Department of Social Work
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Leading Socially Just and Sustainable Change

INTERIM EVALUATION REPORT FOR THE BERRY STREET PILOT PROGRAM - STAND BY ME

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1. EXECUTIVE SUMMARY

Stand By Me provides an intensive generalist case work support service that targets young people leaving the care system to better support a successful transition to independent adult living. A fundamental aspect of the program design is that it is relationship based. This means that a relationship is built with the young person before they leave the care system, extending into the period post care, and the service follows the young person rather than requiring them to stay within a particular metropolitan area or meet particular narrow pathway criteria for service. Trust is a big issue for this group and so a high value is placed on continuity of worker-client relationship. The service is able to offer medium to long term support in the post care period through an assertive outreach model that matches resources to the young person’s identified need at the time. It is not unusual for the first few years to be a time of multiple crises before some measure of stability is established, and the need to be flexible and adapt is essential to meeting the evolving needs of this client group.

The Stand By Me pilot program has been developed by Berry Street, building on number of broad elements from the UK Personal Adviser (PA) model, including:

- A focus on providing medium-term support to young people, from their time in care until after they have left;
- Provision of secondary support and consultation with existing case managers while a young person is still in care; and
- Transitional planning.

Initial evaluation findings from the first year of the pilot program – December 2012 to December 2013 – suggest that the SBM program is developing effective ways of working with young care leavers and other program stakeholders. Early programmatic findings indicate that the approach and methods being adopted by SBM are consistent with research into effective practice for supporting young people leaving care who have complex needs, and who are at risk of homelessness.

The Stand By Me pilot program takes a strengths-based approach, and focuses on activities likely to reduce homelessness, including working with young people to plan their accommodation, helping to negotiate the retention of foster or kinship care placements, and to establish and maintain transitional or independent accommodation options.

The Stand By Me program has also worked with young people to address trauma, improve access to mental health supports, and obtain financial assistance to pay for such specialist services. It has been found that post care, young people may be in a position where they are more ready to address these issues.

The Stand By Me program has also facilitated and advocated for better access to leaving care funding and incomes, as well as supporting links to specialist employment, education and training provision for young people.

Significant programmatic benefit has been found in building relationships with a young person over time while they are still in care. This finding is strongly supported by research (National Leaving Care Advisory Service, 2006). Young people have also been supported to engage more fully in their transitional and leaving care planning, reflecting the relevance of the UK’s Personal Adviser model (Department of Health, 2001) and a similar role proposed in Australia, in the form of a Transition From Care (TFC) worker, recommended by the CREATE Foundation in 2010.

Further positive outcomes of the Stand By Me program arise from the work done with young people around re-establishing family contact and increasing the positive benefit
of these contacts. Research has identified that links back to family are an important
goal for young people leaving care (Mendes, Johnson & Moslehuddin, 2012). Supporting young people’s contact with family, and in their own parenting role in one instance, have been significant elements of the SBM program (and not previously explored within the Berry Street Scoping Study) (Whyte, 2011). A significant number of young people return to family, but negotiating this transition period is typically fraught; the support provided by the Stand By Me program has been invaluable here.

There is potential for the program to add further benefit by helping young people to enhance the stability of their placements while they are in care – to improve their capacity to sustain education, employment and training and to facilitate the transition from care at a developmentally and educationally relevant point in time for the young person.

The Stand By Me program model also offers opportunities for young people to maintain links with out-of-home care supports (including foster parents or residential carers who are meaningful in their lives), in order to reduce the possibility of further trauma and disrupted attachments. Research into building resiliency in young people (Stein, 2012) notes the vital importance of protective and supportive networks, including in-care support.
2. INTRODUCTION AND BACKGROUND TO THE BERRY STREET STAND BY ME PILOT PROGRAM

2.1 Berry Street Organisational and Leaving Care Focus

Berry Street has been a key provider of services to children, young people and families in Victoria since 1877. Today, Berry Street provides services in a range of different locations, with the majority in Gippsland, Hume, the Northern, Southeastern and Grampians regions.

The Berry Street Strategic Plan affirms a commitment to the rights of all children to the experience of a good childhood, and to supporting people with complex issues arising from their experiences of abuse, neglect or violence.

Berry Street’s services to children and young people include home-based and residential care, leaving and post-care support, as well as intensive youth support, outreach, housing programs, education and employment programs, and a Statewide intensive therapeutic service. Berry Street’s family service programs include family violence support and child abuse prevention programs, mediation and counselling, and children’s contact services.

Leaving care has been identified as an area of organisational priority within Berry Street, with Berry Street’s Strategic Directions 2027 outlining the need to develop, pilot, evaluate and promote services and policies to support young people in making a successful transition to adulthood.

2.2 Context of Service Provision for Leaving Care in Victoria

In Victoria, the Children, Youth and Families Act 2005 legislated for the provision of leaving care and post-care services for young people up to 21 years of age. These services help care leavers with finances, housing, education and training, employment, legal advice, access to health and community services, counselling and support, and also consider the specific needs of Aboriginal young people.

To help support care leavers, the Government has also funded a range of programmatic responses in different regions, including mentoring programs, post-care support programs, housing supports for those transitioning from care and specialist programs such as Springboard for young people leaving residential care. In 2013-14, overall funding for Victorian leaving care and post-care services was over 11 million dollars (Victorian Government, 2013).

2.3 DHS Good Life Model and the Importance of Transitional Supports

The DHS Good Life model of service provision (Figure 1) is informed by the concepts embedded in providing young people with meaningful personal connections and security in housing, health and life opportunities. The model identifies a responsibility on the leaving care support system to ensure young people receive appropriate levels of support as they transition from care. A child or person-centred approach is highlighted (DHS, 2008).
In addition, DHS has more recently outlined three phases of assistance and planning required to support successful transitions from care (Figure 2 below):

1. Preparation *(commencing actively from 15 years)* – while young people are in quality, stable care, coordinated planning and practices are undertaken to prepare them for leaving care. Designed to meet the individual needs of the young person, the focus is on a developmental approach and life skills acquisition. This phase will be more actively promoted for those over 15 year of age,

2. Transition *(during the final 6-12 months of the young person’s custody or guardianship order)* – ahead of the cessation of court orders for the final time, plans and support arrangements for the post-care period are arranged, formalised and confirmed with the young person. This encompasses the young person’s supports, living arrangements, and any other aspects that transcend their time in and after care. Key considerations of this planning phase must be the safety and capacity of young people to live sustainably post-care.

3. Post-care support *(after leaving care)* – this includes all the supports necessary to sustain the young person, including appropriate accommodation, employment or study, and the income to live sustainably. Most importantly, the young person needs to be aware of the post-care supports available, how to access them and be supported to do so if required (DHS, 2012).
Nationally, the *Transitioning from out-of-home care to independence*, a national priority under the *National Framework for Protecting Australia’s Children 2009-2020* also suggests that many young people do not receive adequate assistance during their transition to independence. It is further suggested that there needs to be a quality process for the development, implementation and review of leaving care plans or transition plans (Department of Families, Housing, Community Services and Indigenous Affairs together with the National Framework Implementation Working Group, 2010).

### 2.4 Berry Street Scoping Report into Leaving Care

In 2011, Berry Street undertook a scoping study to explore the issues and impacts associated with leaving care, and the final report developed a number of recommendations for practice.

The scoping report broadly identified that there was limited capacity for leaving care services to respond to demand for service provision for young people once they had left care. From interviews with relevant Berry Street workers, the report highlighted that there are waiting lists for post-care services and a backlog in service provision. There is also a need to provide assertive responses to clients who are difficult to engage or have complex needs.

The report outlined that there was a consistent message from workers that it was difficult to provide effective leaving care services to young people with risk taking behaviours, or to those who needed additional support due to mental health or disability concerns, and that these issues were becoming more prevalent (Whyte, 2011).

