Message from the Commissioner

It is my pleasure to present this report 2011 Views of Children and Young People in Foster Care Survey: Overview and selected findings based on the Commission’s fourth survey of children and young people in foster care in Queensland. This report provides positive feedback from children and young people about the foster care system while also pointing to areas for improvement.

The Views of Children and Young People in Foster Care Survey is part of the Commission’s Views of Children and Young People in Care Survey series (the Views Surveys) – an ongoing body of research that gathers the views of children and young people in foster care, residential care and youth detention. This research comprises the largest repeated cross-sectional longitudinal study of its kind involving the direct participation of children and young people in state care. The survey findings help the Commission to identify individual and systemic risks to children’s and young people’s safety, wellbeing and rights, as well as providing first-hand information on the availability and responsiveness of programs and services. The survey findings also help inform child protection and youth justice policy and practice decisions and contribute to a range of departmental performance indicators.

Alongside other monitoring and performance data, the views of children and young people, as expressed through these surveys, provide a critical perspective on the effectiveness of Queensland’s child protection and youth justice systems.

I would sincerely like to thank those who made this survey possible, in particular:

- the children and young people living in foster and kinship care who participated in the survey and shared their views and experiences
- foster carers, kinship carers, grandparent carers, and all other carers who supported the children and young people involved in the survey
- officers of the Departments of Communities, Child Safety and Disability Services, Education, Training and Employment, Justice and Attorney-General, and Queensland Health, and non-government service providers, including Foster Care Queensland who supported the conduct of the survey
- officers of the Commission who variously designed the study, helped administer the survey, analysed the data, prepared the report, and assisted with the publishing process.

I encourage you to read this report and those that follow. I trust that the reports will provide a rich source of information on how we might improve the lives of children and young people in care.

Elizabeth Fraser
Commissioner for Children and Young People and Child Guardian

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Introduction

This report overviews the purpose, scope, design and administration of the Commission’s fourth Views of Children and Young People in Foster Care Survey, conducted across Queensland in 2011. It presents findings about the characteristics, circumstances and self-identified needs of the children and young people who participated in the survey and their responses to a selection of questions relevant to the performance of the Queensland child protection system.

The findings provide some positive feedback from children and young people in foster care on how the system is operating. For instance, almost all children and young people report:

- feeling safe in their current placement
- being treated well by their carer, and
- being listened to by their carer.

On the other hand, findings that raise concerns include:

- one fifth of children and young people report having more than three placements during their time in care
- almost one third do not think they have a say in the decisions made about them
- almost one third report that decisions are not usually explained to them
- around four in ten report not being told by the department why they are in care
- almost half the children and one third of the young people want to see their CSO more often
- more than four in ten young people do not feel confident that when the department approves something it will actually happen
- less than half the young people report having a Case Plan, and
- just over half of 16 to 18 year-olds report having a Leaving Care Plan.

This report will be followed by a series of papers over the coming months that will examine in detail the views and experiences of children and young people on topics such as health and wellbeing and education.

The Views Surveys

The Views of Children and Young People in Foster Care Survey is part of the Commission’s Views of Children and Young People survey series (the Views Surveys) – an ongoing body of research that gathers the views and experiences of children and young people in foster care, residential care and youth detention. These surveys were established in response to the 2004 Crime and Misconduct Commission inquiry into the abuse of children in foster care to allow children and young people to make their own assessment of the quality of their care, to share their lived experience of care in their own words, and to have direct input into important areas of child protection policy and practice. They represent the largest longitudinal study of its kind involving the direct participation of children and young people in state care.

These surveys serve at least three important functions. Firstly, they serve as a mechanism for monitoring the safety and wellbeing of children and young people in state care. Public inquiries in Queensland have highlighted the considerable vulnerability of children and young people in the care of the state to abuse and/or neglect. These inquiries underscore the importance of having effective mechanisms for children and young people to communicate their needs and concerns and voice complaints about the services provided to them.

Secondly, they contribute to knowledge about the needs and circumstances of children and young people in state care and the extent to which their needs are being met. Such an evidence base is essential for addressing the personal and social disadvantages that often underpin children’s and young people’s entry into care.

Thirdly, they allow the Commission to fulfil its legislated responsibility to consult with, listen to, and seriously consider, the views of children in its decision making processes.

