

**An Examination of Individual Packages of Care for Young  
People under Ministerial Guardianship in South Australia**

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## DECLARATION

This thesis is my own work and has not been submitted in any form for another degree or diploma at any university or other institute of tertiary education. Information derived from the published and unpublished work of others has been acknowledged in the text and a list of references is given in the bibliography.

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## **ABSTRACT**

The research conducted in this thesis was initiated based upon on the need to evaluate and provide feedback about Individual Packages of Care (IPC) for adolescents in alternative care in South Australia. Despite maladaptive behaviour being prevalent in this population of looked after children, little is known about how stakeholder groups understand and manage behaviour within an IPC. Furthermore, whilst the complexity of young people's mental health and behavioural needs necessitates constant interaction between many agencies both private and government, research has sparsely explored how collaboration can be achieved within a professional foster care placement such as an IPC; particularly in relation to supporting young people and their carers. The enduring effects of mental health and behavioural problems that remain unaddressed are significant and include decreased placement stability and poor relationships with others into adulthood. This inspired the direction of this thesis.

This research had two major intentions. The first aim, to identify factors preventing effective practice in IPCs using the specific example of stakeholder experiences in supporting adolescents in out-of-home care to resolve the challenges faced with maladaptive behaviour and mental health problems. Second, to identify common accounts of behaviour between social workers and professional carers and to discuss what these accounts could imply in supporting adolescents in an IPC. The findings present a

thematic analysis of transcripts obtained during the interviews of 44 participants, representing three cohorts: professional foster carers, social workers and young people who have recently left care and were looked after in an IPC. Each cohort participated in an individual semi-structured interview in which their views and experiences were discussed. The focus of the interviews included experiences of each cohort with improvement in behaviour, improvement in stability of care and overall experiences with interactions between cohorts and with working in an IPC.

Thematic analysis of stakeholder experiences of interagency work confirms several barriers that have been reported in other research, indicating the ongoing difficulties experienced in service provision across a broad range of client groups and disciplines. Incidental data provided some interesting additional findings including: ‘manipulation’ by youth of social worker and carer relationships, presenting functioning problems within the IPC. This resulted in a reduced capacity for professional carers and others to implement behavioural strategies in a timely manner.

Participant views about behaviour were analysed to identify consistent views, experiences and points of discrepancies in understanding and responding to maladaptive behaviour and mental health needs. The analysis identified several ways in which behaviour was viewed and highlighted a dominance of poor understanding of young people’s behaviour in alternative care. Reports of behaviour occurring due to environmental influence, including abusive environments and placement disruption, appear to be few amongst participants in this research, despite accounts of incidents being

consistent with environmental and post-trauma behaviour. Disparities in participant views are discussed, together with common views which assist stakeholders to arrive at an agreed understanding of behaviour. Hutchinson (2003) stresses that individuals do not behave independently of their environment, rather, they exist *within* their environment. This concept is known as “Person-in-Environment”. The concept of person-in-environment was found to be viewed by carers and social workers in ways that are not consistent from established theoretical understandings, and the potential negative outcomes for practice in IPC were highlighted. Purposeful behaviour was not readily considered in placements and appeared to be a source of frustration amongst carers trying to understand youth behaviour, where many suggested that behaviour was deliberate and served only to cause disruption in the placement.

Finally, the views and experiences of two cohorts (professional carers and former youth) were individually analysed due to the centrality of their involvement with the IPC. Professional carers, it would seem, are frequently required to manage stressful, dangerous and difficult situations with young people. These findings provide the opportunity for those involved in the IPC, and external to the actual placement, to understand the systems and relationship context in which efforts to implement effective care occurs, and the unique challenges faced in professional foster care and more specifically in an IPC. The range of individuals to which this information applies are numerous, including policy makers, supervisors, managers, front line social workers and those who work directly with young people in an IPC. The thesis concludes with a discussion of the practical implications of the findings.





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## OVERVIEW

### ***Introduction***

This thesis aims to explore the use of Individual Packages of Care (IPCs) in the context of the current demand on placements, with specific reference to the behavioural and emotional challenges experienced by young people, carers, and social workers alike.

Specifically the thesis aims to explore:

- Increasing demand upon alternative services in South Australia
- Higher levels of behavioural issues in care
- How IPCs fare as an alternative to managing behaviour and demand on placements
- How stakeholders in IPC placements understand what constitutes 'negative behaviour'
- Research claims that a misunderstanding of negative behaviour may be a key barrier to good communication, suggesting a need to identify how different stakeholders understand behaviour, especially within the context of an IPC.