*Young people with complex needs are considered to be particularly vulnerable to homelessness, and the associated risks.*

The report also identified accommodation as a key priority area, with few exit points for young people irrespective of whether they have complex needs or are exiting from residential care, foster care or kinship care. When young people do have complex needs, they are considered to be particularly vulnerable to homelessness, and the associated risks, with over 64% of Victorian care leavers becoming homeless within two years of leaving care (Whyte, 2011).

Drawing on discussions with Berry Street, the scoping study suggested that the UK’s Personal Adviser (PA) model could greatly enhance the existing service provision. The PA model could potentially combine with existing case-management supports for young people, such as Intensive Case Management Services (ICMS).

The scoping study proposed that a role similar to that of a Personal Adviser would be well placed to support the needs of young people with higher risk behaviours and complex needs (Whyte, 2011). The “Personal Adviser” would offer secondary consultancy and support, link the young person to other relevant service providers, and form a direct and supportive relationship that continues up to the age of 21 (Whyte, 2011).

### 2.5 Development of the Berry Street *Stand By Me* Model

The *Stand By Me* leaving care pilot program is an adaptation of the UK Personal Adviser (PA) model, and incorporates a number of that model’s broad elements, including:

- A focus on providing medium-term support to young people, from in care through to post care;
• Provision of secondary support and consultation with existing case managers while a young person is still in care; and
• Transitional planning.

While the UK program is a universal program for all care leavers, the *Stand By Me* program has been developed by Berry Street to focus on meeting the needs of high-risk young people leaving care as identified by the Berry Street *Scoping Study*.

“(T)he lack of systemic service response to young people with the most complex needs is a significant gap in service provision and is one of the major dilemmas for Berry Street staff. These young people are the most vulnerable yet in many circumstances they are unable to access the services that they require” (Whyte, 2011, pg. 22).

Berry Street has developed the *Stand By Me* service as an early intervention program for young people aged 16 and living in out-of-home care, primarily residential care who are considered to be most at risk of homelessness and other negative outcomes after leaving care. The program seeks to engage and build relationships with these young people whilst they are still in out-of-home care, and continue to work with them more intensively after they leave care.

As an intensive case-management response, a caseload of six care leavers per one EFT worker has been determined by the pilot program, with a program total of two EFT workers based within Berry Street’s Northern Regional office. These workers will work with up to 12 young people who have complex and multiple needs, and who are considered at risk of poor outcomes when leaving care.

### 3. EVALUATION METHODS

**3.1 Key Aims For The *Stand By Me* Evaluation**

Key program aims include:

• To test and substantiate the difference the *Stand By Me* program and its interventions make to the leaving care outcomes of young people who are most at risk, and determine how well they achieve this;
• To identify what aspects and key ingredients of the pilot program and model deliver improved outcomes in the short-, medium- and longer-term for these young people; and
• To consider the viability of the program and model as it was designed and then evolved over the course of the funding period, in order to build a case for Government funding.

**3.2 Overview of the Evaluation Methodology**

The key directions established by Berry Street for the evaluation of the *Stand By Me* program include:

• A flexible, participation driven approach;
• The use of developmental methods;
• The use of process-based methods; and
• The use of outcome-based methods.

A flexible approach is considered important so that emerging data can be made progressively available to the project governance group so they may reflect on and adjust the pilot program accordingly.

3.3 Theory Informing the Methodology

Two broad methodological approaches underpin the Stand By Me evaluation. The first is "action research theory," which involves a circular flow of information back into the program in order to continue to review, action and document how the pilot program is progressing. Using an action research approach, planning, actions and reflection then inform further planning, action and reflection. Action research provides a framework and tools that are useful for developing responsive and relevant early intervention strategies (Crane and Richardson, 1997), thereby supporting the aims and objectives of the Stand By Me evaluation.

The second approach is “comparative experimental research” that provides a ground for testing causal relationships (Grinnell, 2001). Comparative research addresses the evaluation aim to “identify the difference the Stand By Me program and its interventions make to the leaving care outcomes of young people who are most at risk.” The evaluation will incorporate a qualitative and quantitative comparison of the experiences and outcomes of young people supported by the Stand By Me pilot program with young people who have not participated, but who have experienced similar leaving care trajectories, and are from similar in-care and leaving care services systems. This will enable us to explore transitional and leaving care outcomes that can be associated with young people’s involvement in the Stand By Me project.

3.4 Stakeholder Consultations and Ethics

In accordance with the methodological approaches established for the Stand By Me program evaluation, and the developmental nature of the program, a broad range of data gathering strategies has been designed. These include:

• Interviews with a range of stakeholders identified as being crucial to the evaluation, including young people involved with the program, other young people leaving care from within the region, program workers and management, as well as residential care providers, other out-of-home care programs and post care service providers;

• Interviews with Stand By Me team members, to explore and review key issues, themes, and programmatic activities, over time; and

• All interviews have been de-identified of names and gender references, as well as any identifying characteristics, in order to ensure the anonymity of evaluation participants, while also maintaining the integrity of the evaluation material and the participants’ meaning.

3.5 Interviews with Young People

Young people within the Stand By Me program who become care leavers, are over 18 years old, and provide their consent will be interviewed as part of the evaluation. These interviews will enable them to explore and reflect on their experiences of the program, and consider their own personal transitions from care and outcomes.

In addition, comparative semi-structured interviews with other young people who have not been a part of the Stand By Me program are planned (for example, with up to 12 young people from the North West Region with similar leaving care trajectories).
4. EVALUATION GOVERNANCE

The evaluation has been overseen by a Stand By Me Project Steering Committee. Representatives from Berry Street and the Department of Human Services met regularly with Monash University representatives throughout the course of the pilot program and evaluation. Small working groups have also been established, as needed, to address specific areas of work.

5. INITIAL EVALUATION FINDINGS

5.1 Review of Background Literature

5.1.1 Corporate Parent Concept

The UK’s Leaving Care Act 2000 incorporated a “corporate parenting” philosophy whereby there is an acknowledgement of the responsibility of state authorities to introduce policies, structures and roles that actively compensate children and young people in care for their traumatic pre-care experiences, and offer nurturing and support that would be comparable to their peers who are not in care in order to maximise young care leavers’ ambitions and achievements.

Within this legislation, the role of a Personal Adviser (PA) was created, with responsibility for the overall co-ordination and monitoring of the Pathway Plan for young people, and the young person’s progress. However, they were not necessarily to implement the plan themselves (Department of Health, 2001).

Changes to the PA role are documented in the Guidance and Regulations of 2010, and proposed a move away from the original coordination and planning role towards a more direct, supportive case manager role, with the PA having access to funds to assist young people directly. A key element is that the PA forms a relationship with the young person whilst they are in care and are therefore part of the young person’s life before, during and after leaving care, thereby providing them with continuity of support (Department of Education, 2010).

While the PA role is a legislated role for all young care leavers from the ages of 16-18 to 18-21 years (Benjamin, 2001), research by Ofsted (2012) indicates that many young people did not have a PA – indeed, only 42 percent of eligible young people had a PA.

5.1.2 Close and Reliable Relationships with Personal Advisers

While the role of a PA has not been specifically evaluated in the UK to date, the role has been retained and continues to develop (Department of Education, 2010). The benefit of the PA role is cited in a range of research, including reports incorporating direct feedback from young people.

A large majority of all care leavers interviewed expressed positive views about their PAs and the support received.

The Staying Put program in the UK, which enables care leavers to stay with foster carers beyond 18 years of age, found that a high proportion of those who stayed in care longer reported that they maintained a close relationship with their PAs compared with those who left care earlier. A large majority of all care leavers interviewed
expressed positive views about their PAs and the support received (Munro, Lushey, National Care Advisory Service, Maskell-Graham and Ward, 2012).

In interviews for the *What Makes the Difference* project, Personal Advisers stressed that the relationships they were able to build with young people were critical in helping them to be successful in their roles. They also emphasised the importance of mutual trust and keeping young people motivated about their futures. The difficulties PAs outlined included managing large caseloads, dealing with emergencies, and having to finish with young people when they turn 21 (National Leaving Care Advisory Service, 2006).

A *Community Research* report suggested that young people valued personalised support from their PA. The report also highlighted that young people considered the reliability and consistency of their relationships with their PA to be important (Community Research, 2011).

