



Young people in out-of-home care in rural and regional Victoria: A discussion paper

A Youth Affairs Council of Victoria and
Victorian Rural Youth Services initiative

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The Youth Affairs Council of Victoria

The Youth Affairs Council of Victoria (YACVic) is a vibrant, member based organisation that represents and advocates for young people and the organisations that work with them. YACVic has worked for and with young Victorians and the services that support them for over 50 years.

Our vision is for a Victorian community in which all young people are valued as active participants, have their rights recognised and are treated fairly and with respect.

The Victorian Rural Youth Services

The Victorian Rural Youth Services (VRYS) initiative sets out to advance research, training and policy development to support the rural youth sector. It aims to promote the strengths of young people in rural communities, and address the disadvantages these young people can face. The initiative is supported by the VRYS network, a network of services concerned with young people's wellbeing in rural Victoria, and it operates through the Youth Affairs Council of Victoria.

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Background

One of the most vulnerable groups of young people in Victoria are those living in out-of-home care. New approaches to supporting these young people are being developed by the Victorian Government through their strategy *Victoria's Vulnerable Children: Our Shared Responsibility*. Additionally, improving outcomes for young people in out-of-home care aligns with several of the focus areas of the 2012 Youth Statement *Engage, Involve, Create*. Here, the Victorian Government identified as two of its priorities "Services that meet the needs of young people" and "Getting young people involved". Under these headings, approaches included:

- Helping vulnerable young people and their families to access education, training and community participation programs and funding
- Recognising young people's diversity and addressing the barriers to participation in their communities that some experience
- Improve coordination across the service sector to produce better outcomes for vulnerable young people through services which:
 - focus on young people in a holistic way (not treating their issues in isolation)
 - provide a high standard of professional service delivery
 - empower young people to direct and participate in the support they receive and the services they access

Services should operate as part of an integrated system which supports young people within the context of their personal, family and community circumstances and future aspirations. Services should also be accessible and locally relevant.¹

Approaches to improving outcomes for young people in care have also been developed through Victoria's Youth Partnerships pilots, which are reaching completion.

This paper argues for the particular importance of addressing issues faced by young people in out-of-home care in rural and regional communities. It outlines some approaches for enhancing outcomes for this especially vulnerable group.

Out-of-home care

Out-of-home care refers to alternative accommodation for children and young people who are unable to live with their parents. These arrangements include:

- Home-based care, where the child is placed in the home of a carer who is reimbursed for expenses in looking after the child. This includes kinship care where the child is cared for by relatives or people with a pre-existing relationship with the child, as well as foster and community care.
- Family group homes, where a limited number of children are placed in a residential building to be cared for by resident substitute parents.
- Residential care, where children are placed in a residential building with paid staff.
- Independent living – private boarding arrangements.

Most children in out-of-home care are on Care and Protection Orders, and are placed in care because they are the subject of a protection substantiation and need to be in a safer environment. Alternatively, they may be placed there because their parents are unable to provide adequate care, or because family conflict makes alternative accommodation necessary. Most of these children will eventually return to live with their families. During the period of their removal, placement within their wider family or community is the preferred strategy. Respite care arrangements are also used, to provide short-term accommodation for children whose parents are ill or unable to care for them in the short term.²

Vulnerabilities in the protection system

In their 2013 “Report Card” of Australia’s care system, the CREATE Foundation surveyed 1069 young Australians aged 8-17 who were living in care. Some of their responses were positive and encouraging. For example:

- Over 80% of respondents said they were happy in their current placement;
- 80% rated their health as quite good; and –

- 93% said they could identify a person with whom they would feel comfortable talking about issues that might arise for them.³

However, other findings were concerning. Across many indicators, Victoria scored comparatively well, but there was clearly room for improvement. For example, of the young Victorians surveyed:

- Around 60% reported that they had experienced just one or two placements in care (implying a large minority had been in more numerous placements);
- Around half said they'd had a say in deciding where they were currently living;
- Only about 40% reported having a strong, supportive connection with just one or two caseworkers, although –
- Around 70% reported they could see their caseworker as often as required.⁴