Foster care in Queensland

Foster care sits within a larger child protection system designed to investigate and intervene where children and young people do not have a parent able and willing to adequately care for them. There are a number of intervention options for children assessed to be in need of protection and priority is given to options that allow children and young people to remain with their families while support is provided to address child protection concerns. Where parents are not able or willing to work with the department to address immediate concerns, children and young people are placed away from home.

There are a variety of placement options for children requiring out-of-home care including foster care, kinship care, residential care, and independent living. Home-based foster care placements, including kinship care placements, are the preferred option for children and young people in the care of the state. At 30 June 2011, there were 6983 children and young people in home-based foster or kinship care in Queensland (Queensland Department of Communities, Child Safety and Disability Services 2012) accounting for 91.8% of all children and young people in out-of-home care.
Foster care aims to provide children and young people with a normal family environment. A major advantage of foster care is that children and young people are given an opportunity to form relationships with carers and other family members. These caring relationships are important for children’s and young people’s sense of wellbeing and development. At the same time children and young people are encouraged to maintain relationships with their family of origin to maintain a sense of attachment to family and personal and cultural identity and to facilitate family reunification where possible.

The role of the Commission
The Commission for Children and Young People and Child Guardian promotes and protects the rights, interests and wellbeing of children and young people in Queensland. This includes a special responsibility for children and young people in the child protection system.

In exercising this responsibility, the Commission undertakes a number of functions including the operation of a community visitor program. Community Visitors (CVs) regularly visit children and young people in state care to see that they are safe and receiving appropriate care and to advocate on their behalf.

In addition, the Commission operates a complaints resolution function that is able to address complaints relating to children and young people in the child protection system who are not receiving adequate services. Children and young people or people making complaints on their behalf can contact the Commission’s complaints team through their CVs or directly by telephone, email or SMS.

The Commission also takes a broader role of monitoring child protection at a systemic level. Information is gathered from a variety of sources including from CVs and complaints but also through reviews, audits, ongoing provision of administrative and performance data from the department and through research initiatives such as the Views Surveys. The Commission uses this information to work with the key stakeholders, including the department, to improve the way the child protection system operates.

Research design
This survey uses standardised self-report questionnaires to gather the views and experiences of cross-sections of children and young people in foster care and kinship care. It is normally conducted every two years using a largely common set of questions. This repeated cross-sectional longitudinal design allows changes in survey responses to be monitored over time. The survey is administered by the Commission’s Community Visitors (CVs) during their regular visits to children and young people.

The Commission’s fourth foster care survey was conducted between 1 April and 29 July 2011. Unless stated, the design for the 2011 survey was the same as previous surveys in 2006, 2007 and 2009. The primary exception was that the 2011 survey was administered over 4 months rather than the 3 months to accommodate a recent change in CV visiting schedules (see page 16).

Respondents
Children and young people who were living in foster and kinship care at the time of the survey period and who were visited by the Commission’s Community Visitors (CVs) were invited to participate. Questionnaires were also distributed to carers to complete on behalf of young children or those who, because of a disability, were unable to express an opinion. Participation was voluntary and respondents were assured that their identity will remain anonymous. For the purposes of the study, foster care placement options consisted of short- and long-term foster care, kinship care and specialist foster care.

Instruments
The survey questionnaires were originally constructed from a combination of sources, namely existing research in the field, particularly the seminal work by Cashmore and Paxman (1996), Delfabbro, Barber and Bentham (2002), and Barber and Delfabbro (2005) that explored the views of children in out-of-home care in South Australia. In addition, several government agencies, including the former Departments of Child Safety, Communities, Education, Training and the Arts, Housing, Justice and Attorney-General, and Disability Services Queensland, were consulted about the survey content. These agencies continue to play a role in the ongoing development of the instruments. The questionnaires were also informed by focus group discussions conducted by the Commission with groups of children and young people living in care.

The 2011 survey comprised five separate questionnaires each tailored to accommodate the different comprehension and literacy levels of the respondents:

- Questionnaire 1 focused on foster care and comprised 80 items. It was designed for young people aged 9 to 18 years. Depending on their abilities, young people could complete the questionnaire independently or with the assistance of their CV.
- Questionnaire 2 focused on foster care and comprised 52 items. It was designed for children aged 5 to 8 years. CVs were required to complete the questionnaire with the child.
• Questionnaire 3 focused on both foster care and the CVs and comprised 50 items. It was designed for carers to complete on behalf of young children less than 5 years of age and children and young people with a disability who are unable to express an opinion.
• Questionnaire 4 focused on CVs and comprised 17 items. Like questionnaire 1, it was designed for young people aged 9 to 18 years. Young people could complete the questionnaire independently or with the assistance of their carer.
• Questionnaire 5 focused on the CVs, comprised 15 items and was designed for children aged 5 to 8 years. Carers complete this questionnaire with the child.