For a variety of reasons including physical, sexual and emotional abuse by parents and other family members, parental drug addiction, and other factors that influence the

ability of parents to care for their children, approximately 35,895 Australian children are unable to live with their biological families (AIHW, 2011). This results in children being placed in alternative care, with 46% of children placed with kinship (relative) carers and 46% placed in non-biological foster care. The remaining 8% reside in residential placements across Australia, with that figure increasing to 10% in South Australia, (AIHW, 2011). Current Australian Institute of Health and Welfare reports (AIHW, 2011) report that the incidence of young people living in alternative care is increasing, reflecting both a combination of practice, policy and legislative changes (e.g., mandatory reporting and permanency planning for young people already in care), along with broader socio-economic stressors (e.g., government budget cuts and decreased use of government run residential facilities). Despite the growing number of Australian children removed from their birth parents and placed into care, there continues to be an ongoing shortage of suitable foster placements, and this problem has increased over the last two decades (Barbell, 1999; Barber & Gilbertson, 2001; Bromfield and Higgins, 2005). This shortage is exacerbated by the fact that fewer residential care facilities exist, meaning that children with greater levels of behavioural issues are now being placed with carers who are potentially unable to manage such behaviours (Bromfield and Higgins, 2005). The primary outcome of this is that placements are at greater risk of disruption (Barber & Delfabbro, 2004; Delfabbro et al. 2002), with research suggesting that this has a direct relationship to foster carer attrition (Fanshel et al., 1990; Farmer, 1993; Palmer, 1996; Oosterman et al. 2007).

By the time young people enter alternative care, they may have experienced severe physical, emotional abuse and in some cases neglect (Vigg, Chinitz & Schulman, 2005). Removal from a young person's biological parents and placement into alternative care can worsen problems of self-concept, negative behaviours, and mental health, due to the relationship between behaviour and placement stability (Delfabbro, Barber and Cooper, et al. 2002a). Amongst children in alternative care, difficult to manage behaviours appear to be commonly experienced by those caring for young people. Previous research has reported that adolescents in alternative care have higher instances of mental health and conduct problems than chronologically comparable peers, or peers with similar maltreatment histories (Pilowsky, 1995). Penzerro and Lein (1995) suggest that disordered attachments are directly responsible for placement disruption. Furthermore, their research demonstrates that emotionally disturbed adolescents in care are most likely to have histories of placement disruption, especially those adolescents with externalising disorders which are uncharacteristic of peers who are not in care (Pardeck, 1983; Proch & Taber, 1987). Such externalising disorders include attention deficit hyperactivity disorder, oppositional-defiant disorder, and conduct disorder (American Psychiatric Association, 1994). Clinical qualifiers stated for conduct disorder appear to also be predictive of placement disruption (Barber, Delfabbro & Cooper, 2001).

Addressing the mental health needs of this population of adolescents may be difficult for psychiatrists, psychologists, social workers, nurses and key stakeholders because there is an crossover and interaction of mental health, social and behavioural problems for young people in care (Rosenfeld et al., 1997; Sullivan & Van Zyl, 2008; Vigg et al.,

2005). Adolescents in alternative care, due to their complex behavioral and mental health needs, are undoubtedly going to utilise multiple services, often simultaneously. In order for care to be effective, it is necessary for those providing aspects of care to young people, either through treatment, supervision or support that collaboration occur (Cottrell et al., 2000). Key components of a support team that are involved with adolescents in alternative care when they exhibit challenging behavior include mental health professionals, direct care workers, foster parents and social workers who manage the administrative and logistical needs of the young person. Preferrably, it would be helpful for these stakeholder groups to work collaboratively in order to execute commonly understood goals in relation to managing the young persons emotions and behavior.

While a collaborative approach would intuitively appear justified, there is little literature on collaboration between key stakeholders in foster care, and none specifically addressing IPCs (Hudson, 2002; Odegard, 2005). The small amount of previous research that exists in regards to interagency collaboration in alternative care identifies several general barriers to effective multiagency work. The first of these is communication, which is often affected by a lack of mutual understanding of how behaviors are interpreted or what causes them. The behaviours experienced by those working with young people in alternative care that have been the focus of intervention appear to be a common barrier in most previous research. Thus the understanding of behaviour adopted by professionals constitutes a second barrier. Beliefs about the causes of behaviour have been found to determine the importance of collaboration for those who care for adolescents in the development of policy and delivery of an intervention (Johnson et al.,

2000). Similarly, the beliefs that stakeholders and their subgroups have about behaviour and its causes could influence the way in which they approach it, the ability to tolerate, and their level of stress and willingness to remain in alternative care and specifically IPCs. Stakeholders may also have opposing explanations for behaviour, which could inform their recommendations for treatment and in many cases their own approach in managing the adolescents needs.

Research also suggests that group norms and beliefs held about behaviour, its causes and ways to resolve it may vary within each subgroup, discipline and professional membership (Worrall-Davies, 2008; Worrall-Davies & Cottrell, 2009; Dartington Social Research Unit, 2008). Alternatively, stakeholders across different groups surrounding adolescents in alternative care may also view negative behaviour and solutions for it with views that are compatible. It is therefore essential to improve understanding of other cohort's views to better manage and support children in professional foster placements who display negative behaviours. It is reasonable to argue that if one could establish and understand the multiagency structure in which a young person is cared for, they could target goals and the sharing of resources in a way that meets the needs of the young person cooperatively, thus contributing to improved collaboration and greater success in meeting the child's specific behavioural needs.

