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**Housing and Young People Leaving Out-Of-Home State Care**

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## **Housing and Young People Leaving Out-Of-Home State Care**

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In Australia, there were over 34,000 young people in formal out of home state care such as foster care, group homes or state provided residential care in 2009. While many young people leave care before the age of 15, often to be reunited with their family, about 1,500 people “age out” of the care system between the ages of 15-17 every year. Australian and international research identifies young people with a care background as being at increased risk of social exclusion, including poor housing outcomes and homelessness. This paper presents data from an AHURI funded research project “Improving housing outcomes for young people leaving state out of home care”. Interviews were conducted between August 2008 and April 2009 in both Victoria and Western Australia. Qualitative and quantitative data was collected from young people aged 18 – 25 years who had experienced state care. The majority of participants interviewed were currently homeless or had experienced homelessness since leaving care. This paper presents a preliminary analysis of the quantitative data from this research reporting key findings including the incidence of exit planning for care leavers, together with homelessness and housing outcomes. The final report from this research will be completed in 2010.

## **Introduction**

This paper draws on a larger research project titled “Improving housing outcomes for young people leaving state out of home care”. State care refers to a variety of state approved out of home care options such as: foster care; residential care; family and kinship care; as well as wards of the state. The project was funded by the Australian Housing and Urban Research Institute (AHURI) and framed around the research question: “Which support model(s) most effectively facilitate positive housing outcomes for young people leaving care?” The project commenced in mid 2008 and published an AHURI Positioning Paper (Johnson et al. 2009) in April 2009. The research predominantly used qualitative methodology, with limited quantitative data also being collected. This paper presents a subset of the quantitative data and a preliminary analysis of that material, focusing on:

- Housing outcomes;
- Frequencies of homelessness;
- Care leavers’ age when exiting care;
- Number of placements in care;
- The planning process in the young persons’ transition from care.

This paper reports preliminary findings based on quantitative material and flags some of the issues emerging to date. Compared with previous research on care leavers in Australia, this is a larger study; and interviews were carried out in both Victoria and Western Australia. The majority of participants were currently homeless and/or had experienced homelessness after leaving care. The quantitative data suggests that there are higher frequencies of homelessness among care leavers who left care at a younger age and who had higher numbers of placements in care. Further elaboration of both qualitative and quantitative analysis will be presented in the final report which will be completed in 2010. Another preliminary finding indicates that the cultural definition of homelessness inadequately encapsulates the housing outcomes and challenges for care leavers.

Previous research tended to engage with care leavers’ poor outcomes generically, while the research project this paper builds on specifically focuses upon housing experiences and housing outcomes. For the purpose of outlining context and introducing the research process, the paper commences with a section providing a brief background to the research project and a summary of the methodology adopted.

## **Background to this research**

In 2009, more than 34,000 persons younger than 18 years were in state out of home care (Australian Institute of Health and Welfare 2010) and the number of persons in care has steadily increased over the past decade. The number of young persons aged 15-17 who were discharged from care in 2008 was just over 2,000; or one-quarter of all children discharged (Australian Institute of Health and Welfare 2009), compared with 1,500 in 2007 (Australian Institute of Health and Welfare 2008). The prevalence of homelessness among young people who have been in state care has been identified in Australian homelessness research for at least twenty years. The National Inquiry into Homeless Children (Burdekin & Carter 1989, p.109) stated concern over the numbers of homeless children who were State wards. It found:

*“A period of time spent in a child welfare or juvenile justice institution, or otherwise detached by the welfare system from the natural family, seems to increase significantly a child’s chances of becoming homeless.”*

Previous Australian research has identified a range of negative outcomes associated with being in state care. At the same time, research to date has focused on the leaving care experience overall. Whilst this research has identified a range of homelessness and housing related issues, the larger AHURI-funded study drawn upon by this paper specifically aims at improving housing outcomes among people who have exited state care:

*“Recommendations arising out of previous research highlight both the importance of a joined-up approach to supporting care leavers, and housing as one of a broader suite of resources necessary if young people are to achieve positive life outcomes. To date, however, there have been limited attempts to identify and improve connections between care leavers’ transition to independent living and housing policy frameworks”* (Johnson et al. 2009, p.14).