Each questionnaire featured a mix of select response, rating scale and open-ended questions to collect information from respondents on their background characteristics, health and wellbeing, education experiences, placement histories and perceptions of current placement, as well as perceptions of CSOs, the child protection system in general, leaving care and their CV.

Since 2006, all questionnaires have featured a core set of items enabling trends in data to be monitored over time. However, to ensure that the surveys are responsive to emerging trends and issues, new questions are regularly added. For instance, in 2011, new questions included those which sought information on respondent’s self-esteem; enjoyment of school; aspirations to complete school; and participation in regular paid employment.

Procedure
Questionnaires for each young child, child and young person in care were distributed to all the Commission’s Community Visitors (CVs). CVs administered the questionnaires about foster care during their scheduled visits. In most cases, CVs assisted children and young people to complete these questionnaires. In some cases, young people chose to complete these questionnaires independently once the CVs had assisted with the completion of the demographic component. In order to ensure impartiality, the CV questionnaires were not administered by CVs. Instead these questionnaires were given to carers to complete with the children and young people.
Questionnaires completed during a visit were returned to the Commission by CVs. Those completed after visits were returned to the Commission in the reply-paid envelopes provided.

Analysis of data
Before the data analyses, quantitative data were screened for accuracy of data entry and missing values. These data were then coded and analysed using SPSS (Statistical Package for the Social Sciences) for Windows. Frequency and descriptive statistics were used to identify patterns or trends among responses.

Depending on the nature of the variables, inferential statistics using chi-square analyses, ANOVA, Kruskal–Wallace, or Mann–Whitney tests of significance were employed to identify significant differences in responses across the 2006, 2007, 2009, and 2011 datasets. An alpha level of 0.05 was used as the level for significance.

Responses to open-ended questions underwent thematic analyses that involved organising the various responses into topics or themes. As themes emerged during analysis, the data were organised categorically. These categories were reviewed repeatedly and reduced by grouping topics or themes that related to each other.

Findings
A total of 2754 respondents completed the three questionnaires on satisfaction with care. Of these questionnaires, 1180 were from young people, 829 from children and 745 from carers of young children. Previous total returns were 2727 in 2009, 1767 in 2007 and 1703 in 2006.

Respondents’ background characteristics
Table 1 shows the breakdown of survey returns according to Community Visitor zone. As can be seen, a majority of respondents are from the most densely populated zones of the state including Ipswich, Brisbane, the Gold and Sunshine Coasts, and Toowoomba.

Table 1. Breakdown of total survey returns by CV zone - total sample (n = 2754) (2011)

<table>
<thead>
<tr>
<th>Community Visitor Zone</th>
<th>Number and percentage of total sample</th>
</tr>
</thead>
<tbody>
<tr>
<td>Far Northern</td>
<td>240 (8.8%)</td>
</tr>
<tr>
<td>Northern</td>
<td>174 (6.4%)</td>
</tr>
<tr>
<td>Central North</td>
<td>140 (5.1%)</td>
</tr>
<tr>
<td>Central South</td>
<td>265 (9.7%)</td>
</tr>
<tr>
<td>Ipswich</td>
<td>320 (11.7%)</td>
</tr>
<tr>
<td>Toowoomba &amp; Western</td>
<td>394 (14.4%)</td>
</tr>
<tr>
<td>Brisbane North</td>
<td>155 (5.7%)</td>
</tr>
<tr>
<td>Sunshine Coast</td>
<td>154 (5.6%)</td>
</tr>
<tr>
<td>Brisbane South</td>
<td>160 (5.9%)</td>
</tr>
<tr>
<td>Gold Coast</td>
<td>310 (11.3%)</td>
</tr>
<tr>
<td>Moreton &amp; South Burnett</td>
<td>156 (5.7%)</td>
</tr>
<tr>
<td>Logan</td>
<td>148 (5.4%)</td>
</tr>
<tr>
<td>Brisbane West</td>
<td>119 (4.4%)</td>
</tr>
</tbody>
</table>

As can be seen in Table 2, the mean age for the total sample was 8 years 10 months and slightly more females than males participated.
Foster care was the most commonly reported placement type comprising 69.6% of the total sample. A further 28.2% reported being in kinship or relative care while the remaining 2.3% reported being in specialist foster care.