### 5.2 Program Participants’ Overview

There are twelve young people who are participating in the pilot *Stand By Me* program – five young women and seven young men. Seven of these were aged 17 years when they began their participation, while the others were 16 years old.

At the time of referral to the *Stand By Me* program, nine of the young people in the *Stand By Me* pilot program were from residential care or lead tenant placements, with three living in foster care or kinship care placements.

**For the young people referred to the *Stand By Me* program, the following areas of need were identified:**

- Independent living skill needs, including budgeting, making/keeping appointments, self care and personal hygiene, learning to drive, cooking, maintaining a household, general planning and organisational skills;
- Seeking private (rental) accommodation, a risk of homelessness, seeking a suitable placement, lack of accommodation options after leaving care, absconding behaviours;
- Engaging, advocacy and negotiating with services (including DHS Disability Client Services), and a lack of alternative community supports;
- Support to resume seeing family, help in maintaining healthy family relationships, a lack of family support;
- Working with school to plan for suitable curriculum, planning beyond VCE, support to remain engaged or re-engage with study;
- Seeking employment;
- Concerns about drug use, drug-related behaviours and risks;
- Areas of intellectual disability or acquired brain injury;
- Retaining counselling supports;
- Pregnancy and termination;
- Sexuality, sexual relationships and domestic violence; and
- Assault, intimidation and criminal charges.

Of the seven young people who left care in the program’s initial twelve month period, the majority are living in a family-based household – for example: living with a partner’s
family, living with a sibling (after a kinship care placement), living with a previous foster family, remaining in a home-based care placement, or returning to live with family.

Of the other young people who have left care, one young person is living in a Supported Residential Service (SRS) and one is living in a Supported Transitional Student Housing program.

5.3 Feedback From Program Stakeholders To Date

5.3.1 Young People with Complex and Multiple Needs

Information from program stakeholders has confirmed that the young people referred to the *Stand By Me* program have been those with complex, and often multiple needs. Some of these young people are at increased risk of harm or poor outcomes after leaving care, such as health or substance use issues. Three of the young people on the program have a recognised area of disability, such as an intellectual disability or acquired brain injury.

5.3.2 Young Peoples’ Lack of Support Leaving Care

A recurring response from the workers interviewed is that young people are not emotionally or developmentally ready to leave care, and there is a significant challenge in working with young people to prepare for this time.

“(M)aybe the common thing is that none of them are ready to leave care. No matter what the issue, none of them are emotionally ready...”

Stakeholders also identified that young people referred to the *Stand By Me* program were likely to be those needing more support after leaving care, and those in unstable placements.

“Generally they're so displaced and ... even if they do have family, they're so disconnected from their family. For us to give them that ... connection still to Berry Street is just so instrumental to them...”

5.3.3 Recognising Leaving Care Can Create Trauma for Young People and Out-of-Home Care Providers

The need for more support for young people close to the time that they are leaving care is highlighted, as young people can experience anxiety about how they will manage, and feelings of further trauma, rejection and abandonment at this time.

“Well, it’s really common for young people to be really heightened and anxious around that time of leaving care so it can be a time of immediate disengagement before they reconnect.”

“A lot of them with significant trauma backgrounds, you’re wondering how much they’re actually going to process.”
“And we often re-traumatise these (young people) when they have to leave care and sometimes...they need to go home to family and deal with the trauma and rejection that they’ve gone through all over again.”

Workers found that the time around the transition from care, as well as being very distressing and difficult for young people, could also be extremely difficult for them too.

“...There have probably been all different emotions – stressful, sad, some happy moments. It’s very mixed emotions but (the Stand By Me workers) have really brought stability to our program.”

“...In some cases, units have a very strong attachment to the people they’ve cared for on a daily basis...”

5.3.4 Young People in Foster and Kinship Care

The Stand By Me program has primarily focused on supporting young people from residential care placements, as they are more likely to experience poor outcomes after leaving care (Whyte, 2011). Nine of the young people in the Stand By Me pilot program are from residential care or lead tenant placements, with three also being from foster care or kinship care.

Feedback from the Stand By Me program highlights the additional difficulties often experienced by young people leaving residential care placements. In particular, the environment itself presents significant challenges – for example, staffing arrangements and schedules can put artificial structures and boundaries around life for young people in ways that adversely affect their capacity to develop social and living skills.

“That’s where the most fragile (young people) end up, most fragile and complex, so they’re already behind the eight ball...there’s a general sense that in Resi, the environment contains or puts artificial boundaries around life...”

‘If the Stand By Me worker continues to visit on a regular basis and just say for example (they) were struggling... that would be gold to (them), to just see their face and know that they already know them, because a lot of our (young people) ... they see so many different workers...”

5.3.5 Access To Leaving Care Funding, Income or Crisis Payments

The Stand By Me program has found that as a result of their programmatic involvement, young people have had improved access to leaving care and TILA funding.
“But a lot of the time, if that young person wasn’t engaging, they’re not a part of that process and you can’t apply for money unless that young person is involved in the process. So us being there sometimes can help those conversations get up and running and they can access their money. We would hate for them not to.”

“That’s right, and they have access to TILA funding even after they leave care, which can be a significant amount of money but these (young people) don’t know (how) to access that if they’re on their own. They don’t know who to call. They don’t know where to start.”

The Stand By Me program workers have also found it important to be able to help young people access flexible Centrelink supports, particularly in times of crisis.

“(S)o at times of crisis, I’ve been able to ring social workers at Centrelink who are able to put things in place for young people that are transient. And they’ve been able to help me out with a couple of applications for young people that are leaving residential care, but are not really engaging that well.”

5.3.6 Significant Limitations in Suitable Accommodation

The Stand By Program has continued to be challenged by the task of finding suitable accommodation options for young people. There are many restrictions to access to some programs, and options that are available may be deemed unsuitable.

“Private rental is the best option for most of our young people – with a lot of support needed to maintain it sometimes – but it is the most viable option even though it’s quite expensive...”

“Refuge...that’s a six-week intervention and they always look at finding them more long-term housing”

“It has to be a youth friendly refuge to begin with, so even though they’re past 18 they’re still very vulnerable. Sending them to an adult refuge ...it’s absolutely a horrible experience for these young people. Some of them would rather sleep on the street. We debated they’re probably safer.”

5.3.7 Negotiating The Continuation of Out-Of Home Care Placements

For young people from foster care placements in the Stand By Me program, workers have helped support and negotiate transitions and changing relationships with existing caregivers so that these relationships are sustainable and successful in the future.
“The interesting thing about those (young people) is that some of them will stay on with their foster carers, but the formal support from all agencies ends. So actually we’re playing quite a large role in helping that transition occur and what that placement looks like post 18 because it is quite a big transition for these young people.”

“We’ve got a young person who’s in a home-based care kinship placement but (their) family are looking to move interstate. To be able to do the leaving care planning with them while they’re still here - and have a little trial run at share housing or whatever – has been so great for all of them. They’ve all got a lot more peace of mind so that’s really good”.

5.3.8 Support to Develop Independent Living Skills, Reduce Social Isolation and Maintain Tenancies

The Stand By Me program’s continued involvement, even when independent housing has been secured, has helped young people to be less vulnerable to isolation or other issues that can affect the sustainability of their independent tenancy.

“If moving into a share house is that young person’s option, then we want to try and really make it work. So we’ll be looking at working on independent living skills, looking at checking in regularly, making sure that shared spaces are respected and all of those things that may prevent it falling apart…”

“I think having a Stand By Me worker helps in some ways to negotiate that pathway around shared living. After you’ve left care, you’ve got someone to talk it through with, as your own children would do with their parents.”

The flexibility of the Stand By Me program – in continuing to support young people whether they are homeless, part of an accommodation program or in independent housing in the community – is also noted.

“And Stand by Me.... they’re not tied to the accommodation so it’s about the person. Wherever you go, even if you’re homeless I’m still going to be standing here. It’s a very powerful thing especially post 18 when everyone else disappears.”

