The school to work transition for young people in state care: Perspectives from young people, carers and professionals

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Abstract

Workforce participation has many positive effects on quality of life. However, as young people in care have generally below-average levels of educational participation and attainment, they may be ill-equipped for the transition to further education and work. A mixed-method study conducted in Australia about career development for young people in care investigated how this population develops ideas about future work: the social and cognitive variables that influence career decision-making; practices for preparing young people in care for the transition to work or further education; and factors that support or impede the transition. Findings from the qualitative study are reported in this paper. Interview data were obtained from the multiple perspectives of young people in care, foster carers, caseworkers and school personnel. The overall picture was one of young people in care lacking the encouragement, resources and capacity to realistically plan for the job they want. Specific interventions are required to enhance career development and employment outcomes for this population.

Participation in the workforce yields both individual and societal benefits, including financial independence, social networks, self esteem and community involvement. For young people to be adequately prepared for work, intervention is required during the compulsory school years to develop occupational knowledge, life skills, career maturity and career planning skills (Creed, Muller, & Patton, 2003). Most children have access to such intervention through a consistent home and school environment. Parents, family, friendship networks and educational personnel provide social, emotional, practical and financial assistance. The school system requires students to make some career-related decisions, such as choosing subjects or educational streams, at regular intervals during the secondary school years. Schooling also helps students to cultivate ideas about their skills, talents and capacities. However, the development of further education and work aspirations for young people in state care is more complex.

In Australia, there are over 34,000 young people in out-of-homecare (predominantly foster and kinship care) at any one time, and approximately 2,400 young people aged 15 to 17 years exit the care system each year (Australian Institute of Health and Welfare, 2010). While some care leavers cope well, many in this population are ill-equipped to participate in the workforce. They are often early school leavers who have low levels of educational achievement, which has ramifications for future employment and its associated benefits (Cashmore, Paxman & Townsend, 2007; Courtney, 2008). This has been linked to proximal and distal factors including the structural influences of social class (Berridge, 2007), ethnicity and gender, maltreatment and trauma, high rates of school suspensions and exclusions, frequent placement moves with consequent school disruptions, lack of coordination between educational and child protection personnel, lack of attention to

educational needs by professionals, and low expectations held by foster carers, caseworkers and teachers (Francis, 2000; Goddard, 2000; Jackson & Ajayi, 2007; Stein, 1994, Wise et al., 2010).

The career focus and development of young people in care may be influenced by pre-care factors such as poverty, family disadvantage and low parental support (Berridge, 2007) combined with in-care and post-care experiences. Dixon (2007) found that in-care events and experiences, including engaging in risky behaviours such as substance use and offending, placement changes, school disruptions, and age at leaving care, all influenced engagement in education, training and employment.

Post-care, inadequate access to housing and support networks also mitigated against sustaining participation in work or further education. Young people themselves, as a consequence of their experiences, may have low aspirations to achieve academically and occupationally (Farruggia, Greeleerger, Chen, & Heckhausen, 2006; Iwaniec, Larkin, & Higgins, 2006). Further, there is evidence of negative long-term outcomes, such as higher rates of unemployment, homelessness, persistent mental illness or substance use, and poorer social adjustment, for care leavers (Courtney & Dworsky, 2006; Lenz-Rashid, 2006; Mendes & Moslehuddin, 2004; Wade & Dixon 2006).

Every step taken towards better education and employment outcomes can lead to improvements in almost every aspect of adult life: income, housing, mental and physical health, family and parenting, resilience and self efficacy (Schuller et al., 2001). While there is research relating to educational participation and attainment for children in care, and employment pathways and outcomes for care leavers, there has been little research investigating the process of career development and decision-making for children in care. Most children receive encouragement to explore career

ideas from a young age, and start to make decisions about education and work directions in their early teenage years. The current study sought to contribute to understandings about the school to work transition for the in-care population by examining aspects of career development.

