INQUIRY INTO SUSTAINABLE EMPLOYMENT FOR DISADVANTAGED JOBSEEKERS

Anglicare Victoria submission

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1 Introduction

The evidence that people with experience of Out-of-Home Care (OoHC) experience poorer education and employment outcomes than their peers is overwhelming. Care-experienced people are less likely to complete school, are less likely to engage in further education, and are extremely unlikely to attend university.

These poor outcomes in terms of educational attainment make it very difficult for young people who have grown up in care to make a successful transition into employment and achieve financial independence.

The low levels of educational attainment and high rates of unemployment that are evident amongst care leavers suggests that the State, in its statutory role as 'corporate parent', is failing to adequately prepare these young people to meet the challenges they will face when they turn eighteen and the State removes its support. Though some leaving care programs exist transition to independence, this cohort are largely expected to be self-supporting at eighteen, an age when most of their peers are still living with family. Too often, we have failed to equip them with the education and job-readiness that would make this possible.

It is not surprising, therefore that we see are high rates of homelessness, unemployment, ill health (including poor mental health) and high rates of contact with the justice system amongst young people with a care background. This represents a significant cost to the community. Perhaps more importantly, it risks trapping children you have grown up in care in a cycle of disadvantage that will impact on them throughout their lives as well as affecting their families and children.

This submission presents clear evidence, drawing on both local and overseas research, that we need a special focus to address the disadvantage that young people in care experience. It identifies some of the contributing factors, and outlines some of the strategies and programs that are showing strong results in re-engaging young people in work and education, and could readily be scaled up to provide a more effective and comprehensive response.

Anglicare Victoria would be happy to provide the Legislative Assembly Economy and Infrastructure Committee with further information about our work, at your convenience.

Although many of the children and young people we work with have been disadvantaged by their circumstances, and many have been impacted by trauma and violence, they show us their potential, determination and resilience every day. We urge the Committee to consider how we, as a community, can better support them to fulfil that potential.

Paul McDonald
Chief Executive Officer
Anglicare Victoria
ABOUT ANGLICARE VICTORIA

ANGLCARE VICTORIA (AV) WORKS TO TRANSFORM THE FUTURES OF CHILDREN AND YOUNG PEOPLE, FAMILIES AND ADULTS. WE OFFER A COMPREHENSIVE NETWORK OF HIGH QUALITY SERVICES THAT AIM TO SIGNIFICANTLY IMPROVE IN THE LIVES OF THE YOUNG PEOPLE, CHILDREN, AND FAMILIES/CARERS WITH WHOM WE WORK. AS VICTORIA’S LEADING CHILD AND FAMILY WELFARE ORGANISATION, WE ARE SINGLE-MINDED IN OUR MISSION TO CREATE POSITIVE CHANGE FOR THE MOST VULNERABLE AND DISADVANTAGED MEMBERS OF OUR COMMUNITY.

IN ANY GIVEN YEAR WE WILL PROVIDE RESIDENTIAL, FOSTER OR KINSHIP CARE FOR OVER A THOUSAND VICTORIAN CHILDREN, HELP OVER 120 FAMILIES TO STAY TOGETHER THROUGH OUR RAPID RESPONSE AND CRADLE TO KINDER PROGRAMS, AND SUPPORT OVER 3000 PARENTS TO BUILD BETTER PARENTING SKILLS THROUGH OUR EVIDENCE-BASED PARENTZONE PROGRAM. WE EMPOWER FAMILIES TO BUILD BETTER FUTURES THROUGH FINANCIAL COUNSELLING AND IMPROVE EDUCATIONAL OUTCOMES FOR YOUNG PEOPLE IN OUT OF HOME CARE THROUGH THE TEACHAR PROGRAM, WHICH HAS DELIVERED MEASURABLE IMPROVEMENTS IN EDUCATIONAL ENGAGEMENT AND ATTAINMENT AT OVER 165 LOCATIONS ACROSS THE STATE. ANGLICARE VICTORIA IS ALSO A MAJOR PROVIDER OF MEN’S BEHAVIOUR CHANGE AND OTHER FAMILY VIOLENCE SERVICES ACROSS THE STATE.