A key issue raised throughout the report was the need for young people to be informed and empowered to understand their circumstances and make decisions about their lives. Here, much work remains to be done. The national results showed:

- Less than a third of respondents knew anything about the official care plan developed for them;
- Of those who did know, only a third said they'd been involved in the plan's preparation;
- Of the older age group, only a third knew of any "leaving care" or transition plan being prepared for them;
- Of those who knew about their "leaving care" plan, half reported being involved in its preparation;
- Around half the respondents had a reasonable understanding of why they had been taken into care;
- Almost a quarter said they did not know much about their family history; and –
- Around two-thirds felt they were able to have a say about the issues that affected them in out-of-home care.⁵

Due to abuse, neglect or poverty prior to entering the protection system, and disruptive, distressing or disempowering experiences within the system, children and young people in out-of-home care can be highly vulnerable. *The State of Victoria's Children Report 2008* found that they were more likely than the general young population to be at risk of behavioural or mental health problems. Similarly, a study by the Australian Institute of Family Studies in 2008 found that in a sample of 614 Victorian children in out-of-home care, approximately a quarter reported that they had no contact with their birth families, and while 73% reported having a special friend, only 22% said they frequently saw their friends outside of school.⁶

Young people in out-of-home care are also disproportionately likely to show poor academic results. Their rates of absenteeism are higher than that of the general student population; their enrolment in school starts to drop from the age of 13, reaching a low of 57.3% by the age of 17; and their results in English and mathematics are lower than that of the general student population. Research undertaken in 2010 for Anglicare Victoria and Wesley Mission Victoria found that children and young people in out-of-home care were more likely than the general population to have repeated a grade at school, to have changed schools, and to have wagged school or been suspended from school. These poor educational outcomes could be influenced by:

- disruption to a young person's school attendance by court appearances, placement changes or family visitations;
- lack of coordination between the stakeholders responsible for the young person's care; or –
- lack of participation in school-based opportunities and extracurricular activities, due to cost barriers or need for parental consent.

This is in addition to the trauma and deprivation that may precede the young person going into care. In the current labour market, the impact of early school leaving on a young person's future wellbeing can be severe.⁷

Key figures

Victoria has the lowest rates of children in out-of-home care in Australia, but involvement in the system is growing. (This mirrors a national pattern.) Over the past decade, the number of children in out-of-home care has increased by 46%.⁸ The *State of Victoria's Children 2008* report attributed this rise to the longer periods of time children are spending in care, rather than a growth in the intake rate.⁹ The majority of children in out-of-home care are in home-based arrangements, such as kinship care or foster care.

While interventions tend to focus on young children, there are substantial numbers of older children and young people in out-of-home care. As of 30 June 2012:

- 6207 Victorian children and young people were in out-of-home care.
- 3526 Victorian children and young people were admitted to out-of-home care during 2011-12.
- Children aged 10-14 years comprised 25% of admissions to out-of-home care in Victoria. Young people aged 15-17 comprised 13.4%.
- Children aged 10-14 years comprised 28.9% of those on care and protection orders in Victoria. Young people aged 15-17 comprised 20.3%.
- 26.1% of Victorian children and young people in out-of-home care had been there between 2-5 years. 32% had been there for five years or more.
- Of those children who exited out-of-home care in Victoria, 21.9% were aged 10-14, and 27.4% were aged 15-17.¹⁰

Involvement in the protection system can become ongoing. In 2009-10, the majority (70%) of children and young people who were the subject of a child protection report that year had either been the subject of an earlier report, or were subsequently re-reported in 2010-11. 2000 of these children had been the subject of more than 10 reports to date. Around half of all children for whom substantiated abuse was found in 2009-10 had been the victims of earlier substantiated abuse.¹¹

Rural and regional disparities

Children and young people living in rural and regional Victoria are over-represented in the child protection system. As of 30 June 2011, 47% of Victorian children aged under 18 in out-of-home care were from rural areas. (Rural children comprise about 30% of Victoria's child population in general.) The rate of children in out-of-home care in rural areas was more than double that in metropolitan areas (7.6 per 1000 children, compared to 3.3 per 1000 children). Children in out-of-home care in rural and regional Victoria were also less likely than their metro peers to be placed with a relative (generally considered the preferred approach).¹²