Disability rates were high with 16.8% of young people, 15.5% of children and 21.3% of young children reported to have some kind of disability. A wide range of disabilities was mentioned, most commonly ADHD, autistic spectrum disorder, Aspergers syndrome, intellectual impairment, and learning disorders.

Table 3 shows that, of the total sample, 62.4% reported being of Caucasian Australian background. More than one third reported identifying as Aboriginal, Torres Strait Islander or both Aboriginal and Torres Strait Islander, while 7.0% reported being from ‘other’ backgrounds. These respondents indicated that they are from countries such as Malaysia, China, the Philippines, the Republic of Congo, Sierra Leone, Brazil, Egypt, India, New Zealand, Samoa, Vietnam, Papua New Guinea, Fiji, and Sudan.

More than three quarters (75.2%) of the total sample reported having a carer of the same cultural background. Among those with Aboriginal and Torres Strait Islander backgrounds, 46.8% reported having a carer of the same cultural background.

**Table 2. Age, sex, care type and disability – young people, children, young children, total sample (2011)**

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Young people (9–18 years) n = 1180</th>
<th>Children (5–8 years) n = 829</th>
<th>Young children (0–4 years) n = 745</th>
<th>Total sample (0-18 years) N = 2754</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Age in years and months</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mean</td>
<td>12yrs 9mths</td>
<td>7yrs 8mths</td>
<td>3yrs 8mths</td>
<td>8yrs 10mths</td>
</tr>
<tr>
<td>Standard Deviation (SD)</td>
<td>2yrs 6mths</td>
<td>1yr 10mths</td>
<td>2yrs 6mths</td>
<td>4yrs 5mths</td>
</tr>
<tr>
<td>Median</td>
<td>12yrs</td>
<td>7yrs</td>
<td>3yrs</td>
<td>8yrs</td>
</tr>
<tr>
<td><strong>Sex</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>44.6%</td>
<td>49.2%</td>
<td>52.9%</td>
<td>48.2%</td>
</tr>
<tr>
<td>Female</td>
<td>55.4%</td>
<td>50.8%</td>
<td>47.1%</td>
<td>51.8%</td>
</tr>
<tr>
<td><strong>Type of care</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Foster care</td>
<td>70.8%</td>
<td>66.6%</td>
<td>70.8%</td>
<td>69.6%</td>
</tr>
<tr>
<td>Kinship or relative care</td>
<td>27.6%</td>
<td>32.0%</td>
<td>24.7%</td>
<td>28.2%</td>
</tr>
<tr>
<td>Specialist foster care</td>
<td>1.5%</td>
<td>1.4%</td>
<td>4.5%</td>
<td>2.3%</td>
</tr>
<tr>
<td><strong>Disability</strong></td>
<td>16.8%</td>
<td>15.5%</td>
<td>21.3%</td>
<td>17.9%</td>
</tr>
</tbody>
</table>

**Table 3. Cultural background – young people, children, young children, total sample (2011)**

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Young people (9–18 years) n = 1180</th>
<th>Children (5–8 years) n = 829</th>
<th>Young children (0–4 years) n = 745</th>
<th>Total sample (0-18 years) N = 2754</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Cultural background</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Caucasian Australian</td>
<td>63.3%</td>
<td>59.3%</td>
<td>65.3%</td>
<td>62.4%</td>
</tr>
<tr>
<td>Aboriginal</td>
<td>28.9%</td>
<td>32.4%</td>
<td>28.7%</td>
<td>29.7%</td>
</tr>
<tr>
<td>Torres Strait Islander</td>
<td>6.0%</td>
<td>5.1%</td>
<td>3.9%</td>
<td>5.3%</td>
</tr>
<tr>
<td>Both Aboriginal and Torres Strait Islander</td>
<td>4.1%</td>
<td>2.3%</td>
<td>2.4%</td>
<td>2.9%</td>
</tr>
<tr>
<td>Other</td>
<td>8.0%</td>
<td>4.9%</td>
<td>7.6%</td>
<td>7.0%</td>
</tr>
<tr>
<td><strong>Language at home English</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>English</td>
<td>95.5%</td>
<td>94.0%</td>
<td>95.3%</td>
<td>95.0%</td>
</tr>
<tr>
<td><strong>Carer cultural background is the same</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>All respondents</td>
<td>75.8%</td>
<td>75.3%</td>
<td>74.1%</td>
<td>75.2%</td>
</tr>
<tr>
<td>A&amp;TSI respondents</td>
<td>51.9%</td>
<td>46.0%</td>
<td>39.1%</td>
<td>46.8%</td>
</tr>
</tbody>
</table>

*As some respondents selected more than one option, the total exceeds 100%
Placement history

As shown in Table 4, responses from children, young people and carers reveal that the mean age at entry to care for the total sample was 4 years and 6 months.