5.3.9 Promoting Supportive Links To Birth Families

The Stand By Me program has found to date that creating and supporting positive links with family has been a significant issue for the young people they are working with, and a critical programmatic role for the Stand By Me workers.

“(A)ccess to family is often very contained and structured and we follow court orders. Then suddenly they’re 18 and that structure is no longer there, so it’s quite difficult.”
“I see that as a huge part of our role - like when it's appropriate to try and facilitate... family reunification...so that the family and the young person can have realistic expectations around the relationship.”

The Stand By Me program has determined that there is a clear role for the program in supporting young people who are leaving care to develop links with family that can be negotiated and planned, and to foster realistic expectations for these relationships.

“(Stand By Me can assist) so that the family and the young person can have realistic expectations around the relationship and maybe begin to get that happening in a safe and contained way.”

“And even to be able to say, if something does happen with mum. ...Well, maybe that's just mum... it might be the reality of it…”

“Because (they're) mourning, they finally get that realisation that family are there for (them) but not in the way that (they) were hoping they would be... It's grief and loss for (them).... They're grieving for the childhood that they wished (they’d) had and the family that (they) would like them to be.”

A return to the family home may also be seen to be a part of a young person's leaving care plan; however, the SBM has found that these relationships or family placements can break down quickly. In this instance, the SBM program can provide an immediate and vital and timely safety net, as evidenced by the reflections of a lead tenant worker below.

“From feedback I've had, some of them might hold their hopes on the family being there, but that often doesn't end up eventuating, or it breaks down very quickly.”

“So (they) ended up going back to family for a day and then (they) were homeless... The day after (they) left us it all fell apart. Fortunately, between Stand by Me and Post-Care and us, we were able to cobble together something and now (they're) looking to get (their) second private rental place just with (their) partner. But (they) had a very difficult run.”

“They often turn 18, they want to go home and they think they're going to be able to reconcile with their families and it will be really wonderful for them. It's quite a big shock that sometimes the family issues are still there…”

“It's interesting again learning as we speak, until we had Stand By Me, (young people) don't get to check the reality of that family situation until they're out of the system, and then there's no one to pick them up…”
5.3.10 Young People Leaving Care Becoming Parents

Parenthood has arisen as an issue for one young person within the Stand By Me program to date. The SBM worker has established rapport and a trusting relationship with the young person, helping them to respond to the additional support needs of a care leaver who is also a young parent.

5.3.11 Education, Employment, Training And Skills Development

The Stand By Me program also highlights the significant difficulties that young people in residential care face in maintaining continuity with schooling or accessing job training when they still need to prepare for leaving care.

The Stand By Me program has focused on helping young people leaving care with employment, education and training. An important role has been to link with specialist employment and educational supports for young people that can be flexible and continue to engage with the young people even when their circumstances change. One of these supports is the Springboard program, which offers an intensive support service for young people transitioning from residential out-of-home care who are not engaged in education, training or employment.

“What I like about Springboard is that it allows them to engage with an (agency) that supports them intensively with outreach as well and they don’t lose their unemployment benefits. And they don’t have to be a job seeker because they’re engaged with an agency that finds them employment or education.”

“But I’ve had a really good experience with a young person who’s been transient and moved out of the area and was not engaging for a really, really long time. But they hung in there and then ended up doing a transfer to Springboard in the West. So they do that intensive engagement as well, and they do hang in there and really understand the client group.”

5.3.12 Addressing Mental Health Issues And Trauma

The Stand By Me program has found that post care can be a time when young people may be more ready to address previous trauma. The program, to date, has worked to help young people address existing trauma and access specialist mental health supports.

“Just because they’re 18, doesn’t mean their trauma’s gone away...this is often the first time that they’re actually emotionally ready to work through some of these issues. If they don’t they’re not going to have good outcomes as adults.”

“I think part of the leaving care process and starting to mature means a lot of these young people are going to be more likely, more ready, to seek out that counselling support than they may
have been when they were in care. But unfortunately the system cuts them off as well in regards to that.”

“And work on some of the emotional issues because we have fortunately got that extra money for counselling when they’re ready to…”

5.3.13 SBM Workers’ Range of Roles With Young People

The pilot SBM program has found that there is a changing focus for the SBM workers - from the initial contact and working with young people before they leave care, to when they leave care.

While initial contact with young people has largely focused on relationship building and getting to know young people and their circumstances and needs, as young people have moved towards leaving care, the SBM worker has established a more direct case-management approach.

5.3.14 Importance of Initial Relationship Building with Young People

A key initial focus of the Stand By Me program while young people are still in care has been on SBM workers developing relationships with, and getting to know, young people in the program.

“(W)ith all of our (young people) I think obviously we’re quite lucky that we’re got so long to develop a relationship. The more time, the better. Obviously, the more they trust you and get to know you, the more they understand what the role is and what you can teach them or facilitate.”

“...(A) relationship with the young person, that’s the centre of any support. So if we can stand by them long enough, then they’ll start to go ‘Okay, well then maybe I can talk to this person about what irks me or worries me.’”

Other stakeholder feedback has also highlighted the importance of relationship building between the SBM program and young people.

“Yep. But one of their strongest things is just that they’ve gotten to know the (young people). That’s one of our biggest concerns for the (young people) in care.”

“I don’t know. I’ve just seen more interaction with a young person than I’ve ever seen before and I don’t know if it is about wanting to engage. Part of their job is getting to know the (young people) first and foremost, whereas another case manager just gets given their file and has to maybe do other parts of their job. I don’t know.”
The program has identified that one challenge to this relationship building occurs when young people, such as those in residential care, have multiple workers in their lives, and feel overwhelmed by the addition of any new workers.

“Young people having another worker in their lives where they may have had many in the past...they're saying I've had 20 workers in my life, I've had enough.”

5.3.15 Reliability and Consistency of Contact By The Stand By Me Team

Stakeholder feedback highlights the importance of Stand By Me workers having reliable and consistent contact with young people in the program so that they stay engaged.

“(W)ith some (young people) because they're quite busy and they've got a lot on, you can just meet sporadically, but for others predictability and consistency is really important – this time every week. Whatever works best for each.”

“They always know what they're doing. So I just think regardless of whether that (young person’s) going to be there or not be there, that that worker still needs to come. I do feel as though with (the Stand By Me workers) they have had that consistency...”

“...(A)s long as they stay consistent with catching up with them to be honest, because we see [the opposite] so often. If workers don’t show up, then (young people) disengage. They need to that continue to come and continue to have contact and get to know them.”

“I think so and I’ve just seen that (reliability) in this program.”

“And even if that (young person) is not at placement and they come to the appointment, but as long as somebody tells the (young person) ... ‘Actually, I did come to see you. I missed you today’ or ‘I missed seeing you today. I came and it’s okay that you weren’t there but hopefully next week I’ll see you again and be there at the same time, same day maybe.’”

5.3.16 Importance Of Planning Role With Young People

The Stand By Me program has determined a key role as being to support client-focused planning. This involves seeking to directly engage young people in the processes surrounding their transition from care, as well as promoting transition processes that occur over time. Feedback from young people to the SBM workers has highlighted the value they place on having support with leaving care planning.

“I had one young person who is 16 say to me ‘I’m really glad I’ve got a leaving care worker because I’m really worried what’s going to happen when I’m 18.’”

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“(T)hey are really keen to do (their) leaving care planning; (they) really wants to be a part of it, so that’s just fantastic”

“Yeah, and with another young person (who) is very task focused, (they were) actually reflecting a couple of weeks ago on how much we were able to achieve since we started working and the fact that it’s only been seven months.”

Both young people and SBM workers recognise that there is value in transition processes that can occur over time, and be thought through and negotiated.

“...So when I saw (them) yesterday, (they) were saying that (they’re) already thinking about (their) options to move out of and (they) specifically said to me ‘I’m not going to be doing it like I did it at X, where I left it until the last second. I want to do this properly.’ So that is a huge shift in the way that this young person is thinking.”

“We can intervene in a formal way with the family and say: ‘Okay the young person’s identified that they want to come home so what we need to do is sit down and make a plan. Should we have two nights a week for her to see how it works while the young person is 17 and a half...’”