The 2012 report of the Protecting Victoria's Vulnerable Children Inquiry observed considerable regional disparities, noting that while the three metropolitan DHS regions received the highest *number* of child protection reports (reflecting their larger populations), on a per capita basis reports were more prevalent in rural / regional Victoria.¹³

Regional variation

Child protection reports occur at particularly high rates in the east and the north-west. According to the 2012 inquiry's report, while the rate of child protection reports each year is approximately 30 per 1000 Victorian children, in Gippsland and Loddon Mallee the rate is more than double: 66 per 1000 and 61 per 1000 respectively. All the rural regions, with the exception of Barwon South West, receive more reports per capita than the metropolitan regions.¹⁴

Substantiations of child protection reports were highest in Loddon Mallee (8.3 per 1000 population), followed by Hume (6.8) and Gippsland (6.4). A child in the Loddon Mallee region was three times as likely to be the subject of a substantiation than a child in the Eastern Metropolitan region.¹⁵

As of 30 June 2011, the highest rates of children actually living in out-of-home care were in Gippsland (9.7 per 1000 population), the Grampians (8.9 per 1000 population) and Loddon Mallee (7.4 per 1000 population). This was more than three times the proportionate rate for the Eastern Metro and Southern Metro regions.¹⁶

Aboriginal children and young people

The overrepresentation of Aboriginal children and young people in the protection system has long been a significant concern. Aboriginal children are 10 times more likely to be the subject of a substantiation of abuse or neglect compared to non-Aboriginal children.¹⁷

Here, the differences between rural / regional and metro areas seem to be less clear-cut. The highest rate of child protection reports for Aboriginal children per 1000 population is in the Loddon Mallee, followed by Northern and Western Metro, then Gippsland.¹⁸ In some respects, rural and regional areas may do better than average; the latest *State of Victoria's Children Report* noted that Aboriginal children in out-of-home care in rural and regional Victoria were more likely to be placed in accordance to the Aboriginal Child Placement Principle (ACPP) than those in metro Victoria.¹⁹ The ACPP aims to preserve and enhance Aboriginal children's identity through strong connections to family, community and culture. Between 2008-11, the percentage of children placed according to this principle has declined, but it remains higher in rural than metro areas, and the decline in rural areas has been less marked.²⁰

Rural disadvantage and service shortages

Involvement in the child protection system is shaped by socio-economic disadvantage. The recent *State of Victoria's Children Report* observed that protection reports occur at high rates in areas where high proportions of children are classified as vulnerable and living in socio-economic disadvantage.²¹ In their submissions to the Protecting Victoria's Vulnerable Children Inquiry, services from Mildura, for instance, highlighted the disproportionately high rates of young motherhood, alcoholism, financial disadvantage and family violence in their region.²²

At the same time, rural and regional areas tend to have less access to services that assist vulnerable families. *The State of Victoria's Children Report* identified types of services less accessible to rural communities, including child protection workers, children's court and clinical court services, out-of-home care, family services, placement and support services.²³ Such shortages were also identified in the report of the Protecting Victoria's

Vulnerable Children Inquiry, which highlighted the inadequate supply of clinical assessment services for rural families, and the fact that most Family Division cases take place in Melbourne, obliging families to undertake stressful and costly travel.²⁴ Similarly, a 2011 research report from the Centre for Rural Regional Law and Justice (Deakin University) noted that residents of rural communities were often unable to access the same standard of legal services available in Melbourne, including specialist Children's Court facilities and magistrates with expertise in children, young people and the law.²⁵ Workers from the sector have commented that in their experience, a shortage of local early intervention and support services makes it more likely that children will be taken into care.