The study was guided by social cognitive career theory (Lent, Brown, & Hackett, 1996), which is based on Bandura's (1986) personal agency theory. Social cognitive career theory proposes that there are three central variables driving personal career-related actions: (a) self-efficacy (can I do this task or activity?); (b) career goals or aspirations (determination to undertake a course of action); and (c) outcome expectations (the expected consequences of attempting a task or activity), all of which have been described as the "building blocks" of career development (Lent et al., 1996). Relevant to the current study, the theory recognises that contextual or environmental influences, such as gender, ethnicity and culture, health status, personal resources, relationships and social and economic conditions can facilitate or constrain the development of career interests and decisions. Considerable support exists in the literature for the main proposals of social cognitive career theory, as well as for the importance of environmental influences (Lent, 2005). The theory is widely used, welldeveloped and tested in the adolescent career development field. It is also multifaceted, which facilitates consideration of both the personal and environmental influences that potentially impact upon the career development of young people in care.

Method

The findings reported in this paper are drawn from a larger, mixed-method (survey and interview), longitudinal research project, which was designed to

comprehensively investigate the career development of young people in care. The quantitative data from this project, which compared a group of 202 children in care with a matched sample of 202 not-in-care on a range of career-related variables, have already been reported (author reference). This study found no significant differences between young people in care and not-in-care on career variables of career goals and outcome expectations, career exploration and career self-efficacy. There were significant differences between the young people in-care and not-in-care on a number of other variables: the in-care group had lower occupational and educational aspirations, believed their parents to have lower aspirations for them, engaged in less career planning, perceived more career barriers, and had a less stable and less positive relationship with their schools. The current paper reports on the interview data from this project. These data contribute to a broader understanding of the career development of children in care, one that is informed from the perspective of multiple stakeholders, including the young people themselves, their carers, caseworkers and school personnel. The study adds to the understandings gained from the quantitative data by going beyond what young people think about their work futures, to understanding how their experiences have influenced their career ideas, and the roles of key adults in their career development. The analysis of the qualitative data involved identifying major themes about how career ideas were formed, who influenced career thinking, what experiences were influential, and what helped and hindered their career development. The data obtained from adult participants provided insights into how these individuals saw their role, how they assisted with the school to work transition, and how they understood the career development needs of young people in care.

Participants

We conducted interviews with 65 young people in care (age range 14 to 19 years; 66% female), 27 carers (age range 30 to 50+ years; 74% female), 14 caseworkers (6 aged less than 30 years, 5 aged 30 - 50 years, and 3 aged over 50 years; 93% female), and 21 school guidance officers (age range 30 to 50+; 71% female).

In-care children. At the beginning of the project, surveys were sent to 1456 children, which constituted all young people aged over 13 years who were subject to child protection orders in Queensland, Australia. Surveys were mailed direct to children using addresses provided by the government agency responsible for them, and distributed to social services agencies that were known to have contact with them. Courtesy letters were sent to the children's carers informing them of the study. Two hundred and sixty-five children returned a survey (approximate response rate = 18.2%), and all of these children were invited to participate in an interview. This resulted in 65 children agreeing to be interviewed (approximate response rate = 24.5%).

Adult participants. Letters about the study were sent to foster and kinship carers of children within the age range. It was also publicised through foster care networks. Carers were then telephoned and invited to participate in an interview, resulting in a sample of 27 carers. Information about the study was sent for the attention of caseworkers at the child protection statutory agency, presentations were made at staff meetings at local offices, and advice regarding the project was distributed state wide via the agency intranet. This procedure resulted in 14 child protection caseworkers volunteering to be interviewed. Caseworkers are professional staff holding qualifications in social work, psychology or other human services. Information also was distributed to guidance officers inviting participation in the

study. This resulted in 21 guidance officers being interviewed. Guidance officers have teaching or psychology qualifications and provide guidance and counselling to students, and may service multiple schools within a district.

Procedure

The conduct of the research was approved by the university human research ethics committee and by the relevant government agencies. All participants provided written, informed consent. Young people in care who were interviewed received a small financial sum for their participation.

