

# Extending out-of-home care in the state of Victoria, Australia: The policy context and outcomes

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## **Abstract**

In November 2020, the State (Labour Party) Government of Victoria in Australia announced that it would extend out-of-home care (OOHC) on a universal basis until 21 years of age starting 1 January 2021. This is an outstanding policy innovation introduced in response to the Home Stretch campaign, led by Anglicare Victoria, to urge all Australian jurisdictions to offer extended care programmes until at least 21 years. It also reflects the impact of more than two decades of advocacy by service providers, researchers, and care experienced young people (Mendes, 2019).

## **Keywords**

Care experience, out-of-home care, aftercare, care leaving, extended care, staying put, Australia

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## Background

Australia has a federal out-of-home care (OOHC) system by which transition from care policy and practice differs according to the specific legislation and programmes in the eight states and territories. In June 2019, there were nearly 45,000 children in OOHC nationally of whom the majority (92 per cent in total) were either in relative/kinship care or foster care. Only about six per cent lived in residential care homes supervised by rostered staff. Aboriginal and Torres Strait Islander (hereafter, Indigenous) children were vastly over-represented in OOHC, comprising 17, 979 — that is 40 per cent of the total population or eleven times the rate for non-Indigenous children (AIHW, 2020).

As noted in Table 1, approximately 3,350 young people nationally aged fifteen to seventeen years transition from care each year including 871 in Victoria (AIHW, 2020). About 1140 or 34 per cent are Indigenous (Mendes, Standfield, Saunders, McCurdy, Walsh, Turnbull & Armstrong, 2020). The national Federal Government recommends, but does not enforce, minimum benchmarks such as the expectation for all youth to have a leaving care plan commencing at fifteen years of age. The Federal Government is currently funding a three-year Independent Adulthood Trial in the state of Western Australia which is intended to advance the social and economic well-being of 80 care leavers aged sixteen to nineteen years (ACIL Allen Consulting, 2020).

**Table 1: State and Territory transition from care numbers and legislative and policy supports**

<b>State or Territory</b>	<b>Numbers leaving care aged 15-17 years, 2018-19</b>	<b>Legislation and Policy</b>
Australian Capital Territory (ACT)	42	Access to brokerage funding and casework to 25, extended payments to kinship and foster carers to 21
New South Wales	1173	Aftercare support and brokerage to the age of 25.
Northern Territory	80	Aftercare support and brokerage to the age of 25.
Queensland	630	Aftercare support and brokerage to the age of 25.
South Australia	216	Aftercare support and brokerage to 25 years, optional extended payments to kinship and foster carers to 21 years.
Tasmania	56	Aftercare support and brokerage to 24 years.
Victoria	871	Aftercare support and brokerage to 21 years. From January 2021, leaving care age has extended to 21 years.
Western Australia	280	Aftercare support and brokerage to 25 years.

The targeted age and level of support available to care leavers within the eight states and territories varies considerably (see Table 1 above) but, overall, the jurisdictions share a common position of only offering discretionary (and mostly poorly resourced and inadequate) assistance rather than mandatory unit cost funding once the young person turns eighteen years. The exception until the recent Victorian announcement was the Australian Capital Territory (the smallest jurisdiction) which offered extended care including casework and financial assistance up to age 21, but only for those leaving foster and kinship care (Baidawi, 2016). Australia has reasonably been termed a leaving care laggard compared to other Anglophone countries such as England and the USA (Beauchamp, 2016: 278).

## **The Home Stretch campaign**

Home Stretch is a dedicated campaign led by Anglicare Victoria to persuade all State and Territory governments to extend out of home care provision to 21 years of age. The campaign commenced in late 2015 and has used a range of advocacy strategies including public forums and launches, media interviews, surveys of public opinion, presentations to numerous conferences, meetings with state and Commonwealth politicians, and publications of research reports presenting a cost-benefit analysis (Mendes, 2018a; 2018b).

Home Stretch has highlighted positive findings from extended care programmes internationally to support their social and economic case for extended care. For example, a 2016 report referred to beneficial outcomes from England and California as a rationale for introducing similar programmes in the State of Victoria. According to Home Stretch, extended care would provide major economic benefits including reduced homelessness, less hospitalisation, fewer care leavers arrested, and general improvements in physical and mental health and social connections (Anglicare Victoria, 2016).

A further report analysed the costs and benefits of extending care nationally. That report identified major gains in areas such as educational engagement, reduced homelessness, lower hospitalisation rates, reduced involvement in the

criminal justice system, and lower rates of mental illness, substance abuse, and teen pregnancy. Overall, it was estimated that the savings over 40 years for a cohort of care leavers would be \$66.9 million (Home Stretch, 2018).

Additionally, the Home Stretch campaign attained endorsement from opposition parties in the Federal Parliament. Labour Party senators Doug Cameron and Louise Pratt urged national support for extended care programmes. Cameron drew attention to the success of extended care programs in the UK, Canada and USA, noting improvements in key areas such as education, homelessness, physical and mental health, and reduced involvement in the criminal justice system (Cameron, 2017; Pratt, 2017; 2018). The Centre Alliance MP, Rebekha Sharkie, also voiced support for extending care to age 21 (Sharkie, 2018). However, no representatives of the conservative Liberal-National Party Coalition Government contributed to the parliamentary debates.