Many of the submissions to the Protecting Victoria's Vulnerable Children inquiry raised concerns about rural service delivery. These included:

- Limited infrastructure and the need for strong collaboration with other services
- Difficulties attracting appropriate staff and providing them with career paths
- The impact of long travel times on practitioners' home and court visits and their ability to access training
- After-hours work becoming difficult and even dangerous in areas without a dedicated after-hours service
- Difficulties developing close relationships with children and families where there are limited staff available
- Shortages of appropriate child placements in the local area, with some children being re-settled long distances from their original home
 - Note: in conversations with rural / regional service providers, this was reiterated as a significant, ongoing concern, especially for children and young people from smaller rural communities. Some may find themselves being moved very large distances – eg, from Kyabram to Mildura – according to where placements can be found, disrupting their education and connections to friends, family and community. Workers have commented that placements in general are becoming harder to secure. This is due in part to children and young people presenting with increasingly high needs and complex issues. However, for farming communities the problem is also one

of resources: the financial strains of the past decade have forced many people to seek additional work off the farm, and they have less time, resources or energy to commit to being foster parents.

- Costs and logistics of transport making it difficult for clients from smaller communities to access support, especially when they need multiple services in different locations. Transport problems also affect foster carers when the children and young people need to travel, for example for medical treatment or disability support.

Several services argued that their funding was based on targets which did not take into account the geographical areas covered and the shortage of other local services.

Submissions from Gippsland, the Wimmera and the Upper Murray raised concerns about support for children and young people being “swallowed” into regional centres, leaving people in remote or isolated communities without local assistance.²⁶

Other key concerns raised in conversations with rural service providers include:

- The need for more alternative education or flexible learning models which specifically support young people in out-of-home care, in rural / regional areas
- The need for services to be better structured and equipped to support young people leaving care
- The need for stronger linkages between young people in out-of-home care, their families, and other support services such as community health.

They welcomed a number of the Youth Partnerships initiatives, including supporting staff in some schools to build expertise around supporting students in out-of-home care, and addressing students’ disengagement from school from the age of 10, before the critical transition to secondary school.

On a more individual level, rural practitioners can face difficulties when working in smaller communities. Some workers are relative newcomers to the communities where they work, and many find themselves encountering colleagues and clients in other social and professional settings. For some, this raises problems and sensitivities around mandatory

reporting, confidentiality and law enforcement, and may impact upon the practitioner's professional and personal life.²⁷

Leaving care

Each year approximately 400 Victorian young people turn 18 and must transition out of out-of-home care.²⁸ Young people leaving out-of-home care have been widely recognised as very vulnerable, prone to high risks of hardship in relation to their health, personal lives, education, housing and job prospects. The poor outcomes some of them suffer are linked to the ongoing effects of abuse and neglect, loss and grief, caring for other family members, and exposure to poverty and deprivation – as well as shortages of appropriate housing and employment. In some cases, these problems are exacerbated by multiple placements within the care system and barriers to accessing support services.²⁹ In his research into the experiences of young people leaving care, Philip Mendes comments:

“care leavers tend to be socially excluded from participation in mainstream social, economic, political, and cultural systems. In particular, they lack access to informal social networks such as extended family, family friends, school-based supports, youth friendship groups, and local sporting, cultural and religious groups.”³⁰

A 2005 study of care leavers in Victoria found that 43% of these young people reported never receiving help from family members in their first two years after leaving care, while 12% received help from their families on an infrequent basis.³¹

Organisations including the CREATE Foundation, the Victorian Council of Social Service and YACVic have expressed concern that there is not enough support for young care-leavers and that not all young care leavers are accessing the supports that are available. While the Department of Human Services operates programs such as the Post Care Support, Referral and Information Service, too many young people appear to miss out, with many exiting care without a proper Leaving Care Plan. Services have commented that 18 is too young for many people to achieve the level of independence required – noting that young people who are *not* in the protection system typically stay at home for longer than this, and access considerable parental support after leaving. The CREATE

Foundation has called for young people's leaving plans to start being developed by at least the age of 15, and for support to continue to be available until the young person turns 25.³²

Leaving care in a rural community

In his work on rural care-leavers, Philip Mendes notes that the (limited) research from Australia and the UK suggests these care-leavers experience particular risks. These include:

- Transport disadvantage – with little public transport available in rural areas, getting a license is very important, but often hard for care-leavers, who may lack the funds and support to secure lessons, practice and a car;
- Difficulties in accessing affordable housing and support to maintain tenancies and live independently;
- Limited options for employment and education;
- Loss of friends to the cities;
- Isolation for young people living in remote farming districts; and –
- Stigma associated with having lived in care (and in some cases having been involved in crime), which can be more acute in small communities.