## **Methodology**

The research adopted predominantly qualitative methodology with a limited amount of quantitative data being collected from all interviewees. One-to-one interviews were conducted with a total eighty-three interviews carried out in two states; forty-four in Victoria and thirty-nine in Western Australia. Interviews were undertaken from September 2008 until May 2009. The interviews lasted for about one hour. A semi-structured interview schedule, consisting of both open and closed questions guided the interviews. The inclusion criteria for participants were,

firstly, having at some time been in state approved out of home care, such as foster care, residential care, family and kinship care, and wards of the state; and secondly, currently being age 18-25. On the basis of these criteria, five of the interviews were excluded, and one participant was interviewed twice, leaving a total of seventy-eight interview transcripts and seventy-seven different participants.

The sampling strategy adopted involved research teams in both Victoria and Western Australia liaising with youth services and specialist leaving-care service providers and requesting their assistance in identifying eligible participants. Background information about the study, the research approach and methods and the researchers' experience were provided to support agencies and service providers. These organizations and their support staff were asked to refer eligible clients to the researchers, and/or place promotional material in client common areas for eligible young care leavers to contact the researchers directly. In addition, a press release with subsequent local newspaper reports and local radio announcements took place in Western Australia. The role of service providers was limited to that of circulating information about the project and referring prospective young people to the research team. A few referrals of eligible participants were also made by care leavers. In summary, research participants were identified through a combination of convenience and snow-ball sampling.

To minimize the danger of re-traumatizing young people through the interview process, information on support services was made available to young people at the conclusion of their interview. Participants were invited to have a support person of their choice accompany them during the interview if they preferred. Participants were also paid an honorarium for their contribution.

In the findings that follow, it is important to note that the relatively small sample size precludes extensive statistical analysis. There are, for instance, invariably questions of representativeness and generalisability arising from a sample of this size and drawn in this manner, as is often the case with most research on youth homelessness. Nonetheless, basic counts and cross-tabulations can often be very revealing for tentatively identifying key patterns and trends, which in turn often complement qualitative analysis of the interview data. This latter endeavor will be included in the final report.

## Housing Outcomes

The definition of homelessness by Chamberlain and MacKenzie is one of the most widely accepted definitions of homelessness in Australia and incorporates three tiers of homelessness; primary, secondary and tertiary (Homelessness Taskforce 2008). Chamberlain and MacKenzie argue “that ‘homelessness’ and ‘inadequate housing’ are socially constructed cultural concepts that only make sense in a particular community at a given historical period” (1992 p.290). This creates a cultural definition of homelessness, relevant to the cultural standards and expectations of housing. This definition is utilised by the Australian Bureau of Statistics (ABS) in its census counts and incorporates the three tiers of homelessness (MacKenzie & Chamberlain 2008).

The three tiers of homelessness within the cultural definition can be interpreted differently, and recent census counts of the homeless population have also stipulated a number of those viewed as marginally housed. This tier relates to those renting a caravan and whose living arrangements fall below the cultural expectation of one bedroom for each adult occupant in the household. For the purposes of this paper:

- **Primary Homeless** refers to research participants sleeping rough; living on the streets; in parks and squats. We also included those participants indicating they were couch surfing as it was apparent that they were not able to borrow a couch every night and had recently been spending occasional nights sleeping rough.
- **Secondary Homeless** refers to research participants in transitional accommodation; youth refuges and shelters; emergency accommodation; and living with friends and relatives on a temporary basis (but not couch surfing) with no other accommodation arrangements.
- **Tertiary Homeless and Marginally Housed** refers to research participants living in boarding houses with no private facilities. We also included those participants whose living arrangements fell below the cultural expectation of one bedroom per adult occupant or living in a rented caravan.
- **Housed** refers to research participants not categorized in any of the above tiers of homelessness. This included those with or without their own leases, in public or private accommodation, or living with relatives or friends, as long as this was a permanent arrangement and did not fall into the above categories of homelessness.

For the purposes of this paper, those participants characterized as primary homeless; secondary homeless; and tertiary homeless and marginally housed are viewed as homeless. It should be noted that the characterisation of tertiary homeless under the cultural definition is debated. While Homelessness Taskforce (2008, p.3) include those living in “caravan parks with no secure lease and no private facilities” as tertiary homeless, Chamberlain and MacKenzie (2009) do not include these participants in the tertiary homeless population. While there may be different interpretations of the cultural definition of homelessness, particularly regarding those viewed as tertiary homeless and marginally housed, it should be noted that our frequencies with regards to this tier only refer to a small proportion of our sample (five percent were marginally housing at the time of interview). Thus, this inclusion has little impact on the overall frequencies reported.