The interviews were conducted in order to obtain a depth of understanding about the processes and factors considered relevant to young people in care developing ideas and expectations about their futures. In social cognitive career theory, exploring potential career options and planning for the future reflect actions taken to progress life and career goals (Lent et al., 1996). We were interested also in contextual influences, considered to be the supports and barriers within the environment that can make career progress easy or difficult, given differences in the life experiences of young people in care compared to their not-in-care peers. Real or perceived supports and barriers are considered to be important determinants in the career choice process (Lent, 2005).

Results

Most of the young people who were interviewed aspired to getting a 'good job' and had several ideas about their ideal job. There were occupational goals related to the ambition to help people (nurse, child care worker, teacher, youth worker), the desire for authority and respect (police officer) and mateship (defence force). Fifty-six

were interested in a trade or profession, seven nominated unskilled jobs, and two were uncertain about what job they wanted. There were various influences on job choices, including from carers, workers, teachers and the media. They saw getting a job as crucial not only to financial security but also to their life goals such as being in a stable relationship, having a family, and owning their own things. Some participants (n=15) expressed strongly that they did not want to be involved with the welfare system, and wanted to avoid mistakes they saw family members making: "I don't ever want to be a dole bludger" (young person #20045T1). They were concerned that being in care was a barrier to employment, "because a lot of people think that kids are in foster care because they can't be handled and they cause a lot of trouble" (young person #20150T1). Many (n=29) articulated the desire for stability and recognised that not being settled at home or school was an impediment to planning ahead. Although they had job goals, they tended to be much less clear about what was required to enter a particular job field. Lack of life and career planning was very evident, with 20 young people expressing a lot of uncertainty about the steps they needed to take to achieve their goals and live independently. They worried that they lacked the grades or the personal motivation to get into jobs they wanted. Others had concerns about where they would live and how they could support themselves, whereas some had a more general anxiety about the future: "Anything could happen. I don't know" (young person #20044T3).

Neither young people, nor caseworkersthemselves, saw caseworkers as a source of advice about further education and work futures. For 48 young people there was either no discussion about school and future job plans, or nil or irregular contact, with their caseworker. According to young people, caseworkers were too busy: "You never get to know them" (young person #20141T1), or they would only be involved if

there was problem: "They'd only come down if there was a problem with the carer or something like that otherwise they just didn't really get involved with us" (young person #30054T3). Likewise, caseworkers generally felt that career development was not within their remit (only two said it was part of their work with young people). Ensuring stable placements, responding to problems that arise, and facilitating access to needed services were the priorities for their role. Most agreed that education and work were vitally important: "But in terms of the deliverable stuff, it always gets trumped by other things" (caseworker #19). Moreover, caseworkers said they lacked expertise and information about career development. Schools were seen as the major source of assistance for young people in developing work pathways. There was also considerable pessimism about the realistic prospects in adulthood for many young people raised in care: "In terms of the wider community the expectation is for you to leave school and get a job or go to further education. You know that's the expectation, but for most of the kids in care, particularly the kids with disabilities, it's just to get through day to day you know... and to have some level of... quality of life and role in the community but not, you know, to hold down a full time job" (caseworker #3). Seven caseworkers said that young people could succeed if more support was available, or if a young person was extraordinarily motivated to overcome barriers.

Caseworkers regarded the barriers to success as personal issues, such as unresolved trauma, management of anger and emotions, attachment disorders, intellectual and behavioural deficits, mental health problems and drug use. Several emphasised the need for young people to be self-motivated and responsible.

Contextual factors were also identified, including lack of positive role models, and lack of post-care supports, including accommodation, social support, and money.

They considered their role was primarily to secure a stable placement, and also to negotiate approvals for expenditure for educational support and the transition from care. In the main, they did not conceptualise their role as providing personal support and guidance to children in care (this was seen as the carer's role). Their role was indirect: locating a stable placement with a good carer to optimise chances for a good future. But one young person said that caseworkers should have a broader brief, talk to them more about jobs, and encourage them more: "Give them an open mind that they can get into anything that they want if they really tried and, you know, stuff like that" (young person #20186T2).