SUPPORTED BY A DEDICATED TEAM OF 1600 STAFF AND 2000 VOLUNTEERS STATEWIDE, WE ARE COMMITTED TO A TRANSFORMATIONAL AGENDA THAT AIMS TO IMPROVE OUTCOMES FOR OUR CHILDREN, YOUNG PEOPLE, AND FAMILIES BY COMMITTING TO CONTINUOUS IMPROVEMENT, RIGOROUSLY MONITORING OF OUR OWN OUTCOMES AND PERFORMANCE, AND SEEKING NEW AND INNOVATIVE WAYS TO DELIVER CARE. EXAMPLES INCLUDE ESTABLISHING THE FIRST EVER PARENTZONE HUB CO-LOCATED WITH A LOCAL SCHOOL, AND WORKING WITH GOVERNMENT TO DEVELOP ONE OF VICTORIA’S STATE’S FIRST SOCIAL IMPACT BONDS, COMPASS — WHICH AIMS TO IMPROVE OUTCOMES FOR YOUNG PEOPLE LEAVING CARE. BUILDING ON OUR PROVEN TRACK RECORD, WE HAVE GROWN AT ABOUT 20% PER ANNUM OVER THE LAST FIVE YEARS, CONSOLIDATING OUR POSITION AS ONE OF VICTORIA’S LEADING PROVIDERS IN OUR FIELD.

AT ANGLICARE VICTORIA, WE BELIEVE THAT EVERY CHILD AND YOUNG PERSON HAS THE RIGHT TO FULFIL THEIR POTENTIAL AND SHINE. FOR ANY CHILD OR YOUNG PERSON REMOVED FROM THEIR FAMILY HOME, ANGLICARE VICTORIA CARERS AND STAFF PROVIDE HOME-BASED CARE: KEEPING CHILDREN SAFE AND PROTECTED IN A LOVING ENVIRONMENT, WORKING EVERY DAY TO MEET THEIR IMMEDIATE NEEDS, AND PROVIDING LONG TERM SUPPORT AND CARE AS THEY GROW. WE ALSO DELIVER A SUITE OF PROGRAMS WITH A STRONG EMPHASIS ON BUILDING SKILLS AND PROVIDING OPPORTUNITY TO HELP YOUNG PEOPLE OVERCOME BARRIERS AND ACHIEVE, INCLUDING A RANGE OF EXPERT SUPPORTS TO HELP FAMILIES STAY TOGETHER; BUILDING SAFE AND HAPPY HOME ENVIRONMENTS.
2 Education and Employment outcomes for people in Out-of-Home Care

2.1 Educational participation and attainment

The available data show a compelling and consistent view of poor educational outcomes for children in care.

This is consistent with findings from other jurisdictions that has identified under-representation of care leavers in education in UK, USA (Courtney, et al., 2005), Denmark, Sweden Hungary and Spain (Harvey, McNamara, & Andrewartha, 2016).

In Victoria, the 2019 report *Beyond 18: The Longitudinal Study on Leaving Care* (Purtell, Muir, & Carroll, 2019) which looks at outcomes for Victorian care leavers has found that a high proportion of young people in OoHC “are not meeting the Victorian government’s minimum school-leaving age of 17 or the mandatory requirement that all students complete Year 10” (Purtell, Muir, & Carroll, 2019, p. 20). The report found that

- only 25% of those in the study who had left school had completed Year 12
- 29% of those in the study who had left school had not completed Year 10.

Encouragingly, the report outlines that more than half of those participating (54%) had re-engaged with further study, with five attending university 36% undertaking a Certificate III or IV at a TAFE, and 15% indicating they had completed Year 11 or 12 after leaving school (Purtell, Muir, & Carroll, 2019, p. 20), highlighting the importance for good pathways back into education for those who have disengaged earlier in life.

Cashmore et al’s review of outcomes for NSW care leavers 4-5 years after leaving care (Cashmore, Paxman, & Townsend, 2007) has shown comparable poor results, with

- 35% having left care without year 12,
- one in five without completing Year 10, and
- a quarter holding no recognised qualifications 4-5 years after leaving care.

**Out-of-Home Care**

In Victoria in 2017-18 there were 7,954 children in Out-of-Home care.

Out-of-Home care includes residential care, foster care and kinship care.

Nationally, of the approximately 45,800 children in out-of-home care at 30 June 2018, most (82%) had been continuously in out-of-home care for 1 year or more. This included:

- 30% who had been in out-of-home care for 2–5 years
- 40% who had been in out-of-home care for 5 years or more (Figure 5.6).

About 18% of children had been in out-of-home care for less than 1 year. (Australian Institute of Health and Welfare, 2019).
The group in this study were also much less likely than their peers to have completed Year 12 (42% of care leavers compared to 80% of young people in their age group) (Cashmore, Paxman, & Townsend, 2007, p. 53).