## **Findings**

Further to the homelessness classifications outlined above, it can be observed in our sample of young care leavers that:

- Nineteen, or twenty-five percent, of our participants were primary homeless at the time of interview.
- Twenty-three, or thirty percent, of our participants were secondary homeless at the time of interview.
- Four, or five percent, of our participants were marginally housed.
- Thirty, or thirty-nine percent, of our participants were currently housed.

In short, the preliminary analysis of our empirical material suggests that many care leavers have had significant difficulties in obtaining accommodation and a majority of the interviewees were either homeless or had at some point experienced homelessness.

## **Interview participants**

As outlined in Table I, forty of our interviewees were male, thirty-four female, and three participants identified themselves as transgender. The mean age of participants is just under 20.5 years. While a majority of the interview participants had completed compulsory schooling, twenty-two percent of the interviewees had not completed year 10 and sixty-four percent had not completed year 12. These figures indicate poor educational outcomes among our sample of care leavers. Among the general population, 7.4 percent of school leavers aged 15-19 do not complete year 10 (ABS 2008) and twenty percent of 20-24 year olds do not complete year 12 (Cashmore &

Paxman 2006). While these figures are not directly comparable to our sample of care leavers, it suggests that the proportion of care leavers not completing year 10 and year 12 is three times higher in our sample than among the general population.

**Table I: Characteristics of interview participants**

<b>Gender</b>									
	Male		Female			Transgender		<b>Total</b>	
Freq.	40		34			3		<b>77</b>	
<b>Age at time of interview</b>									
Age	18	19	20	21	22	23	24	25	<b>Total</b>
Freq.	18	15	8	12	8	6	7	3	<b>77</b>
<b>Highest level of completed education</b>									
	Below Year 10		Year 10	Year 11	Year 12	TAFE or University		<b>Total</b>	
Freq.	17		24	8	20	8		<b>77</b>	
<b>Age came into care</b>									
Age	0-3		4-10	11-15		16-17		<b>Total</b>	
Freq.	17		22	30		7		<b>76</b>	
<b>Number of placements in care</b>									
	Single	Few (2-5)	Multiple (6-10)	Numerous (11-20)	High (21-49)	Very high (50+)		<b>Total</b>	
Freq.	10	32	10	12	7	5		<b>76</b>	
<b>Age left care</b>									
Age	11-15			16-17		18		<b>Total</b>	
Freq.	18			22		37		<b>77</b>	

As outlined above, homeless participants are those viewed as primary homeless; secondary homeless; and tertiary homeless and marginally housed. It was noted:

- Forty-six, or sixty-one percent, of our participants were homeless when interviewed.
- Seventy-two, or ninety-five percent, of our participants had at some point experienced homelessness.

With regards to primary homelessness, as outlined above:

- Nineteen, or twenty-five percent, of participants were primary homeless when interviewed.
- Forty-nine, or sixty-four percent, of our participants had experienced primary homelessness at some point.

It should be noted that our research methodology created a bias towards care leavers currently homeless, as they were more likely to currently be receiving support from the respective service providers that assisted this research. However, measures were taken to reach participants currently housed, and forty percent of our participants were housed at the time of interview in addition to the five percent viewed as marginally housed.

### Homelessness and age when leaving care

Table II and Table III presents the frequency of our research participants who are currently homeless and who have at some time been homeless in relationship to their age when they left care. In our sample, the proportion of care leavers who are currently homeless appears to be more prevalent among those who left care at a younger age (before turning 18).

- Two-thirds of the care leavers who exited care at the age of 11-15 are currently homeless;
- Slightly over seventy percent of the care leavers who exited care at the age of 16-17 are currently homeless;
- Just over fifty percent of care leavers who exited care at age 18 are currently homeless.

**Table II: Age left care and currently homeless**

Age left care	Currently Homeless				Total	
	Yes		No			
	Count	%	Count	%	Count	%
11-15	12	16	6	8	18	23
16-17	16	21	6	8	22	29
18	19	25	18	23	37	48
<b>Total</b>	<b>47</b>	<b>61</b>	<b>30</b>	<b>39</b>	<b>77</b>	<b>100</b>

With regards to ever experiencing homelessness, the proportion of participants who have experienced homelessness is higher among those who left care at a younger age:

- All participants 11-15 years of age when exiting care have experienced homelessness;

- Over ninety percent of participants 16-17 years of age when exiting care have experienced homelessness;
- Over three-quarters of participants 18 years of age when exiting care have experienced homelessness.

