Transitioning from care into adulthood

Transitioning from care, or TFC, is an ongoing process for young people in care. Planning for a young person’s transition from care is a continual process of assessment, planning, implementing strategies and review, from the time a young person enters care up until their transition to independent living.

Working with a young person who is transitioning from care involves more than just providing material objects like fridges or computers; it is an ongoing planning process with a young person who has a complex history and requires additional support to prepare them to function as an independent adult in the community.

Issues common to young people transitioning from care to adulthood

Young people who are in, or transitioning from, out-of-home care have the same developmental needs as those who are not in care, but they also face a range of unique issues and circumstances that highlight their need for particular support during this time.

Contemporary research findings indicate that young people leaving out-of-home care are at significantly greater risk of experiencing homelessness, unemployment, juvenile crime, substance misuse, poverty, prostitution, young parenthood, social isolation and mental illness. The transition into young adulthood is therefore a critical developmental event in the life of a young person that often presents them with a range of specific challenges and opportunities.

One key difference between young people who have left care and other young adults is that most young people who reside with their parents, live at home until their early twenties, and their movement towards independence usually involves a long transitional period during which they may leave and return home multiple times. This safety net of a secure and supportive family and related support network is not always available to young people who have been in care on a long-term basis, particularly where they have experienced numerous placements during their time in out-of-home care or continue to have a disrupted relationship with their family.

Young people most at risk of experiencing social problems

Particular groups of young people, considered to be most at risk of experiencing social problems, include:

- Aboriginal and Torres Strait Islander young people
- Pregnant young women or young parents
- Homeless or highly mobile young people or those with multiple/unstable placements
- Young people who have come in contact with the youth justice system
- Young people with disabilities
- Young people with mental health issues
- Young people with substance misuse issues
- Young people who self-harm
- Young people from a culturally and linguistically diverse background (CALD)
• young people leaving care who have no apparent connection to a support system, family or community.

Key domains to address in planning for the transition to adulthood

In order to plan in a holistic and inclusive way with a young person in care about their current and future needs as an independent adult, the following key life areas need to be discussed, considered and planned for:

1. **Relationships and connections** - develop, renegotiate and/or maintain connections with family, community links, significant people, support network, social connections through sport, recreation, mentoring

2. **Cultural and personal identity** - understanding family history and reasons for entering care, develop self value, belief, identity and sense of belonging to a cultural community

3. **Placements and housing** - identifying and applying for safe and stable long-term housing options, including referral to Housing and Homelessness Services where required

4. **Education and training** - alignment with Education Support Plans (ESP) and Senior Education and Training Plans (SET Plans), meeting current education/employment needs and thinking how they will take them young person into independent adulthood

5. **Employment** - enabling access to career planning and support, relevant training programs and work experience or supported employment programs to reach the goal of financial independence. Include discussions about access to transport and the young person’s ability to independently commute between work and home.

6. **Health** - knowledge and skill development to maintain physical health, mental health and sexual health, including relationships and sexuality. Planning for any special or ongoing health needs of the young person and engaging with adult health services, counselling services or disability services

7. **Life skills** - provision of opportunities and environments for experiential learning in managing money, social development skills, basic self-care skills and basic practical daily living skills, recognising the individuality of each young person

8. **Financial resources** - identifying the resources and support the young person requires to become financially independent. Incorporates income from employment, Centrelink, the one-off Transition to Independent Living Allowance (TILA) and Child Safety funds.

Key features of transition from care planning

Transition from care planning is:

- a joint process between a Child Safety Officer (CSO) and a young person
- undertaken within the case planning cycle of assessment, planning, intervention and review
- designed to focus on a specific range of issues, activities and goals dedicated to a young person’s effective transition into adulthood
- an ongoing process that is likely to change over the time of the plan, and before the young person leaves care
• not completed in isolation and requires the collaboration of the young person, their carer, Child Safety staff, and other support people or community services chosen by the young person.

Exploring options together

Working with a young person to plan for their future can be challenging, but it can also be an opportunity for creative case work. Consultation with young people who are in, or have recently left care, through the CREATE Foundation, has reported that engagement and communication with Child Safety staff is a key issue. As a result, engagement with young people is a key topic in training forums and discussion papers for Child Safety staff.