Accordingly, this research sought to examine and report the most common ways in which negative behaviour has been understood within subgroups involved with IPCs in South Australia. Within alternative care, barriers to multiagency, interprofessional

collaboration can be separated into systemic, agency and individual barriers (Darlington et al., 2005a & b). It is argued that views and understandings of negative behavior held by stakeholders about how it could promote barriers at organisational and subgroup levels. Such beliefs can influence approaches to managing and facilitating the care of a young person, and because of this exploration is warranted. A concern with how behaviour is understood necessitates questions such as: ‘How do professional foster carers, along with social workers, psychologists and other professions in the different subgroups surrounding adolescents in an IPC, understand and therefore approach negative behaviours?’, ‘What common views and approaches to they share and how are they different with regard to understandings and meeting the needs of young people in care?’, and ‘What are the barriers to collaboration at systemic, individual and agency level?’. To date, It is apparent that these issues have not be explored across subgroups and agencies involved in supporting adolescents in professional alternative care.

### ***Research aims***

This thesis presents a view not previously available within the literature in this area in two major ways. First, this is the first time that the experiences of key stakeholders - including professional carers - in IPCs, along with social workers who have case-managed the children cared for have been considered. Other research has focused largely on interagency collaboration with children in voluntary foster care. The contribution of this research is unique as it focuses specifically on the experience and practice of professional care staff in managing young people placed in IPC placements.



The first aim of this thesis is to identify and examine problems within the collaborative framework in which an IPC occurs, using specific examples of professional carer and social worker experiences when supporting adolescents in an IPC to address challenges. It is argued that such an examination of these views and experiences can improve the overall understanding of how agencies and individuals can increase effectiveness of multiagency practice when managing young people with challenging needs and behaviors in the alternative care field.

The second broad aim is to understand how professional foster care, and specifically IPC, change the care experience of a young person, including meeting behavioural needs and what insight could indicate for adolescents in alternative care. It is argued that by reporting on common perceptions of behaviour, experiences, and collaboration amongst stakeholders will contribute to an understanding of how professional foster care is influencing the system, agencies, and children, and could contribute to more effective collaboration and better use of the IPC model. It is also argued that individual consideration of the experiences of each key cohort can promote a better understanding of collaboration by identifying the assumptions that are unique regarding behaviour and collaboration and found to be unique to each group of stakeholders, including professional carers, social workers and the youth served in an IPC.

## ***Overview of thesis***

To examine and analyse the issues presented, the thesis has been separated into four parts. In Part A, Chapter 1, a review of literature on alternative care, collaboration, and managing maladaptive behaviour disorders amongst youth in alternative care is conducted. Within Chapter 1, the first section (section, 1.1) overviews child protection and alternative care. The following sections (sections, 1.2, 1.3, 1.4, 1.5 & 1.6) outline how children enter and remain in care and previous trends on this. They are followed by sections (Sections, 1.7, 1.8, 1.9 & 1.10) discussing placement instability, child behaviour, impact of family relationships on placement, attachment, and the causes of placement disruption. Section 1.11 reports on the literature about children and youths' views of placement and the role of their view in alternative care. Following on from this section (1.12) discusses the importance of multiagency, mutually supported practice for young people in an IPC. Sections 1.13 and 1.14 report on established obstacles to effective interagency work amongst providers of services to young people, stressing the importance of the role of communication and common understanding of behaviors and young peoples needs.

Part B (Chapter 2) details the research methodology. Details about the recruitment of participants and summaries of participants' groups are addressed in this chapter. The process of thematic analysis which is utilised in this thesis is also discussed in this chapter.

Part C (Chapters 3, 4 and 5) explores the views and experiences of each stakeholder group regarding collaboration, understanding of behaviour, and the impact of IPCs on care. These chapters introduce more detailed literature about multiagency collaboration (Chapter 3) and understanding of behaviour (Chapter 4), and each chapter analyses the interviews within two cohorts about their experiences and views related to supporting adolescents in an IPC who have complex behavioral and mental health needs. The final part of each chapter compares these findings to previous research and suggests possible implications for collaborative practice in professional foster care in South Australia.

Chapter 6 details the experiences and views of youth who were previously placed in an IPC. This chapter uniquely considers the experiences of participants who have been cared for by professional carers in a specialized placement. The chapter analyses the interviews with participants about their experience and perceptions with respect to being supported in IPCs. The chapter is also summarised in terms of its contribution to understanding youth views.

Part C (Chapter 7) concludes by reviewing the findings of the entire analysis of professional foster care and stakeholders' discourse about managing challenging behaviour, along with the views of former young people in care, and considers the implications for specialized placements aimed at supporting adolescents in alternative care. The chapter also identifies deficiencies to the understanding provided in this research of challenging behaviour and collaboration and makes recommendations for improving service delivery for adolescents with complex needs between cohorts that

make up care teams in South Australia when managing professional foster care. Finally, it identifies future areas of potential research that will further contribute to improved service delivery, collaboration and shared responsibility amongst stakeholders of professional foster care in alternative care in South Australia.