**Table III: Age left care and ever homeless**

Age Left Care	Ever Homeless				Total	
	Yes		No		Count	%
	Count	%	Count	%		
11-15	18	23	-	-	<b>18</b>	<b>23</b>
16-17	20	26	2	3	<b>22</b>	<b>29</b>
18	35	45	2	3	<b>37</b>	<b>48</b>
<b>Total</b>	<b>73</b>	<b>95</b>	<b>4</b>	<b>5</b>	<b>77</b>	<b>100</b>

Leaving care at a younger age has been proposed as a factor for poor outcomes among care leavers (see Johnson et al. 2009) and our quantitative material, particularly the frequencies outlined in Table III, appears to reinforce that care leavers leaving care at a younger age are at greater risk of experiencing homelessness.

#### **Number of placements in care and homelessness**

Table IV and Table V presents the frequency of our participants who are currently homeless and who have ever been homeless in relationship to the number of placements they had in care. In our sample, the proportion of care leavers who are currently homeless appears to be greater among those who had higher number of placements in care.

- Half of the care leavers who had 10 or fewer placements in care are currently homeless;
- Seventy percent of the care leavers who had 11-19 placements in care are currently homeless;
- Three-quarters of the care leavers who had 20 or more placements in care are currently homeless.

With regards to ever experiencing homelessness, the proportion of participants who have experienced homelessness is higher among those who have had higher numbers of placements in care:

- Ninety-two percent of participants who have had 10 or fewer placements in care have experienced homelessness;
- All participants with 11-19 placements in care have experienced homelessness;
- All participants who have had 20 or more placements in care have experienced homelessness.

**Table IV: Number of placements in care and currently homeless**

Number of Placements in Care	Currently Homeless				Total	
	Yes		No		Count	%
	Count	%	Count	%		
Single	5	7	5	7	10	<b>13</b>
Few (2-5)	16	21	16	21	32	<b>42</b>
Multiple (6-10)	7	9	3	4	10	<b>13</b>
Numerous (11-19)	8	11	4	5	12	<b>16</b>
High (20-49)	6	8	1	1	7	<b>9</b>
Very High (50+)	4	5	1	1	5	<b>7</b>
<b>Total</b>	<b>46</b>	<b>61</b>	<b>30</b>	<b>39</b>	<b>76</b>	<b>100</b>

**Table V: Number of placements in care and ever homeless**

Number of Placements in Care	Ever Homeless				Total	
	Yes		No		Count	%
	Count	%	Count	%		
Single	10	13	-	-	10	<b>13</b>
Few (2-5)	29	38	3	4	32	<b>42</b>
Multiple (6-10)	9	12	1	1	10	<b>13</b>
Numerous (11-19)	12	16	-	-	12	<b>16</b>
High (20-49)	7	9	-	-	7	<b>9</b>
Very High (50+)	5	7	-	-	5	<b>7</b>
<b>Total</b>	<b>72</b>	<b>95</b>	<b>4</b>	<b>5</b>	<b>76</b>	<b>100</b>

High number of placements in care have been previously linked with poorer outcomes for care leavers (Cashmore & Paxman 2006; Fredrick & Goddard 2006; Johnson et al. 2009) and our quantitative material, particularly the frequencies outlined in Table IV, appear to reinforce that care leavers experiencing a large number of placements are at greater risk of experiencing

homelessness. All participants who had 11 or more placements in care have experienced homelessness in our sample of care leavers.

### **Homelessness and Transition from Care**

Table VI and Table VII presents the frequency of our participants who are currently homeless and who have ever been homeless in relationship to whether or not they had a leaving care plan:

- Half of our participants who had a leaving care plan were currently homeless;
- Over seventy percent of the participants who did not have a leaving care plan were currently homeless.

**Table VI: Frequency of leaving care plan and currently homeless**

<b>Leaving Care Plan</b>	<b>Currently Homeless</b>				<b>Total</b>	
	<b>Yes</b>		<b>No</b>		<b>Count</b>	<b>%</b>
	<b>Count</b>	<b>%</b>	<b>Count</b>	<b>%</b>		
Yes	10	13	10	13	20	26
No	30	39	12	16	42	55
Unsure	7	9	8	10	15	19
<b>Total</b>	<b>47</b>	<b>61</b>	<b>30</b>	<b>39</b>	<b>77</b>	<b>100</b>

**Table VII: Frequency of ever homeless and having had a leaving care plan**

Leaving Care Plan	Ever Homeless				Total	
	Yes		No		Count	%
	Count	%	Count	%		
Yes	19	25	1	1	20	26
No	40	52	2	3	42	55
Unsure	14	18	1	1	15	19
<b>Total</b>	<b>73</b>	<b>95</b>	<b>4</b>	<b>5</b>	<b>77</b>	<b>100</b>

With regards to ever experiencing homelessness, the ubiquity of a homelessness experience means that the results are inconclusive:

- Ninety-five percent of participants who had a leaving care plan have experienced homelessness;
- Ninety-five percent of participants who did not have a leaving care plan have experienced homelessness;
- Ninety-three percent of participants who were unable to determine whether or not they had a leaving care plan have experienced homelessness.