One key challenge associated with working with young people to plan for leaving care is how best to to minimise the risk of increasing their anxiety about the process and event.

“Having those conversations prepares them for the reality, but also probably scares them...pushing them towards something they’re not ready for.”

5.3.17 Client-Centred Advocacy Role

Both the SBM program team and other stakeholders interviewed recognise the vital role that the program workers can play in advocating for the needs of young people when they are particularly vulnerable.

“(They’ve) got the least power of advocacy, so there’s a good need for Stand By Me...”

“But there (are) a lot of strengths from having a person who can keep other services accountable. And I think we can’t really underplay that as an important part of care team’s role.”

“In my opinion, it wasn’t until Stand By Me started working with this young (person) ... that we got the ball rolling even further through just the connections with disability and with case management as well.”
“...To say look that's completely the opposite of what the young person is wanting, so why would we even consider this... [The SBM worker] becomes an extra voice about what this young person needs.”

5.3.18 Facilitation and Resourcing Roles

By developing relationships with young people, the SBM program has laid the foundations for them to explore additional supports, and helped to create links to a range of additional formal services.

“(W)ith one particular (young person) who has left home, I think the one thing I’m trying to do is actually help (them) understand the system at large, as well as... around his community.”

“Just those little throw away lines that often lead to quite significant conversations – you want to be able to carry that on and say, ‘Look, I think I know this person who would be great to talk to about that.’”

“For the worker to just pick that up and just run with it... again, it would not have happened otherwise if the worker didn’t exist or the Stand By Me program didn’t exist.”

5.3.19 The Value of Long-Term Program Involvement With Young People

Stakeholders highlight the importance allowing SBM workers to develop an understanding of a young person’s care experience, routines and their needs over a significant period of time, and the value this understanding offers as the young person moves towards leaving care.

“(The Stand By Me worker) can continue on that similar pattern of how we cared for (them) and there’s just that consistency, I guess, particularly for somebody who can’t respond and express their needs as well.”

“(T)hat’s important because once they leave, having built up that body of understanding about who they are and what’s going on for them...”

“I think there is a noticeable difference with some young people when you’ve got a worker sitting in the care team who’s going to be there post 18, whereas if everyone is aligned to the statutory system, we work really hard up until 18 and then stop.”

“That’s just a little bit of momentum that some people need...and they don’t have to do it alone, that’s the thing.”
5.3.20 Working With Care Teams

Stakeholders valued the advocacy and feedback that SBM program workers bring to care team processes and to out-of-home care services. In particular, they stress the value of the SBM workers’ regular relationship with a young person over time and depth of understanding of their needs.

“Stand by Me becomes another voice in the care team... Yeah, because by the time that we’re having these conversations, we’ve probably known the young people maybe two months, maybe three at the most, whereas Stand by Me might have been there for six months and have a really good understanding.”

“I found with the Stand By Me case managers they’ve been instrumental. They’ve really made myself and my staff a part of the process, as we have with them I think, and really worked as a team...”

“I liaise a lot with the Stand By Me worker, which has been really good...”

Stakeholders have also indicated value in the longer-term nature of the Stand By Me program’s involvement, and the fact that communication with the young people is able to continue once they have left care. Out-of-home care workers interviewed suggested that they were very keen to be kept informed of young people’s progress after they had left their care, and were appreciative of the capacity of the Stand By Me program to negotiate an ongoing link to the young person. The presence of the Stand By Me program also helps to ensure services are engaging in planning for young people beyond leaving care.

“(B)ecause you're at the other end, as long as you've got that communication between yourselves and the Stand By Me worker, you can help understand or get a feeling for where [the young person is] at.”

“It's such a rigid line that we can’t cross. Having a Stand by Me program or programs like Stand by Me that can go post-18 allows these services to start working in a different way...we can actually look at the next couple of years and we’ve got some follow through; it’s not just on our goodwill.”
6. KEY THEMES EMERGING FROM THE FINDINGS

6.1 A Trusting, Consistent and Reliable Relationship With Young People

The findings from the pilot Stand By Me program to date highlight that the relationships workers are able to build with young people while they are still in care have a significant impact on their progress and outcomes after leaving care. A focus on relationship building, as a key element to working effectively with young people, is supported by a range of research, including interviews with Personal Advisers and with young people themselves.

Personal Advisers in the UK stressed that the relationships they were able to build with young people were critical in helping them to be successful in their roles, emphasising mutual trust and motivating young people about their futures as significant (National Leaving Care Advisory Service, 2006). The importance of relationships that are able to support young people’s transitions from care are also evidenced by Reid and Dudding, Frey, Greenblatt and Brown (in Whyte, 2011). USA studies also confirm generally that having a close relationship with at least one caring and trusted adult makes a significant difference to at-risk youth (Jessor 1993 in Dworsky, 2010).

A detailed Australian literature review by Gronda (2009) found similarly that best practice case management for people who are homeless is based on relationships. These relationships may be between a client and case manager, or a case management team, and are also likely to include delivering comprehensive, practical support. Gronda’s research found that persistent, reliable, respectful and intimate relationships that can deliver practical supports are most effective in supporting homeless clients.

The views of Stand By Me stakeholders have also highlighted the importance of the reliability and regularity of the contact that Stand By Me workers have with young people who are part of the program.

Interviews with young people in the UK, including those leaving care, reinforce the importance they place on the reliability and consistency of their relationship with a Personal Adviser (Stein and Munro, 2008, Community Research, 2011). The young people also indicated the importance of workers being flexible and responsive (Munro, Lushey, Ward, and the National Care Advisory Service, 2011).

The findings of the SBM pilot program to date strongly reflect the findings from other studies and feedback from young people and service providers (including PAs) that strong relationships – that are also consistent, reliable and flexible – are likely to be valued by young people, and help with delivering effective program practice.

6.2 Recognising that Leaving Care Is a Traumatic Time for Young People and Caregivers

The SBM pilot program has identified that as young people move towards a transition from care, they may experience further trauma and risks, including: a loss of links to significant care givers; feelings of fear and anxiety about an unknown future; stress around renewed family contacts; as well as increased risks of disengagement with services and homelessness.

Workers from the Salvation Army West Care suggest that young people can find this transition period terrifying, with some young people reverting to negative behaviours from earlier times, possibly thinking that if they behave in this way, they won’t have to leave. The processes that are occurring may confirm in a young person’s mind that another betrayal of trust has occurred, and that the relationships they have now have no future (Bristow, Cameron, Marshall, and Omerogullari, 2012).
WestCare suggests that leaving care can also be a traumatic time for workers too (Bristow et.al, 2012). Feedback from the pilot SBM program has also indicated that caregivers experience concern and anxiety for young people, as the young people they know well move away from known and trusted out-of-home care supports. Out-of-home care providers highlighted the value of a supportive program, such as SBM, providing an important ongoing safety net for young people. Knowing that such a safety net is in place can give the out-of-home care worker confidence that the young person will continue to be connected and supported in meaningful ways.

6.3 Value in Retaining Links to Out-of-Home Care Supports and Networks

Feedback from a range of stakeholders in the pilot SBM program has confirmed the multiple benefits of long-term continuity of support for young people, whereby anxiety and a range of risks may be reduced for young people. Out-of home care workers benefit too from being reassured that young people continue to be supported after they leave care by someone who knows and understands them well.

Research by Cashmore and Paxman emphasises the central importance of continuity of relationships and supportive relationships with carers and others with an important place in a young person’s life. They suggest that the most likely means of translating stability in care, into “felt security”, and therefore a means of ongoing social support for a young person, is through a continuity of relationships, such that they do not end on a young person’s 18th birthday or before (Cashmore and Paxman, 2006).

Based on other research by Wade (2008) in the UK, young people’s ongoing contact with residential workers or foster-carers helps to reduce their risk of social isolation. Wade also suggested some correlation between young people maintaining regular contact with carers, and having a stronger friendship network, a better life and improved social skills (Wade, 2006).