If personal support was provided, it was most likely from a carer. Young people who had a positive relationship with a carer (n=18) valued the practical and emotional support and career role modelling they provided. Emotional support included messages of encouragement, such as "do everything to the best of your ability, finish what you start" (young person #20015T3), "never give up" (young person #20045T3), "if you put your mind to it you can do whatever you want to" (young person #20061T3), "keep going to school and apply for casual jobs" (young person #20001T3). Young people could identify the practical supports they obtained from carers in the process of developing career interests, such as monitoring school progress, assistance with homework, attendance at parent-teacher meetings and subject selection. Carers facilitated work experience or casual jobs for some young people. For one young woman who was still in care and parenting her newborn, the most valuable practical support was the carer providing childcare while she undertook a vocational course. Carers themselves concentrated on practical matters. They identified administrative and bureaucratic processes that were inhibiting young people's transitions. This included failure of the agency to provide written consents

for school and extra curricular activities, birth certificates, tax file numbers, incomplete education plans, lack of funding for training or higher education, and referrals to adult supports, such as income and accommodation services, which had a significant effect on the capacity of young people to move forward and plan for a future career. They also regarded placement instability, infrequent and "mechanical" contact with caseworkers, and inexperienced caseworkers, as having a negative effect on young people's ability to achieve educational and career goals. Young people suggested the statutory agency could assist more by reducing the workload for caseworkers and providing financial support in-care and post-care with educational expenses, such as for tutoring, books, laptop computers and transport.

But many young people did not have a relationship with a carer or other adult whom they could rely upon. Twelve participants saw themselves as very much on their own in making their way in the world: "I don't need these people's help. I'll do it by myself, because no one's ever helping me, and I can never find help, so I'm like, stuff it, I'll just do it by myself' (young person #30051T3). Related to this was the desire to succeed, to go beyond the expectations of others, and to gain the praise and respect of others: "I think the general perception of everyone that's been in foster care is low, like low achievers, not going to get anywhere. Yet I never felt like that. I felt that I could get anywhere I wanted to and I have so far... I think I've been very independent as a result of being in foster care as well, and the independence has grown and grown, and I haven't had to rely on others" (young person #20048T1).

All participant groups recognised that unstable schooling was a barrier to career development. Schools were depicted as stressful places, in which children were bullied, not able to concentrate on their studies, or not able to manage rules and

regulations. Many young people had learning impairments or disabilities or behavioural problems of aggression and not socialising. Education Support Plans (ESPs) aim to address education-relatedneeds for children in care. There were participants in each group who were positive about the ESP because it was a mechanism to secure resources such as tutoring, counselling or computer aids. However, many young people were not aware they had an ESP, and some participants were critical of the focus of ESPs on behaviour management rather than on educational goals. The role of guidance officers is to assist students with educational, career, welfare, and personal development needs. In schools, they are expected to be the linchpin in the education planning process for children in care. Most guidance officers were positive about young people as individuals, but pessimistic about potential outcomes. Guidance officers said the pre-care and in-care experiences of children created difficulty at school. One spoke of a vicious cycle, whereby young people become angry at the lack of stability and trust in their lives, and acted out, which led to difficulty in placing, and, in turn, more anger and acting out. They recognised the importance of guidance from adults, but felt the lack of stability meant a lack of positive, long-term, trusting relationships and a sense of belonging: "They're just surviving, they're existing, they don't know what's ahead of them, they feel very insecure" (Guidance officer #10). They felt that factors such as the children's history of abuse or neglect, their family of origin, in-care status and experiences, adversarial relationships, reduced opportunities and feelings of powerlessness led to lowered expectations and aspirations. The practical barriers guidance officers identified included lack of finances, transport, physical resources, and lengthy administrative processes to obtain required approvals and finances. But they felt the main difficulty for the young people was not having someone to care about them. All Guidance

Officers expressed concern about the transition from care process and what would happen to these young people when they left care. They felt some foster carers did not care enough, and had low expectations, and they wanted child protection caseworkers to have more time to engage with the young people.