## Discussion

This paper reconfirms previous research which has found high proportions of homelessness among care leavers; linked poor outcomes with the care leavers' age when exiting care, the number of placements in care, and transitional support in the exit process. International and national research has identified that young people leaving state care are at risk of social exclusion including poor housing outcomes and homelessness (Australian Government 2008; Cashmore & Mendes 2008; Cashmore & Paxman 2006; Forbes, Inder & Raman 2006; Frederick & Goddard 2006; Homelessness Taskforce 2008; Johnson et al. 2009; London & Halfpenny 2006; Mendes 2005; Mendes, Moslehuddin & Goddard 2008; Moslehuddin & Mendes 2006; National Youth Commission 2008). To mitigate the negative outcomes experienced by care leavers Governments have initiated leaving care support and transitional programs such as assigning specialist leaving

care organizations to work with young people in the transition from care to independent living. However, New South Wales is the only Australian State to have a uniform support service for care leavers, while some transitional and leaving care supports are in place in Western Australia, Queensland and Victoria (Cashmore & Mendes 2008). The Council of Australian Governments (2009 p.27) has recently initiated a new national child protection framework which tentatively embraces leaving care support with a strategy to “increase support to young people leaving care”. This framework also recommits to the policy of “no exits into homelessness from statutory care” as initially adopted in the national framework to combat homelessness (Homelessness Taskforce 2008).

While appropriate exit planning, including practical living skills and follow-up with care leavers, is one of the policy recommendations identified as an avenue to mitigate poor outcomes for care leavers (Fredrick & Goddard 2006; Johnson et al. 2009; London & Halfpenny 2006; Mendes 2005; Mendes, Moslehuddin & Goddard 2008), our quantitative material, particularly the frequencies outlined in Table VII, indicate that having a leaving care plan does not necessarily prevent experiencing homelessness. Further investigation and contextualization with the qualitative material of this research project may illuminate this further. However, our preliminary analysis suggests considerable variation in what a leaving care plan actually consists of and available support. Mia, for example, was given the choice of going back to her biological mother, or getting support to get into transitional accommodation. Rather than assisting with finding accommodation, the respective Community Service Department, through its inaction, pushed this young person to attempt reunification with her biological mother, as there were no other accommodation options when she aged out of care. This arrangement failed after two or three months. She did receive some support during the following six months from the Department, but it was not to her satisfaction as the offers consisted of short term youth hostels and refuges rather than transitional or more permanent arrangements. This is how she characterised the support from the Department:

*“Tried helping, but they didn’t do much of a, like, job and what not. It’s like, well, hang on; you’d wanted me to stay in, like, government places. It’s like; you can only stay up there up to two months, three months. It’s like, as soon as I get kicked out of there, I want somewhere stable to live, so I can be stable, get a stable job, stay in that job. Actually live a life. Not me bouncing from place to place every couple of months. I just ended up doing on my own and what not. And I’m still going, so.”*

## **Conclusion**

It should be re-emphasized that this paper presents preliminary findings of this research project based on the quantitative material, and further analysis will take place. Moreover, the relatively small sample size raises questions of representativeness and generalisability and precludes extensive statistical analysis. Nonetheless, the frequencies outlined in this paper reconfirm previous reports of the high frequency of care leavers who have experienced homelessness. Almost all participants, ninety-five percent, have at some point been homeless and sixty-one percent are currently homeless in accordance with the cultural definition. While the cultural definition of homelessness offers insight into the tiers and circumstances of homeless people, the preliminary analysis of this research suggest that it does not sufficiently encapsulate the different circumstances and experiences of young care leavers. Further discussion of the most effective ways of categorizing and explaining homelessness among care leavers remains a task for the final stages of this research project. This paper has also reconfirmed previous research which has linked poor outcomes among care leavers to the care leavers' age when exiting care; number of placements in care; and exit planning. Further analysis of the quantitative material presented in this paper, together with contextualization with the qualitative material, will take place for the final report, due in 2010.

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