The simple message for engagement and transition planning is to take the time to actively listen and to be with a young person. Young people have a past, a present and a future, and as a Child Safety Officer, you have an important role in the life of a young person who needs the chance to explore and develop their dreams for their future.

If your own relationship with the young person is not sufficiently strong enough for them to trust you, find another person the young person trusts to help you with this. Child Safety has a responsibility to facilitate the transition from care for young people, however there may be other people in the young person’s life who are better placed to do the hands-on learning and skill development with them. Explore all of these options together.

It is also important to include the young person’s carer in any discussions about goals and dreams for the future. Carers have a unique relationship with the young people they care for, this relationship is especially important if the young person has been placed with one carer for a significant period of time.

Talk with the young person about their relationship with their carer and discuss with them the role they see their carers having in their transition from care.

Examples of financial support and service options

When exploring support and service options, it is important to consider options that will have a positive and long-term impact on the young person’s future, for example:

• payment for a course of study, apprenticeship or traineeship
• assistance with income support while undertaking secondary educational study if unable to obtain Youth Allowance/Abstudy
• obtaining a drivers licence
• attending camps, forums, conferences or training experiences relevant to young people in the out-of-home care system
• attending courses such as, life skills workshops, cooking or budgeting
• living in semi-supported accommodation
• accessing adult services or supports, funded or provided by Disability Services
• counselling and support services, for example to explore identity issues or mental health concerns
• transport to visit or reconnect with their family
- transport options to enable a young person to attend educational courses, training or employment
- creative musical, artistic or sporting activities that support their personal and cultural development and social networks.

**Education Support and Services - Senior Phase of Learning**

**Education and training for 15 to 17 year olds**

The Department of Education and Training’s requirements in relation to compulsory schooling are based on national and international evidence that young people who complete 12 years of education have greater opportunities for further education and sustainable employment.

Supporting the new compulsory participation phase, young people have more opportunities than ever before to plan for their education and future career, to set goals, and to work towards those goals in a broader range of education settings, including school, TAFE and other training.

**SET Plans and Youth Support Coordinator Initiative**

Year 10 is an important juncture in a young person's life. As young people enter the senior phase of learning they will experience new types of learning and take on more responsibility for their learning. They will also have opportunities to think about future careers, begin to set goals, and undertake planning to realise their ambitions. Senior Education and Training (SET) planning occurs with the young person, school and the young person’s support people.

A young person’s SET Plan maps out a personalised learning path for his or her senior phase of learning. SET Plans help young people establish the necessary path to achieve their career goals, either by working towards a Queensland Certificate of Education, Certificate III or IV vocational qualification, and/or a viable employment option.

**The Youth Support coordinator Initiative** is an early intervention and prevention program aimed at preventing premature withdrawal from formal education and training. The initiative establishes collaborative relationships between schools, TAFEs and community services, to enable better responses to the needs of young people experiencing personal and family difficulties.

Youth support coordinators work directly with individual young people and their carers as well as within schools and TAFEs, and with the wider community. The availability of a youth support coordinator can be determined by contacting the young person’s school.

Further information about SET Plans and youth support coordinators can be found on the website for the Department for Education and Training.

**Referrals to Housing and Homelessness Services**

Establishing long-term accommodation is a critical area of need for young people. With approximately one-third of young people leaving care nationally becoming homeless in the first 12 months, it is important to explore the concept of a home early in the transition planning. A home can mean many...
different things to each young person and all options of private and public housing, share accommodation, remaining in a placement and living with family or friends need to be considered.

If the best outcome for a young person is access to social housing, it is imperative that Housing and Homelessness Services is included from the beginning of the transition from care planning process, rather than at the end. The CSO is required to facilitate and support young people to begin the process of applying for public housing from age 15.

**Referrals to Disability Services**

The 'Memorandum of Understanding between Disability Services and Child Safety Services 2007 – 2010, Schedule 2' (Schedule 2) defines the roles and responsibilities for service provision to young people with a disability leaving care. Outlined is the process through which young people with disabilities will receive support to plan their transition from the care of the State to adult supports and services funded or provided by Disability Services.