Discussion

The outcomes of the interviews are consistent with the social cognitive career theory propositions (Lent et al., 2000), that contextual influences, whether personal (e.g., lack of positive role models) or social (e.g., limited opportunities for skill development, cost of attending university), can constrain both the formulation and pursuit of career goals. The young people in care perceived that they faced barriers related to their in-care status and the lack of stability in their upbringing, indicating that they construed their circumstances as a potential barrier to later occupational and life achievement. They also perceived barriers such as a lack of interest by adults in their life, few supportive relationships, and doubts about their ability, despite acknowledgement by some of the valued support from their carers. These barriers were reported in the interviews irrespective of the young person's academic achievement, which is consistent with what we found in the larger study (author reference). The concepts of self-reliance and independence were evident in many interviews with young people who felt the care system had toughened them up. They said this had given them positive characteristics of self-reliance, determination and motivation to achieve beyond the expectations of others. These self-perceptions are valuable and can be a source of strength and resilience. But it is self-reliance by default, emanating from feelings that there is no-one else to rely upon. The impetus to self-reliance can also be negative if young people strive to do well, yet feel if they do

not succeed, then they only have themselves to blame because they were not motivated enough or smart enough.

Career aspirations reflect the question, "What do you want to be when you grow up?". They are useful predictors of educational and occupational choices, and are associated with future occupational achievement (Mau & Bikos, 2000, Rojewski, 2005). In our project, many young people expressed a desire to have a satisfying career, but had limited ideas about the range of jobs that might suit them or what was required to get those jobs. Many aspired to social type occupations, those which attract people with an interest in helping or teaching others. The preference for social occupations may be linked with the contact that children in care have with helping professionals; however, exposure to a more diverse range of occupations would facilitate more normative occupational aspirations. Occupational aspirations tend to reflect one's life and employment experiences and societal expectations (Gottfredson & Becker, 1981), and while this study cannot confirm that pre-care or in-care experiences have led to aspirations for certain types of jobs, it is plausible to suggest that the two are related. It was concerning that many young people in the study, even if they had clear work goals, had limited knowledge about what was required to enter their chosen occupation or what steps to take to find out. Career planning involves actions or behaviours that are set in train to meet set goals. Less planning implies giving less time and thought to future work possibilities, including less time and thought to choosing educational pathways, and not having clear plans about how and when to enter the labour market.

Results from the interviews are consistent with previous research regarding low expectations held for children in care by professionals involved in their lives

(Aldgate, 1994; Jackson & Ajayi, 2007). This is conceptualised as a contextual factor in social cognitive career theory. Both caseworkers and guidance officers were pessimistic about prospects for a successful school to work transition for young people in care. Their attention was on behavioural and psychological issues, rather than future planning. This may reflect the fact that their work is dominated by the children who are not settled in placements or at school. Unfortunately, this may mean that many children in care, those who have needs that are "under the radar" or not acute, are missing out on resources that can help them to achieve their goals. All participant groups in this study commented on how practice with young people in care is preoccupied with the here and now - problems, placement and finding appropriate services. On the other hand, the process of career development and preparing for the school to work transition is inherently future-oriented. It is about getting from where you are, to where you want to be: about future goals, opportunities, resources, life plans and outcomes.

Young people need help at all stages of the career development process: they need to be exposed to diverse experiences and people (for example, through hobbies, part-time jobs, sports) so they can begin to form interests and get ideas (*aspirations*); they need help with naming their skills and talents and matching these to possible work choices, setting goals and making sound choices (*expectations*); and they need to be encouraged so they develop the confidence to achieve goals (*self-efficacy*). This includes having access to resources, as some goals require financial assistance to pay for hobbies, tutors, materials or fees, or transport to and fro. These career development activities need to start in the pre-teen years and cannot wait until transition from care planning (typically from age 15 or 16 years in Australia). For older children and care leavers, attention to employment pathways in transition from

care planning is vital. This would include more targeted vocational and employment support services (Mendes, 2009), such as careers counselling, education scholarships, work experience placements, preparing job applications, developing interview skills, understanding workplace values, and support to find jobs and traineeships.