Wade’s research found that some young people who moved on with a last placement in residential care were still in contact with a residential worker at least monthly, and a number who left foster-care were still in touch with a foster carer. While the frequency of contact has been likely to diminish over time, Wade suggests that returning for infrequent visits, or for special occasions, is also a part of the fabric of family life, and can provide considerable emotional support and reassurance for young people. Wade also found that this kind of support is not available to the majority of young people leaving foster and residential care settings, and that much of the support takes place informally, without recompense or formal integration (Wade, 2008).

In the USA, Jones indicates that young people with stronger social networks were more resilient, and that the key domains associated with resilience for young people included the availability of social support, having independent living skills, being older at discharge, as well as maintaining contact with former foster parents (Jones, 2012).

Victorian research with St. Luke’s Anglicare outlines the value of informal support provided by residential care services and staff to young people. Young people gave feedback that contact with residential care workers afforded them practical advice, or emotional and supportive contact when they were feeling lonely or socially isolated after leaving care (Mendes and Meade, 2010).

As well as young people valuing the retention of their in-care supports, research by Munro et al also found that the majority of foster carers were happy for young people to stay in touch. Their findings, however, indicated that carers often expected young people to initiate such contact. However, given many young people’s experiences of past hurt and rejection, they may not feel either entitled or able to do this. Peer researchers who had experienced being in care themselves suggested that authorities should be more proactive in encouraging foster carers to remain in contact with, and offer ongoing support to, former looked after children (Munro et al, 2012).
Some transitional support programs in Victoria provide models that explore opportunities to formally incorporate the retention of carers into young peoples’ care plans in empowering and proactive ways. MacKillop Family Service’s lead tenant housing program actively seeks to build carer links into transitional planning processes. Young people entering the program are encouraged as part of the planning process to identify a carer from the past 18 months whom they would like as part of their “care team” and with whom they can have as much contact with as they choose. McKillop suggests that the capacity for supportive carer relationships to be retained can be restorative for young people with previous experiences of loss and grief and trauma in their close relationships (London, Craig, Haddad, McLeod, and Parker, 2010).

Given that SBM works with young people from their time in out-of-home care until after they leave, workers are ideally positioned to promote the retention of supportive out-of-home care links for young people.

The Salvation Army WestCare also actively promotes ongoing links with care leavers, and “continuing care” processes are formally incorporated into workers’ roles, recognising the significance of this continuity for young people. These roles are not funded, however. (Bristow et al., 2012)

Given that the SBM program model is to work with young people from their time in out-of-home care until after they leave, workers are ideally positioned to promote the retention of supportive out-of-home care links for young people, and incorporate these links into formal leaving care plans that provide protective and supportive networks for young people once they leave care.

6.4 Importance Of Support Around Leaving Care Planning

Previous research suggests that processes to help young people transition from care are often not well managed, can be hasty, result in one-off meetings and have not been found to have been of benefit to young people. In Victoria, DHS have highlighted how important it is that transitional planning and support begin well before young people leave care, and continue beyond leaving care (DHS, 2012).

The Right2BCared4 research in the UK suggests that issues of concern include delays in completing initial plans, failures to review and update them, and cases in which the completion of the pathway plan was a one-off event, rather than an ongoing process for young care leavers (Munro et al., 2011). Recent research in Victoria has also found that few young care leavers indicated any significant value or benefit arising from leaving care planning processes (Mendes and Meade, 2010).

Research by CREATE with 37 young people found they want effective planning processes to occur in a timely way and with their active involvement in the process. CREATE proposes the introduction of transition from care workers (TFC workers) to encourage young people’s participation in the transition process. They suggest that such roles be explored across all regions, that transitional planning be commenced with young people at 15, and the development of tools such as a Participation Strategy to help workers engaging with young people, as well as a checklist of actions and a template for a Leaving Care Plan (CREATE Foundation, 2010).

Young people want effective planning processes to occur in a timely way and with their active involvement in the process.

Similarly, Hall argues that engaging with and empowering young people to actively participate in transition planning and the decisions that affect them is a powerful and essential way of helping them develop useful skills for adulthood (Hall, 2012).
The SBM program provides a model to deliver timely planning that directly engages with young people. To date, the pilot program has found that young people respond positively to such an approach. The benefit of the supports provided by SBM are increased for those who experience heightened feelings of fear and anxiety during this unsettled time.

6.5 Access To Leaving Care Funding, Income or Crisis Payments

Through the involvement of the SBM project, young people have been more readily able to access leaving care funds i.e. the Independence Allowance (TILA) payment of $1,500 that is provided to help young people establish themselves in their transition from care. Without SBM, they may risk not gaining access to this funding, which must be used within two years of leaving a formal care placement (Whyte, 2011).

Feedback in Australia and internationally suggests that such funding processes can be confusing and difficult to access for young people. Margolin suggests that many young people will leave “home” (or state custody) in the USA at age 18 or 21 without a dime, and that many leave care informally or run away without accessing funding through the Chafee Foster Care Independent Living Program (CREATE Foundation, 2010, Margolin 2008).

The SBM program has also found that, through SBM’s involvement has helped young people to obtain vital income payments or one-off funds to assist them in critical circumstances, including homelessness.

6.6 Reduction in Future Housing Risks for Young People

The SBM program was established with a focus on helping young people reduce their risk of becoming homeless after leaving care (Whyte, 2011). Accommodation has been widely considered a mediating factor in helping young care leavers to overcome past difficulties, achieve stability, and make progress in other areas. Dixon and Baker (2012) suggest that a significant proportion of young people continue to struggle to achieve stability and that settled post care accommodation (and services to help them find it) are a priority.

There is significant evidence of the value of young people being able to leave care later. Providing young people with a gradual and delayed move to independent living can act as a protective factor against later difficulties (Dixon and Baker, 2012). The evaluation of the Right2Be Cared4 program also identifies a significant cultural shift towards young people’s right to planned and negotiated transitions from care that would occur when young people were ready. The evaluation suggested that those young people who had experienced difficulties, but were still coping and who were fairly positive with their current circumstances, had received or were still receiving additional support and services (Munro et.al, 2011).

The Stand By Me program has assisted young people to plan their move from care, with a primary focus on considering their immediate accommodation options and needs, as well as those of the future.

6.7. Support to Participate in Trial or Transitional Housing Programs

Research highlights that the involvement of additional support or services such as the SBM program can also enhance the benefits of trial or transitional housing programs that offer opportunities for a greater degree of independence.

In the UK, transitional or trial housing options may include a safety net plan to return to a more supported environment or care placement if things do not work out. Accommodation can include training flats, supported housing, supported lodgings and foyers. The Right2Be Cared4 program offers young people the opportunity to experience a greater degree of independence, but with support available to help
acquire skills and contribute to more gradual transitions to independence (Munro et al., 2011).

In the USA, it is also suggested that despite the inadequacies of funding for transitional housing programs, case workers or professionals can help deliver positive outcomes for young people, by partnering with these programs and providing life skills training, opportunities for education and workforce development, access to physical and mental health care services, and relationships with caring and trusted adults (Dworsky, 2010).

6.8. Issues of Affordability, Living Skills, and Isolation in Independent Accommodation

While affordability is a critical concern for young people seeking independent accommodation, feedback from the SBM program suggests that private rental housing is still often the only available housing option for young people to pursue. Issues of affordability, poor practical independent living skills, limited interpersonal skills to negotiate issues and relationships with other co-tenants, and inadequate preparation can all lead to private rental housing breakdown. Dixon and Baker (2012) outline that two of the largest studies of leaving care in England reported many young people moved to independent living ill-equipped to take on the challenges of adult life, including finding and maintaining a home. They propose that developing independent living skills can help young people avoid housing breakdown.

As well as the lack of skills to maintain a home, young care leavers in the UK report that the worst aspects of leaving care include being on their own and experiencing loneliness, not being able to cope independently, and not being able to get help when they need it. Wade suggests that for young people with limited family support, the transition from care carries a risk of loneliness and isolation. Not all young people want to live alone, nor can many cope with the social implications of doing so (Wade, 2008).