While Cashman et. al note that many had subsequently completed at least one course of were engaged in further study, they note that “those courses were quite short or limited in scope” and often completed “to meet federal government income support requirements” (Cashmore, Paxman, & Townsend, 2007, p. 53). This raises some questions as to whether this participation is or is likely to translate into positive outcomes for the participant either in terms of learning or employment.

2.2 Employment outcomes
In an environment of high youth unemployment\(^1\), lack of education presents a significant barrier to workforce participation. The poor educational outcomes experienced by young people who have experienced OoHC therefore flows through to poorer employment outcomes. Again, this finding is consistent across many jurisdictions within Australia and overseas.

The Cashman study establishes a strong correlation between educational attainment and employment outcomes for young people with a care background. They found that “those who had completed Year 12 were more likely the be working or studying 4-5 years after leaving care, and in the intervening period, that those who had not (88% compared to 29%)” (Cashmore, Paxman, & Townsend, 2007, p. 56).

While noting that many of the study group in the Beyond 18 study are still in school or further education (reducing sample size), the report also paints a grim picture of employment outcomes, with only 37% of the study group receiving any income from wages or salary. Of those who were receiving income from employment, only 21% worked full time and 61% worked less than 20 hours a week (Purtell, Muir, & Carroll, 2019, p. 20).

This is particularly concerning as it traps young care leavers in a cycle of poverty, exacerbated by the lower entitlements they receive from Youth Allowance compared to Newstart, and the fact that many receive ‘junior’ pay rates. This represents a significant hardship for young people leaving care, many of whom are living independently have no access to the kind of financial support that family often provides to supplement these lower entitlements.

2.3 Economic impact.
As outlined by the Mitchell Institute in its 2017 paper (Mitchell Institute, 2017), our failure to support young people in out-of-home care to fulfil their potential carries with it significant opportunity costs.

\(^1\) According to the ABS, in 2017 young unemployment nationally was 13%, more than double the overall unemployment rate.
Importantly, the report finds that “Year 12 achievement is largely locked in by age 25 – if you do not achieve an equivalent qualification by then, you are unlikely ever to” (Mitchell Institute, 2017, p. 2).

Their research indicated that those who disengage from school early are more likely to experience poor outcomes, with few gaining work experience and even fewer becoming economically independent.

The report has estimated that each young person disengaged at age costs the taxpayer $335,000 over the course of their working lives, and when broader social costs are added, this increases to a cost to the community of $411,700.

3 How do we improve outcomes?

There are a number of factors that contribute to poor outcomes for young people leaving the care system, ranging from individual circumstances that impact on behaviour and capacity to participate, to systemic barriers that disrupt engagement.

3.1 Address systemic barriers

A number of commentators have noted that many young people in care share socio-demographic characteristics that are associated with poor outcomes, and these can be compounded by those characteristics of the care system that can make engagement difficult. Systemic barriers cited in the literature include

- **Demographics**: such as low socio-economic status and regional and/or indigenous backgrounds
- **Peer group norms**: (particularly within residential units) that discouraged engagement with education
- **Instability**: “Despite abundant evidence that stability of relationships with siblings, peers and adults matters a great deal to children while in care, welfare systems move socially vulnerable children from placement to placement, and school to school, often requiring them to make social adjustment at critical points in the education calendar” (Wilson & Golding, 2016, p. 137). The Cashmore study notes that “those who had not completed year 10 had an average of ten placements compared with an average of 3.4 placement for those who had completed year 12” (Cashmore, Paxman, & Townsend, 2007).

“It was quite hard because I was moving on all the time and I never got time to settle in. If I did settle in, it was time to go. I went to about seven schools all up and I always felt different …”  
(Cashmore, Paxman, & Townsend, 2007, p. 54)
• **Planning**: “while education authorities assert that personal planning is important, many children in care say they had never participated in making a plan and are not aware of their education plan even if it exists.” (Wilson & Golding, 2016, p. 138). Similarly while, CREATE found in 2018 that only 44% of young people reported having a case plan, and of these only 57% said they had actually helped make it (CREATE Foundation, 2018).

• **Low expectations**: Including widespread presumptions of educational failure and a comparative lack of contact with adult role models and mentors with high levels of educational attainment and/or secure employment (Michell & Scalzi, 2016).