Applying social cognitive career theory to young people in care enhances understanding about the factors effecting career development for this group, and contributes ideas about possible interventions. These may be at the personal level (raising aspirations and helping to plan) and addressing care system barriers such as bureaucratic delays and lack of resources. As the adverse effects of maltreatment and the care experience have both psychological and social dimensions, a mix of therapeutic, practical and educational responses are likely to be required. Strategies are needed at both casework and system levels: practices and programs to help individual children to think about and achieve their goals, and policies and strategies to improve the chances of work success for all children in care. It must be acknowledged that young people in care face particular difficulties in becoming responsible and self-motivated, a task of adolescence that is surely more challenging for them than it is for their peers, given their care experiences. There appeared to be confusion amongst professionals in the study about whose responsibility it was to facilitate a positive career focus for young people in care. Caseworkers – the delegated guardians - have overall case management responsibility for children; yet, they acknowledge they lack expertise in the area of career development. Two remedies are possible here: resources and training for caseworkers, or bringing into the care system professionals who do have expertise in this field, such as educators and career advisors. Both strategies could be adopted. For example, agencies could develop career resources aimed at young people in care (there are many examples of

career activities, workbooks and websites for specific target groups); ensure the caseworker role encompasses a focus on future goals and outcomes; and provide for the expertise of career development professionals to be readily available to caseworkers on a consultancy basis. At a policy level, targeting school stability, measuring educational attainment, and raising expectations about further education and work outcomes would be a positive step. While there were young people in this study who did receive appropriate career development opportunities, it was not consistent, and there was no evidence of any concerted attention to this aspect of development.

Placement instability while in care has been identified as a factor that is significantly related to psychosocial well-being for children (e.g., Barber & Delfabbro, 2003; Pecora et al., 2006). All interviewees reinforced the difficulties caused by instability. Supportive carers clearly were a positive influence for some participants. However, it does not follow from this that the focus should only be upon achieving a settled placement, as if this is the sole key to improving outcomes. The concentration on where the child lives as the basic need to be resolved first is not a rationale to de-prioritise education, work and the child's post-care future. Many of young people interviewed in this study were not in stable placements, but they still had future work-related goals, and needed assistance to plan towards those goals. All of the domains of development are important, and while some needs may take precedence at a particular time, this is no justification for permanently creating a hierarchy of needs in which placement trumps everything else, every time. Orientation to education and future work is an extremely important part of nurturing the development of young people; it should not be relegated to second-order for children in care.

The outcomes and insights gained from interviewing these young people and their important adult supports need to be considered in the light of the limitations of the study. The children and adults who volunteered for the interviews may not be representative of all children in care, or all support adults. The young people in care who did not respond to our invitation for interview are likely to be less engaged with school and have less stable placements. Similarly, the carers and professionals who agreed to be interviewed may not be representative of the population of adults who support in-care children. We aimed for a diverse sample, but carers who were more articulate and felt more confident to be interviewed may be over-represented, and certainly, professionals who were interested in the school to work transition and who felt they had something to contribute may have been more likely to volunteer to be interviewed. Despite these limitations, the interview study gives a fuller understanding of the experiences of children in care, and clarifies the perspectives of carers and professional supports regarding their roles in assisting them to plan and prepare for their occupational life. Increased knowledge about the processes by which young people in care are prepared for the school to work transition, how they think about their work pathways, and the roles of various stakeholders can inform policy and practice development in child welfare and education agencies to better meet the career development needs of this population.

Conclusion

The implications of the research fall into four categories: raising the aspirations of young people in care to achieve a fulfilling career; improving their capacity to plan a career pathway and to overcome barriers; taking a longer-term and multidimensional approach to casework that is oriented to successful adult

functioning; and responding more comprehensively to both the social and psychological effects of the care experience. Enhancing the capacity for career and life planning must start in the early secondary school years, followed up with consideration of specific employment and training options in transition from care planning. More attention to adult outcomes in general, and career development in particular, will promote the capacity of young people in care to choose positive pathways, to be supported in those choices, and to experience the personal and social rewards of workforce participation.

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