Services in Bendigo and the Loddon Campaspe region have echoed many of these concerns.³³

Similarly, research undertaken in the UK in 2003 into the experiences of rural young people leaving care found that living in sparsely populated areas meant they faced barriers including disrupted schooling, difficulties sustaining connections to friends and support networks, and reliance on others for transport. Transport posed a particular problem for young care leavers who had become parents themselves.³⁴

However, the news is not all bad. One 2005 study from the Centre for Excellence in Child and Family Welfare found that rural care leavers were more likely than metro ones to be involved in positive ways in their communities.³⁵ Similarly, the young care-leavers interviewed as part of Mendes' Bendigo study expressed mixed views about their region,

voicing concern about limited services, transport and job opportunities, but also commenting that Bendigo services seemed more accessible and caring than those in Melbourne.³⁶

Protecting Victoria's Vulnerable Children

The report of the Protecting Victoria's Vulnerable Children Inquiry was tabled in February 2012. It provides a comprehensive overview of the challenges facing vulnerable children, young people and families in Victoria and the reforms needed to support them more effectively. The report found that the service system was struggling to deal with the increasingly complex needs of vulnerable groups, and was hindered by shortages of resources and skills, insufficient services in key geographical areas, lack of coordination and integration between some services, and limited capacity or willingness of some community sector organisations to adopt new approaches. Although a wide range of early intervention programs exist, the report found that these programs were not always well evaluated or well connected. Among 90 recommended reforms, the report highlighted the need for more integrated and multidisciplinary services and a whole-of-government strategy for supporting vulnerable children. The report noted the Youth Partnerships pilots currently operating in some Victorian districts as an encouraging starting point for addressing service coordination and efficiency, and expressed hope that the lessons from these trial sites could be implemented state-wide.³⁷

One of the striking aspects of the inquiry's report was the degree of rural / regional disadvantage identified. The report also noted that service delivery occurred differently in regional areas, due to smaller numbers of services. For example, the percentage of regional funding for family services concentrated in the top four organisations in the region sat at 90% in Hume, 88% in the Grampians, and 80% in Barwon South West – a rate considerably higher than in the North and Western Metropolitan and Southern Metropolitan regions.³⁸

Recommendations of the report which had particular relevance to rural and regional communities included:

- Recommendation 34: Expanding family preservation and restoration programs so they are available to Aboriginal families in rural and regional areas with significant Aboriginal populations,³⁹ and –
- Recommendation 77: Funding for child protection and family services should be distributed in accordance with an area-based approach and according to a common methodology. The Department of Human Services should develop this methodology so that funding is distributed on an equitable basis to the areas that need it most. The methodology should take into account:
 - The population of children in a region;
 - The level of vulnerability of these children, including the Aboriginal population; and
 - Factors that increase the cost of service delivery in regions, such as remoteness and the geographic size of the area.
 The method should be able to be regularly updated and should be incorporated into future system planning.⁴⁰

The Victorian Government's response

In response to the inquiry's report, the Victorian Government committed to a whole-of-government Vulnerable Children's Strategy, to be developed by a Ministerial Cabinet Committee, reporting to the Premier. Government performance against this strategy would be monitored by the new Children and Young People's Commission. The Government also developed a reform agenda, outlined in the 2012 publication *Victoria's Vulnerable Children: Our Shared Responsibility. Our Shared Responsibility* recognises that responsibility for improving outcomes for vulnerable children, young people and families is shared across government, and commits to deliver reforms from the Premier, Deputy Premier, Minister for Community Services and Mental Health, Minister for Children and Early Childhood, Minister for Housing, Minister for Education, Minister for Higher Education and Skills and the Attorney General.⁴¹