In response to Home Stretch, four states agreed to trial forms of extended care until 21 years for selected groups of care leavers. Both Tasmania and South Australia are funding foster care placements to age 21. Western Australia commenced a trial programme supporting twenty young people from all forms of OOHC in May 2019 (Government of Western Australia Department of Communities, 2019), and Victoria introduced a pilot programme in September 2018 providing extended support to 250 young people over five years, whether transitioning from foster care, residential care or kinship care (Mikakos, 2018). The Victoria programme included three components: an accommodation allowance; caseworker assistance based on regular relationship-based contact; and a funding package that assists youth to acquire key education, employment and training, and health supports (Department of Health and Human Services, 2019). The other three jurisdictions — New South Wales, Queensland and the Northern Territory — have not established extended care programmes at this stage.

## Victoria

Prior to the extended care trial, Victoria was arguably a policy outlier lacking either prescriptive legislation or adequately resourced services and programmes to support care leavers (Mendes, 2019). The 2005 Children, Youth and Families Act introduced an obligation (but no legal requirement) to assist care leavers up to age 21, but consecutive governments over more than a decade refused to recognise any guardianship responsibilities once transitioning youth turned eighteen years.

To be sure, a fragmented group of mentoring, post care support and flexible funding support services for young people including discrete Indigenous support and housing assistance programmes were introduced in all eight regions (see Table 2 below). Those services cost approximately 11 million dollars a year which sounded generous in principle, but in practice only about five thousand dollars per year was allocated to meet the needs of each care leaver aged eighteen to twenty years. That compared very unfavourably with the average cost per child for home-based care of \$48,800 (CCYP, 2020), and in fact a considerable proportion of that small pool of funding was allocated to young people aged sixteen or seventeen years who were still residing in the OOHC system. Hence, the real amount of funding per care leaver was even lower (Campo & Comerford, 2016). Consultations with key stakeholders were also limited, and with some positive exceptions, Victorian governments largely ignored evidence from academic research projects that exposed the failures of existing policies (Mendes, 2014; 2019)

**Table 2: Chronology of major leaving care legislation and policy initiatives in Victoria**

Date	Legislation/Policy initiative
1998	First Leaving Care Service Model Project, but no specific funding budgeted beyond 18 years.
2005	Children, Youth and Families Act (proclaimed in October 2006) obliged the government to assist care leavers with finances, housing, education and training, employment, legal advice, access to health and community services, and counselling and support depending on the assessed level of need, and to consider the specific needs of Aboriginal young people. However, Section 16(2) of the <i>Act clarified</i> that these responsibilities ‘...do not create any right or entitlement enforceable at law’.
2012	Introduction of Aboriginal leaving care program which receives \$1.16 million per annum, and remains the best resourced Indigenous leaving care program in Australia
2018	Extended care trial for 250 young people over five years
2020	Establishment of universal extended care program

In contrast, the extended care trial announcement in late 2018 prompted the Victoria Government Department of Health and Human Services (DHHS) to establish a ‘policy network’ (Smith, 1993, p.7) of key stakeholders including service providers, care experienced young people and researchers (many of whom were active in the Home Stretch campaign) to support and legitimise the new framework. For example, I was invited to present a paper at a DHHS information session in early 2019 summarising lessons from Australian and international research evidence on arguments for extended care. I was also invited to join a DHHS Expert Advisory Group, and an Evaluation Working Group.

There were further public policy developments. In February 2020, Fiona Patten, the representative of the minority Reason Party, presented a Private Members' Bill to the Victoria Parliament urging the introduction of universal extended care. The proposed Bill (Patten, 2020) was supported by speeches from representatives of all political parties, but the proposer agreed to delay a parliamentary vote pending further negotiations with the government.

Additionally, Patten asked the Victoria Parliamentary Budget Office (VPBO) to prepare an analysis of the costs and benefits of extending care. The VPBO analysis calculated that every additional dollar spent on extended care would result in a return of \$1.49. Major savings would include reduced costs in housing assistance, alcohol and drug treatment, unemployment benefits, crime and hospital admissions, plus gains from increased income and taxation (PBO, 2020).

During COVID-19, Victoria was the only Australian jurisdiction to issue a formal statement of support for care leavers. That statement released in April 2020 included new funding of approximately \$4 million to assist young people turning 18 years between March and December 2020 to remain in OOHC till June 2021 (DHHS, 2020a).

In November 2020, the government announced a Budget commitment of \$64.7 million over four years and ongoing funding to extend care universally via the Home Stretch programme from the beginning of 2021 plus funding of \$10.3 million over four years for the Better Futures programme (DHHS 2020b; Donnellan, 2020). That funding allocates per annum between approximately \$20,000 to \$27,000 to each care leaver: about \$16,000 allowance which is either provided directly to the foster or kinship carer, or as a stipend for those unable to remain with their carer or who are leaving residential care; a maximum amount of approximately \$9,500 to fund a caseworker through the Better Futures programme; and some flexible funding to purchase needed goods and services for education, employment, housing or other personal needs.

## Conclusion

After many years of policy failure and neglect, Victoria has become the leading Australian provider of transition from care support. The policy announcement in November 2020 establishes a benchmark of core ongoing assistance for care leavers up to 21 years of age that all other Australian jurisdictions should follow. To be sure, some groups of care leavers with complex needs will require additional and specialised assistance: those leaving youth justice custody, those with a disability, those experiencing poor mental health and/or unresolved trauma, young parents, those leaving residential care, and Indigenous youth seeking to reconnect with family and culture (CCYP, 2020). It is likely that some care leavers will require support and nurturing up to at least age 25 which is about the average age that most young people in Australia now depart the family home (Wilkins & Vera-Toscano, 2019).

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## **About the author**

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