should form a vital part of any strategies seeking to reduce the numbers of young people from OHC care backgrounds entering the adult justice system.

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