The strategic goals outlined in *Our Shared Responsibility* are:

- 1: Prevent abuse and neglect

2: Act earlier when children are vulnerable

3: Improve outcomes for children in statutory care

Achieving this will require a shared understanding of the nature and scope of vulnerability, a shared responsibility (including joining up government and community work), a performance and accountability framework with clear goals, measurable outcomes and monitoring and reporting at state and local levels, and a collaborative governance structure.⁴²

Key approaches outlined in *Our Shared Responsibility* include:

- A long term goal to reduce the growth in the number of children in care, so that it does not exceed Victoria's overall population growth. The Government has undertaken to develop a five year plan concerning out-of-home care, with a complementary plan for Aboriginal children.⁴³
- Government will draw together a package of services to support children and young people in out-of-home care, to simplify and reduce barriers to accessing support.⁴⁴ Every young person entering residential out-of-home care will receive a comprehensive individual assessment of their health needs and educational needs, followed by targeted support and monitoring of their educational outcomes, and a learning mentor.⁴⁵
- Services will be delivered where children and young people live, guided by trends in population growth and service use. *Our Shared Responsibility* comments: "Our current spread of services and service infrastructure is based on historic patterns of population growth and demand. These patterns no longer reflect current need or what we can reasonably predict ... We have reliable information and data that clearly shows that vulnerable children and families live in known geographical areas of high disadvantage, [or] share certain demographic characteristics."⁴⁶
- There is an emphasis on building effective, coordinated services and increasing connections and accountability across program and organisational boundaries. *Our*

Shared Responsibility asserts that the community sector has too many layers of funding, reporting and bureaucracy, and can be “siloed”. It flags the possibility of new partnerships across sectors and services, and new forms of governance.⁴⁷ The Government is also examining the feasibility of a single support plan for children and families who are known to child protection, so that all the departments and services involved are connected to each other, have shared goals, and are clear about their roles and responsibilities.⁴⁸ There is an aim here to minimise stress on clients, ensuring that they will only have to tell their story once, to one key worker.⁴⁹

- Adult and family services (such as those focused on drug use and mental health) will be expected to consider the needs of children and young people within the family and integrate these better into their service delivery.⁵⁰
- Local networks will support providers and government around child protection, building on existing place-based approaches to problem solving, leadership and performance improvement.⁵¹
- Universal health and education services will be encouraged to be more inclusive and responsive to the needs of vulnerable families, who can face difficulties dealing with doctors, teachers, childcare workers and specialists.⁵² Approaches will include PD for teachers to work with challenging behaviours in the classroom, and funding school re-engagement programs.⁵³

Specific initiatives already adopted include:

- Establishing a Commission for Children and Young People, to promote children and young people’s safety and wellbeing and monitor out-of-home care services. The Commission has capacity to examine the implementation and effectiveness of Government strategies and reforms, and to initiate its own enquiries into the wellbeing of individual children and / or persistent and recurring systemic issues. A Commissioner for Aboriginal children and young people was also announced.⁵⁴

- Piloting the “Services Connect” approach to case management in Geelong and Dandenong. This integrated approach involves working with clients with complex needs through a single, coordinated case plan and key worker.⁵⁵
- Extending the educational needs assessment model to 603 Victorian children in residential out-of-home care (figures as of May 2013), and piloting the health assessment model in Melbourne’s north-west, later to be rolled out across Victoria. Learning mentors are being trained in all DEECD regions.⁵⁶
- Establishing new Multi-Disciplinary Centres “in areas of high need” (Bendigo, Latrobe Valley and Metropolitan Melbourne, with existing MDCs operating in Mildura, Geelong and Frankston) to provide services for child victims of sexual violence. By co-locating police investigators, child protection practitioners and sexual assault counsellors in a single location, these centres aim for a holistic approach that minimises further trauma. (Some services area already commenting on the benefits of joint training and development of joint protocols through these centres.)⁵⁷
- Establishing a new Children’s Court in Broadmeadows, to relieve the strain on families currently accessing the Melbourne court.⁵⁸
- Providing specialist outreach and intensive one-on-one support through the Springboard Program to help young care leavers up to the age of 21 access education, training and jobs. As of May 2013, the Springboard Program had assisted 216 young people.⁵⁹
- Making “zero-fee” training places available to young Victorians living in out-of- home care, and to those under 21 who have recently left out-of-home care.⁶⁰

Where to from here?