Other UK research suggests that social isolation and loneliness can lead to young people not staying in their properties, or becoming vulnerable to their property being taken over by unwanted visitors (tenancy hijack), or problems with guests. They may also find it difficult to deal with the practicalities of managing in their own accommodation (NCAS, 2009).

“Floating” housing support workers have been developed in the UK to assist young people while they are living in independent accommodation. This support is linked to the young person, not to their tenancy, and seeks to help young people increase their confidence through a combination of practical and personal supports. Floating housing support workers help young people to maintain their tenancies and can prevent tenancy failure, particularly those related to anti-social behavior and rent arrears, which have been commonly cited as reasons leading to young people losing their homes— all of which can have a negative impact on their future capacity to access private rental accommodation (NCAS, 2009).

It is also suggested that “floating support” can be a particularly important intervention for young people leaving care as, if provided when the young person experiences their first tenancy, it can have a positive impact on their ability to manage the practical and emotional responsibilities of living alone (NCAS, 2009).

The SBM program offers the opportunity for workers to remain involved with a young person, to talk through tenancy-related issues, help reduce social isolation and engage in skill development and capacity building activities that help them to retain independent housing.

6.9 Negotiating The Continuation of Out-Of Home Care Placements

Three of the young people who are part of the SBM program come from foster care or kinship care arrangements, and an important unanticipated role for the program has
been to support and help negotiate changed arrangements with their carers as they leave care.

Research is strongly supportive of this programmatic direction, when attachments and positive relationships have developed with carers, and young people have confirmed that they want to be able to stay with these foster carers beyond leaving care (NCAS, 2009). In the UK, the “Staying Put: 18+ Family Placement Programme” was piloted in eleven local authorities from 2008 to 2011, allowing young people the opportunity to remain with carers until 21 years of age by converting foster placements to supported lodgings (Munro et al, 2012).

The evaluation of the Staying Put program has shown that PAs or social workers played a significant role in helping young people transition their placements from an out-of-home care placement into a supported lodging. Research highlighted the value of young people being actively involved with the process, and the benefits of preparation and planning (Munro et al, 2012).

6.10. Providing Support to Re-establish Positive Links to Family and Minimise Risks

A further key role for the Stand By Me program has been to support meaningful connections to family for young people in out-of-home care, and after leaving care. While not initially identified as a role for the SBM program, it is a significant role identified in previous research, and a priority in consultations with young people.

Research in the UK by Wade in 2006 found that 80 per cent of young people were in contact with family members after leaving care (Wade in NCAS, 2009), and that approximately 12 per cent of care leavers were living with parents or relatives at the age of 19 (NCAS, 2009). Wade also confirmed that while only limited numbers were able to return to live with families after leaving care, the vast majority had contact with family members.

While only limited numbers were able to return to live with families after leaving care, the vast majority had contact with family members.

Research in regional Victoria also identified that care leavers valued contact with a parent, often their mother, one or more siblings, and grandparents, as well as friends. The young people saw these individuals as significant sources of support and contact although most were not living with them (Mendes and Meade, 2010).

Practice outlined in the UK suggests that leaving care is a time when both the risks and benefits from renewed contact with birth families can occur. For some, the family will offer support, while for other young people, family contact may lead to disappointment and disillusionment. It is therefore proposed that how contact occurs needs careful consideration, and that having support available for young people to help them manage their relationships with family is crucial (NCAS, 2009: Right2BCared4).

Research by Jones suggests that contact with family can have a negative impact on young people. As a result, the child welfare system is likely to need to be much more proactive in engaging young people to support their integration back into the family and providing services that can ease this transition (Jones, 2012).

Research suggests that strategies to create, repair and strengthen family networks should be an important feature of pathway planning for young people leaving care. This must recognise that families can offer important informal support for young people, even though they may not end up offering an accommodation option (Wade, 2008; NCAS, 2009). NCAS suggests that this role should be a priority for leaving care teams (NCAS, 2009).
Feedback from young people in a CREATE study suggests that they lack guidance on
reunifying with their birth families, and are looking for support to establish relationships
and connections, including practical and hands on assistance (CREATE Foundation,
2010). Recommendations from CREATE include the development of early links with
family (activities such as gradual or weekend visitations) while a young people is still in
care. This is particularly important if the young person’s transition plan involves moving
back with their birth family (CREATE Foundation, 2010).

The SBM program is playing a significant role in enhancing safe and supportive family
relationships for young people. With planning and negotiation, SBM program workers
can help minimise the risks that young people may face if they rely heavily on a return
to family as part of their leaving care plan. The program also helps young people
leaving care to negotiate contact that is sustainable and can provide positive support.

6.11 Early Parenthood

To date, one SBM program participant has become a parent. There is significant data
highlighting that young people leaving care can become parents themselves at an
earlier age than their peers (Mendes Johnson & Moslehuddin, 2011).

Wade suggests young people may be seeking to build an alternative home base
through relationships with partners, or by becoming parents themselves (Wade, 2008).
Research indicates that pregnancy often happens shortly before or after leaving care
(Courtney and Dworsky, 2005, in Jones, 2012).

Young people becoming parents around the time of their transition from care is
recognised in research as presenting both challenges and opportunities (Mendes et.al,
2011), and is therefore likely to be a time for a range of additional supportive
interventions. The Right2BCaredFor research identified that PAs had been proactive in
offering support to young parents (Munro et.al, 2011).

The SBM program has likewise found that having a pre-existing role with a young
person allows workers to support the transition to young parenthood too.

6.12 Addressing Mental Health Issues and Trauma

There is significant literature on the mental health and trauma-related impacts for
young people in care, with studies indicating that in the USA at least one third of young
people in the child welfare system have a diagnosed mental health problem (Jones,
2012).

In the UK, Broad also confirms that the health and wellbeing of young people leaving
care is much worse than for the general population of children and young people,
especially in terms of clinical depression, isolation, substance misuse and behavioural
disorders (Broad, 2007).

6.13 Education, Employment, Training and Skills Development

The SBM pilot program has highlighted the importance of addressing issues relating to
employment, education and training for young people – in particular, the challenges of
maintaining educational or employment stability while in out-of home care, and of
maintaining links to flexible specialist services such as Springboard after leaving care.

In the USA, young people who had left care were interviewed about possible supports
they may need in the future, and they identified education and employment as two
areas in which they were most interested in receiving assistance (Guada, Conrad &
Mares, 2012).
Research at the Griffith University in Queensland – based on consultations with more than 60 young people in, or who had recently left care – also raised concern that young people in care were not being helped to focus on career options, educational and work planning. The research indicated career development was not viewed as a caseworker responsibility; instead, their roles were largely focused on an acute, safety-driven casework approach (Crawford, Tilbury, Creed, and Buys, 2011).

The continuity offered by the SBM program has helped young people to retain links to or re-engage with specialist EET services – even where their circumstances may have changed – while other services may work from a more acute and crisis-driven approach, due to their more limited roles or resources.

*The continuity offered by the SBM program has helped young people to retain links to or re-engage with specialist EET services – even where their circumstances may have changed.*
7. CONCLUSIONS TO DATE

Research raises the question of how to ensure stability in care, and then translate this stability into feelings of security and belonging so that young people leaving care have a safety net around them that they trust, and are willing and able to access (Cashmore and Paxman, 2006). Government policy also articulates the importance of significant supports across the preparation, transition and post care phases in order to help young people leave care successfully. (DHS, 2012).

The Berry Street Stand By Me pilot model offers an exciting and innovative model that provides a continuity of support for young people with complex needs who are leaving care. This is achieved by by developing early client-focused and strengths-based relationships well before young people are due to make this transition, and providing continuity and support once they leave care.

Enhancing transitional planning for young people is underpinned in the UK’s Personal Advisor role and clearly recommended by CREATE in the Transition from Care (TFC) worker role they propose (CREATE Foundation, 2010). International research validates the key areas targeted and critical interventions being undertaken by the pilot SBM program.