Researchers and commentators have noted that although the State is legally the guardian of young people in care “it is clear that corporate parenting … is woefully inadequate” (Wilson & Golding, 2016, p. 139), and that the State, collectively, fails to support and encourage engagement with education, despite the strong evidence that caregiver expectations is associated with higher levels of success.

Cashmore et al argue that a whole of government approach is central to the development of effective corporate parenting “the social development and education of children and young people in care should be one that is shared among the various departments” (Cashmore, Paxman, & Townsend, 2007, p. 58).

### 3.1.1 Provide effective income support and reduce cost burden

As noted in section 2.2, income security is a significant issue for young people leaving care, many of whom do not have additional support of family or other supports to rely on. This means that many young people struggle to meet rental or mortgage payments, and the costs of engaging in both education and job searches can become prohibitive.

While some states have waived TAFE fees for care leavers in an effort to remove some of these barriers, there is limited additional support available for university participants, although the Department of Education and Training has recently provided an additional years’ funding to support the Raising Expectations program (funded from July 2015 – June 2018 by the Sydney Myer Fund) in recognition of the limited support available. This program provides resources, support and services to help young people in care and care leavers access higher education, and should receive continued and ongoing support.

Outcomes are also likely to improve as Victoria begins to implement the *HomeStretch* program, giving care leavers the option to remain in their placement, with support, until they are 21. This national campaign calls on all state and territory governments to provide an option, whereby the provision of care can be extended to any young person needing or seeking this, until 21 years, much like what is

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happening in any other family setting in Australia. This will provide them with the platform to make the right start in life and enjoy a better long term life outcome.

Victoria has announced a limited trial of extending care in response to the HomeStretch program, but it is currently only available to a small proportion of care leavers.

3.2 Eliminate stigma and discrimination
A number of researchers have noted that there is significant stigma associated with living in Out-of-Home care, and that this can be difficult for young people to negotiate in the school environment:

“All felt, in different ways, however, that the stigma of being in care had impacted their education: they were often told that they ‘would not go anywhere’. Participants reported that most teachers either anticipated or enabled their failure by accessing and/or excusing incomplete tasks and assignments. They also reported that carers and caseworkers were often disinterested. Some reported being bullied by other students, often feeling isolated and alone, and feeling conflicted about whether or not to ‘come out’ and having being in care” (Michell & Scalzi, 2016, p. 127)

According to successive CREATE reports, this often extends into bullying with half of the children in one survey identifying bullying as ‘the thing they would most like to change about school’. (Cashmore, Paxman, & Townsend, 2007, pp. 54-55)).

This, combined with what Harvey has referred to as the ‘…omnipresent soft bigotry of low expectations’ of children and young people in care” (quoted in Michell & Scalzi, 2016, p. 116) can create significant barriers to young people achieving at school.

This highlights the importance of effective support within the school environment, as well as the need for continued funding of programs such as Navigator and TEACHaR and HIPPY, which work to re-engage students who have struggled in the school environment.

TEACHaR
TEACHaR is an intensive one-on-one program provided by Anglicare Victoria which sees trained teachers work with young people and their teachers to boost their academic achievement and engagement with school, so that they have the best chance of success in the future.

Guaranteed university places for care leavers
In Scotland, and with the support of its First Minister, 18 of that country’s educational institutions are to offer guaranteed undergraduate places to students who have been in care at any point in their lives, as a way of helping care leavers overcome barriers to participating in university.

The policy is the first of its kind in the UK and applies to all “care experienced” applicants in Scotland, regardless of age or the duration of their care stay.

A place will be automatically offered to applicants to meet an institution’s minimum entry requirements, which are lower for those who have been in care under a policy designed to widen access.

(The Guardian, 2019)
TEACHaR works with students and teachers in all kinds of out-of-home care settings including foster, residential and kinship care – and all levels of schooling from primary to secondary and specialist settings.

The program has helped with increased engagement with school and a boost in literacy and numeracy skills for the young people who take part, and is showing strong results.

While there has been a strong response to TEACHaR from schools, and it has been well supported by philanthropy, the program is yet to secure ongoing recurrent funding from the Victorian government.

Navigator

Anglicare Victoria also delivers the Navigator program, which has also delivered strong outcomes for young people who have become disengaged from education (though not specific to those from a care background).

A census of client data from AV’s Navigator program indicated that

- 89% were recorded as having anxiety (89% in AV’s program)
- 58% had diagnosed (33%) or suspected (25%) depression
- 19% had diagnosed (11%) or suspected (8%) other mental health condition
- 33% were identified as having Autism Spectrum Disorder, significantly higher than the state average.
- 67% were more than two years behind in literacy and
- 89% were identified as having social/emotional issues.