Many of these reforms were welcomed by the sector. Victoria's peak body for community child and family services, the Centre for Excellence in Child and Family Welfare, highlighted the importance of government commitments including the whole-of-government approach, the five-year plan for out-of-home care, the increase in therapeutic residential care places, the delivery of family-friendly drug and alcohol services, the Children's Court at Broadmeadows, and the extension of key early intervention services and specialist responses to child sexual abuse. At the same time, they queried how government would handle the investment and structures needed to support these changes, while continuing to work closely with the sector.⁶¹

Meanwhile, there are several areas where YACVic and the VRYS urge further action. These include:

- Ensuring that measures to support Victoria's vulnerable children and young people make explicit reference to young people in their titles, strategies and performance indicators, taking into account the interconnectedness between childhood, adolescence, and early adulthood, and the developmental differences of children and young people.⁶²
 - It is a source of concern that young people and children in the "middle years" (8-12) tend to get lost a little in policy discussions around child protection. While the frequent focus on young children is understandable, due to their higher vulnerability and larger intake into the protection system, the needs of older children and adolescent young people should not be overlooked. As noted earlier, these young people comprise a significant portion of the population in out-of-home care, and the experience of leaving care has particular ramifications for the over-17s. Concerns about the need for more attention to young people and the "middle years" were raised in several of the rural submissions to the Protecting Victoria's Vulnerable Children Inquiry.⁶³

- Making the Springboard program and the “zero-fee” training places available to young people aged up to 25, and providing additional “leaving care” supports to vulnerable young people in this age bracket.⁶⁴
- Making parenting information and support available to families with children aged up to 17 years (as is the case for parents with younger children), to build their capacity to support their adolescent children to have positive experiences and build a wide range of life skills.⁶⁵
- Committing to make culturally competent services available to support vulnerable Aboriginal children and young people, and ensuring that all Government and community organisations are committed to achieving a minimum level of cultural competence and clear guidelines about cultural abuse investigations.⁶⁶
- Supporting young people to understand the care processes they are going through and to have a meaningful voice in these processes, in ways that are supported, safe and age-appropriate. Such an approach requires strong structural support – the CREATE Foundation, for instance, has identified that many of the current breakdowns in communication between young people and services are linked to staff turnover and contracting arrangements.⁶⁷ (Wider, more systemic models of youth engagement are being developed by some organisations such as CREATE, working with local agencies in Gippsland and Barwon, and St Luke’s Anglicare in Bendigo, who host advisory groups of young people who have lived in care, to discuss key issues and service provision.)
- Ensuring that young people living in (and exiting) out-of-home care are provided with strong information about vocational and training opportunities, enough “taster” courses to help them make informed choices, and support to help them stay engaged. Concerns have been expressed that this vulnerable group of young people can struggle to complete qualifications, due to problems such as transient housing and turbulent home lives. In particular, the “two course” rule, which limits the number of Foundation Skills courses a student can undertake, can prove problematic for students who may have little idea which career paths appeal to

them and a high likelihood of dropping out due to external problems. (The loss of base funding to TAFEs to deliver equity programs may heighten this difficulty.) More diverse and supported vocational opportunities would be valuable.⁶⁸

- Ensuring that young people in out-of-home care are made aware of the opportunities available through organisations like the CREATE Foundation, such as clubCREATE, which provides “entering care” and “leaving care” kits and chances for young people in care to socialise, have fun, build leadership and advocacy skills, and access support.