Developing longer-term relationships with young people has been found to be of significant benefit in promoting workers’ capacity to explore options and planning, improve trust, encourage the disclosure of issues of concern for young people, and help in times of crisis. Overall, workers are more likely to be able to offer timely support that minimises any potential harm, and enhances safety and positive outcomes for the young person.

Important areas of the SBM program's initial work have included developing and maintaining regular contact and communication with young people in out-of-home care placement settings, as well as working co-operatively with out-of-home care service providers and care teams.

The program has sought to improve the active participation of young people in planning their transition, and ensuring that the planning is relevant and client-focused. Feedback to date indicates that young people value opportunities to participate in planning. Feedback also highlights the increased trauma and anxiety a move towards leaving care can rouse in young people and the relevance of increased support being provided at this time.

Supporting young people with complex needs, risk taking behaviours and areas of disability, while also working with a multi-disciplinary and interagency focus, has required intensive intervention by the Stand By Me team at times. Critical community links have been made in relation to employment, education and training, as well as income supports and crisis funding.

The SBM program has provided a flexible capacity to address both immediate and longer term housing needs by helping young people to explore and maintain housing options, negotiate changes to placements, access funding, develop independent living skills, as well as respond to crises or homelessness. Recommended housing support models similar to the SBM program includes the ‘floating’ support model in the UK that helps young people sustain independent housing (NCAS, 2009). A further similar model is found in the intensive, case-management based approach recommended by Gronda, whereby persistent, reliable, respectful and intimate relationships are suggested to be best able to support those at risk of homelessness (Gronda, 2009).
The SBM program has also helped young people to address previous trauma, recognising that leaving care may be a particular time when young people are more willing to address these issues, and linking them with specialist mental health supports. A key – and previously unrecognised – role for the Stand By Me program has been to support meaningful connections to family for young people transitioning from care. Promoting, negotiating and supporting positive links between young people and their family, and helping them to establish realistic expectations, is likely to enhance the range of supportive and protective networks available to them. This positive and significant role is identified in the research base, and has been an area of priority for young people interviewed in previous consultations.

A key – and previously unrecognised – role for the Stand By Me program has been to support meaningful connections to family for young people transitioning from care.

The SBM program has also provided vital support to one young person within the program who became a parent themselves. Becoming a parent around the time of transition from care is recognised as a significant issue for young care leavers, and presents both challenges and opportunities (Mendes, Johnson and Moslehuddin, 2011). It is likely to be a time when the young person needs a range of extra supportive interventions to help them in their new role; supportive links with the SBM program are likely to provide help them meet these additional challenges.

The program model has provided many positive benefits and outcomes to date by offering an ongoing supportive relationship and timely interventions, as well as enhancing young peoples’ positive links and personal networks. Alongside these benefits, there are also challenges implicit in preparing these young people developmentally and emotionally, and equipping them with skills, experiences and positive links they need. The existence of the SBM program as a trusted ongoing resource for young people – a support that transitions with them as they leave care – greatly improves their chances of making a successful transition into independent adulthood.
8. ISSUES FOR FURTHER CONSIDERATION

There has been shown to be significant benefit gained from the continuity of relationships developed by program workers with young people as part of the SBM pilot program. These relationships are established prior to leaving care and continue beyond leaving care, as is also the case with the UK’s Personal Advisor model.

However, the SBM program has also specifically sought to provide an intensive case-management approach to young people who may be most at risk when leaving care, rather than adopting the universal nature of the UK’s PA role. This program direction may be reconsidered and perhaps broadened to include other young people leaving care in the future. The program model aligns with a trauma-informed framework and philosophy, and seeks to enhance the protective and supportive networks available to vulnerable young care leavers, in order to enhance their resiliency to cope with change in future (Stein, 2012).

The SBM program offers an exciting and unique model for incorporating in-care supports into young people’s transition and pathway planning in order to extend their positive protective networks. Findings from research, and consultations with young people, indicate that support networks for young people contract once they have left care (Munro et al, 2012). Wade’s research in the UK in 2008 indicates the value of positive out-of-home care supports continuing for young people, while also recognising the significant challenge involved in retaining these relationships (Munro, et al, 2012).

*The SBM program offers an exciting and unique model for incorporating in-care supports into young people’s transition and pathway plans in order to extend their positive supportive networks.*

The SBM program has also determined the significance of the role of the program in promoting positive communication and links with family as young people leave care. Family reunification or contact has been a critical feature of the SBM program to date. As well as re-establishing positive links to parents where possible, Wade suggests that other family members (including siblings) and extended family (grandparents, aunts and uncles, older cousins and occasionally stepparents) may also play a quasi-parental role where young people have lost touch with their parents, or found these relationships to be largely unsupportive (Wade, 2008).

While these people may not necessarily offer a place to live, Wade’s research suggested that it was more important that young people had someone to whom they could turn, who could listen, and provide helpful advice at difficult times. Victorian research has also highlighted the importance of links to extended family and siblings for young people leaving care, with regular phone contact and opportunities for occasional visits being valued by young people (Mendes and Meade, 2010).

*Research highlights the importance of links to extended family and siblings for young people leaving care.*

It is suggested that SBM workers may help a young person uncover potential family contacts by exploring a family network map with them (Marsh and Peel, in Wade, 2008). The *Stand By Me* Scoping Study also promotes helping young people in care to become involved in external activities (such as leisure and recreational programs) that may help them move forward when they finally leave care (Whyte, 2011).

As well as participating in formal transition programs, research also suggests the need for out-of-home carers to have the necessary skills and training to equip young people for leaving care. Findings highlight the need for agencies to work together to support
care leavers, including housing providers (Stein, 2012). The SBM program is well placed to help out-of-home carers initiate such skills development as appropriate within existing settings. How this will work in practice presents some challenges, given the staffing constraints of some residential care placements.

As well as the clear need to begin planning a young person’s transition from care as early as possible, there is also significant evidence of the value gained by avoiding delayed and extended transitions. Significant benefit is derived from maintaining stable and settled care experiences, links with supportive carers, links to education, and to educational supports that are likely to improve their longer-term life trajectories (Stein and Munro, 2008).

A key objective for the UK’s Staying Put pilot has been to maintain care placements beyond care, included providing stability and support for young people to achieve in education (Munro et.al, 2012). A large international project, YiPPEE, has also clearly identified the need for a greater focus on educational outcomes for young people both in care and leaving care (Jackson and Cameron, 2012).

Other specific strategies that aim to improve young people’s positive educational outcomes include: focusing on educational support plans for young people in care; developing educational tutor programs; and extending placements for all young people turning 18 during their final year of school or until their formal secondary school education is completed (CREATE Foundation, 2010). It is highly recommended that the SBM team work collaboratively with specialist educational supports, where available, to promote stability and educational outcomes for young people in care and leaving care.

Broader discussion and planning may help to highlight and address housing inadequacies and enhance the co-ordination of supports for care leavers.

Consideration should also be given to the re-establishment of the Regional Leaving Care Alliances (RLCA), which was highlighted as an important means of supporting outcomes for young people leaving care (DHS, 2008). Broader discussion and planning may help to highlight and address housing inadequacies and enhance the co-ordination of supports for care leavers within the regional area. It is important to have mechanisms to identify young people who are likely to be at particular risk of poor housing outcomes, such as those with mental health problems, disabled young people and those with offending or substance misuse problems (Dixon and Baker, 2012).

The transitional planning role being undertaken by the pilot SBM program is closely aligned to the recommendations of the CREATE Foundation for Transition From Care workers (TFC workers) across all government regions. CREATE suggests that these roles commence with young people from 15 years old, incorporate the development of tools such as a Participation Strategy to help engage young people, as well as a checklist of actions, and a template for a Leaving Care Plan (CREATE Foundation, 2010).

In general, young people leaving care still lack the transitional and bridging support they need to achieve the goal of “a good life” (DHS, 2008), despite research, community agencies and government policy indicating the need for these services. The evaluation of the SBM model concludes that it offers a flexible means of delivering this critical support, and has been effectively designed to address the needs of those who are likely to be vulnerable to poor outcomes when they leave care.
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10. Appendix 1

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