In accordance with Schedule 2, young people with a disability must meet all of the following requirements:

- be likely to require an adult support or service, funded or provided by Disability Services
- on the date of their eighteenth birthday have been subject to a child protection order granting custody or guardianship to the chief executive for a period of longer than two years
- have been primarily supported by Child Safety in out-of-home care placements.

Child Safety is required to refer young people with a disability, who meet the above criteria, to Disability Services at age 15. Child Safety will work closely with Disability Services to develop and implement the transition from care plan with the young person as part of ongoing case work.

Disability Services’ Young Adults Exiting the Care of the State (YACS) Program provides individualised support for young adults with a disability exiting the care of the state, helping them to access community life and develop and maintain community living arrangements.

Supports Facilitators administer the YACS Program and support is generally provided on an ongoing basis. Some young people may receive a combination of ongoing and one-off support, while others may only require time-limited support to help them transition to adult independent community life.

This might include support to:

- live at home and manage the household
- participation in recreation and leisure activities
- strengthen personal and family relationships and networks.

Core activities that Disability Services’ Support Facilitators will provide assistance with, to support a successful transition from care for a young person with a disability aged from 16 years, include:

- completing applications for supports and services funded under the *Disability Services Act 2006 (Qld)*, including the Young Adults Exiting the Care of the State (YACS) Program
- accessing a range of information regarding available adult disability supports and services
• supporting the young person to trial new living arrangements and, where possible, transition into these arrangements prior to turning 18 so as to reduce the amount of change the young person experiences at 18
• working with the young person to identify the level of supports required and appropriate local support providers for adult disability supports and community services.

Transition Officers (Evolve) within Disability Services' Transition and Post Care Support Program will work with young people with a disability in care to provide transition from care planning, support the development of independent living skills and linking with appropriate disability and community supports and services. The Transition Officers (Evolve) will also work with young people aged 18 and over who have left care to provide ongoing assistance with planning, skill development and linking with appropriate services until a stable and safe placement is achieved.

The Transition Officers (Evolve) will facilitate a key stakeholder process to include all relevant people involved in the young person’s life, in the transition from care planning. It is important that young people with a disability are actively involved in the planning processes and are able to consider options for adult living, such as living on their own, continuing to live with their foster family or sharing with other people. A key aspect of the Transition Officer’s (Evolve) role is to support the young person to make their own decisions, which may include providing support to young people with complex communication needs.

If the young person is considered ineligible to receive transition support from Disability Services, the Transition Officer (Evolve) will provide information about other avenues through which the young person may seek assistance to plan their transition to adult life. Disability Services will provide this advice in writing, to inform the case plan review. In circumstances where Disability Services are not providing transition support to a young person, it is Child Safety’s responsibility to work with the young person to address their transition needs.

There are a number of core activities that the Transition Officers (Evolve) will provide assistance with to support a successful transition from care for young people with a disability aged 15 to 17 years:
• completion of an eligibility determination for adult Disability Services
• access to a range of information regarding available adult disability supports and services
• engagement in the key stakeholder process, including regular stakeholder meetings
• work with the young person to identify goals and skill development needs
• link with Disability Services’ Supports Facilitators to identify appropriate local support providers for adult disability supports and community services
• support applications for Centrelink, Housing, vocational and educational programs, adult disability support funding from Disability Services
• work directly with the young person, where indicated, to develop independent living skills to support a successful transition into adult life
• support applications to Guardianship and Administration Tribunal (GAAT), specialist health care and disability services, including Specialist Response Service or Intensive Behaviour Support Teams, where indicated
• support young people to trial new living arrangements and where possible transition into these arrangements prior to turning 18, to reduce the amount of change young people in care experience when turning 18.

**Conclusion**

A successful transition process is one where young people are working closely with the adult supports in their life. To facilitate such a working relationship young people need:

• regular face-to-face discussions with their CSO or an appropriate advocate
• in a manner that they didn’t feel pressured, but supported
• a good physical and emotional environment for planning
• access to adequate information about the process.