Rural and regional concerns

It remains to be seen how the Government’s undertakings will play out in rural and regional Victoria. *Our Shared Responsibility* does not go into details at a geographical level, but some of its undertakings could take different forms outside of Melbourne. For example:

- Improving educational attainment for children in out-of-home care is cited as a priority. Here, it should be noted that absence rates from school, Year 10-12 retention rates, Year 12 completion rates, and secondary students’ reported interest in school subjects and enjoyment of school are all poorer (on average) in rural and regional Victoria than the state average. Measures to assist vulnerable students must pay attention to regional difference.⁶⁹
- When striving to make universal health services more accessible to vulnerable families, it is important to take into account the limited access to health services that some rural communities experience across the board.⁷⁰
- Concentrating services in areas of high and predicted growth could prove very valuable for regional centres, where the birth rate and young population are often higher than the state average and rates of SES disadvantage higher too.⁷¹ However, it is important to develop strategies to ensure that smaller, more isolated communities are not further marginalised by this approach, given that their access

to services is often poor already. Need should not be measured in purely numerical terms, or rural areas will automatically miss out.

- While Children’s Court services at Broadmeadows are a welcome development, this does not resolve access issues for rural communities.
- YACVic has welcomed the State Government’s support for the Youth Partnerships pilots, some of which have a strong focus on supporting regional young people in out-of-home care. It is to be hoped their findings will be incorporated into the Government’s approach to *Our Shared Responsibility*.
 - For example, the Barwon Youth Partnerships, operating in Greater Geelong, Queenscliff and Surf Coast, has supported the Outreach Teacher project. This project employs teachers with specialist skills and experience in supporting the most disengaged and marginalised young people, to work with 15 identified young people in residential care settings who are wholly disengaged from all forms of education. These teachers work closely with residential care and child protection staff to improve the education and wellbeing outcomes for the young people; they also undertake direct teaching work and support young people, where appropriate, into other learning environments.⁷²

Addressing regional disadvantage: recommended approaches

1. Rural and regional children and young people are disproportionately likely to be involved in the protection system and out-of-home care, and face particular risks and barriers within the system and when leaving it. In light of this, policies and practices developed to support Victoria’s vulnerable children and young people should be explicit in addressing regional difference. This would involve commitments to:
 - Consider how policies and practices around child protection might play out differently in different parts of the state;
 - Consult with rural / regional communities and service providers in the reform of the protection system; and –

- ‘Close the gap’ around child protection outcomes between metropolitan and regional Victoria.
- 2. When reporting against the indicators outlined in *Our Shared Responsibility*, it would be valuable if outcomes were disaggregated between metropolitan and non-metropolitan regions, to make clearer the government’s progress in addressing regional disadvantage.
- 3. Under Goal 3 of *Our Shared Responsibility* (“Improve outcomes for children in statutory care”), some additional indicators of child and adolescent wellbeing could be included in the government’s reporting, to address issues such as:
 - Distance of out-of-home care placement from a child or young person’s original community;
 - Distance travelled by children and young people to access court / statutory services; and –
 - Stability of school placements – eg, percentage of young people who have changed schools during their time in the protection system.
- 4. Collate the findings from the Youth Partnerships pilot sites about supporting regional young people in out-of-home care to remain in the education system, and consider how these might be applied to other Victorian communities.
- 5. When analysing trends in population growth and service use to determine where services should be delivered in the future, government should address vulnerability not only in numerical terms but also in proportional terms, and with attention to what other supports are available locally. Rural and regional communities will inevitably show smaller numbers of children and young people involved in the protection system, and yet the *rate* of children’s involvement in the system tends to be more significant outside of Melbourne.
- 6. When planning service delivery, ensure an approach which takes into account the higher unit delivery costs and lower economies of scale in many rural communities. Here, it might be useful to refer to some of the formulae developed in the health system, to identify and address factors such as degrees of remoteness, time / cost /

distance of service delivery, rates of SES disadvantage, percentage of the client group without access to transport, and percentage of the client group who are Indigenous, young parents, or vulnerable on other indicators.⁷³ Communities where several of these factors intersect warrant particular, targeted support. To ensure strong results, it is vital that any such models are understood by rural stakeholders, and that these stakeholders have opportunities for consultation and input.

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