Staff report that given the high rates of anxiety, ADS and social & emotional issues, clients were often housebound. There is a continued need for support for these young people using outreach-based models such as Navigator.

3.3 Reduce the impact of trauma and family disruption

Young people in care also experience very poor mental health more frequently compared to their peers, and there is evidence to show that these effects continue after they have left care. For those affected, this will impact on their ability to engage effectively in both employment and education.

Children and young people often present to our services with a complex range of symptoms and behaviours related to past trauma. This is particularly damaging when it occurs in childhood, and is associated with symptoms including problems with mood regulation, impulse control, self-perception, and

**HIPPY**

Anglicare Victoria has been delivering the HIPPY program in Latrobe LGA since 2014, working with 158 children and families.

HIPPY Latrobe is an early education program for pre-schoolers and their families with a focus on providing service for people from the local Aboriginal and Torres Strait Islander communities.

Anglicare Victoria seeks to employ people from those communities into the tutor roles, with a focus on developing and supporting those that may not have strong previous work experience.

We also offer education opportunities for our tutors (usually a Cert 3 or 4 in education or welfare related courses)

Of the 11 tutors, 4 have successfully completed Cert 4.

For more information about HIPPY, including program evaluations, see [https://hippyaustralia.bsl.org.au](https://hippyaustralia.bsl.org.au)
attention, memory and somatic disorders (Wall, Higgins, & Hunter, 2016), all of which impact on their ability to engage effectively in education and employment, particularly if the environment is not supportive.

Co-occurring mental health issues and disorders such as conduct disorder and oppositional defiant disorder (in children), PTSD, depression and other affective disorders, borderline personality disorder, somatoform disorders, psychotic and dissociative disorders have commonly been associated with traumatic experiences (Wall, Higgins, & Hunter, 2016).

Anglicare Victoria believes that embedding specialist mental health support as part of the care team for young people in care can bring about significant improvements, and would represent a step forward on whole-of-government efforts to improve outcomes across a range of metrics, including employment and education. Anglicare Victoria’s submission to Victoria’s Royal Commission on Mental Health outlines our proposed service model to address this3.

3.4 Improve the evidence base
A number of researchers have identified that there is a dearth of data and research on outcomes for young people leaving care, including those relating to employment and education. Longitudinal studies, such the Beyond 18 study (still underway) are even rarer.

Opportunities to improve the evidence based cited in the literature including cross-jurisdictional/cross-program evaluations and studies that would allow different models and approaches to be tested and scaled up where warranted and better tracking of higher education access, which would likely lead to greater acknowledgement for the need to recognise care leavers as a special equity group requiring targeting action to address under-representation (Michell & Scalzi, 2016).

In addition, Victoria should establish shared targets for education and employment outcomes for young people in its care, and commit to regular reporting against those outcomes.

4 Conclusion: Strategies to increase access and participation
The stark disparities of outcome discussed in this submission presents a clear argument for targeted interventions to improve education and employment outcomes for young people in care, these should include, but not be limited to

- Ongoing support for alternative pathways into both education and employment for care leavers, including continued access to and fee waivers for TAFE

- Cooperation between State and Commonwealth governments and Universities to address the significant under-representation of young people from care background at university, including
  - Expansion of the Raising Expectations program so it can be available to all care leavers who achieve university entry, including mentoring and transition support
  - offering financial and housing support to prospective students.

3 Please contact Bridget Weller Anglicare Victoria if you would like a copy of this submission
• Providing the option of extending care to 21 years old for all young people in out-of-home-care.

• Ensuring that staff in both the education and community service sectors understand the barriers to participation facing young people in care and are resourced to address those barriers, including stigma and discrimination.

• Providing funding and support for programs such as TEACHaR, HIPPY & Navigator that have a track record in successfully re-engaging hard-to-reach children in school.

As noted by Harvey, McNamara, & Andrewartha, there is a significant task ahead if we are to address this inequity and remove the barriers that are presenting young care leavers from reaching their full potential. This may require legislative, policy and cultural reforms within both the education and community service sectors (Harvey, McNamara, & Andrewartha, 2016).

Above all, the State of Victoria, in its role as corporate parent of young people in out-of-home care, needs to take pride in the talents and resilience of these young people, backed by supportive aspiration for what they can achieve and the establishment of concrete targets by which they can be measured.
5 Works Cited