The mean total length of time in care for the total sample was 4 years and 9 months, ranging from less than one year to more than 17 years.

The mean length of time that respondents had been in their current placement was 3 years and 3 months, also ranging from less than one year to more than 17 years.

Table 4. Placement history – total sample (2011)

<table>
<thead>
<tr>
<th></th>
<th>Mean (SD)</th>
<th>Median</th>
<th>Min - Max</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age at commencement of care</td>
<td>4y 6m</td>
<td>4y</td>
<td>&lt;1-16y</td>
</tr>
<tr>
<td>(3y 10m)</td>
<td>4y</td>
<td>&lt;1-16y</td>
<td></td>
</tr>
<tr>
<td>Length of current placement</td>
<td>3y 3m</td>
<td>2y</td>
<td>&lt;1-17y</td>
</tr>
<tr>
<td>(3y 3m)</td>
<td>2y</td>
<td>&lt;1-17y</td>
<td></td>
</tr>
<tr>
<td>Total placements</td>
<td>2.8 (3.1)</td>
<td>2</td>
<td>1-44</td>
</tr>
<tr>
<td>Total time in care</td>
<td>4y 9m</td>
<td>4y</td>
<td>&lt;1-17y</td>
</tr>
<tr>
<td>(3y 8m)</td>
<td>4y</td>
<td>&lt;1-17y</td>
<td></td>
</tr>
</tbody>
</table>

The average number of placements for the total sample was 2.8, with one in five (550 out of 2754) reporting to have had more than three placements during their time in care (see Figure 1).

Of the total sample, 81.4% reported never having returned home to their birth family, 12.2% reported having returned home only once, while 6.6% reported returning home more than once.

Figure 1. Number of placements – total sample (2011)

Since the survey commenced in 2006, findings on placement history have remained largely consistent. The exceptions are the significant increase, since 2007, in the average number of placements (up from 2.5 in 2007 to 2.8 in 2009 and 2011) and the significant decrease (from 7.7% in 2006 to 6.6% in 2011) in the number of respondents reporting multiple failed reunifications.

The remainder of this report focuses on findings related to children and young people.

Health

How healthy are you?

Young people were asked to rate themselves as ‘not at all healthy’, ‘not very healthy’, ‘pretty healthy’ or ‘very healthy’. As can be seen in Figure 2, 54.8% reported feeling very healthy and a further 42% reported feeling pretty healthy.

The proportion of young people rating themselves as very healthy has declined from 58.5% since this question was first asked in 2009. This decline is statistically significant.

Figure 2. Feel healthy – young people (2009, 2011)

When children were asked to respond yes or no to the question, “Are you healthy most of the time?”, 96.6% responded ‘yes’. This is consistent with the 96.3% who responded ‘yes’ in 2009.

Do you have any health problems that you are concerned about?

When asked if they have a health problem that they are concerned about, 8.5% of young people reported that they do (Figure 3). This represents a significant improvement since 2007 (10.8%) and 2009 (12.3%).

Comments from young people revealed that the most frequent problems related to ear, nose and throat, eyesight, respiratory and gastrointestinal problems.

Have you been able to see someone about these health problems?

The majority of young people (73.3%) who reported having health problems also reported having seen someone about these problems.

Figure 3 shows that proportion of young people reporting to have seen someone about their problems has improved considerably since the question was first asked in 2007. The difference is statistically significant.
Figure 3. Have a health problem – young people (2007, 2009, 2011)

Have you had a health check in the last year (e.g. by a doctor, child health nurse, or Indigenous health worker)?

Most young people (83.0%) reported having a health check in the past 12 months. This question was asked for the first time in 2011.

How often do you worry about things?

Around one third (31.2%) of young people reported that they worry about things all or most of the time, while 68.9% reported that they don't worry very often (57.5%) or never worry about things (11.4%). The proportion reporting to worry all or most of the time has declined from 36.6% in 2009, when this question was first asked. The difference is statistically significant.

When children were asked the question, "Do you worry a lot", 39.6% responded that they do. Although this proportion is less than the 44.5% of children who, in 2009, reported worrying a lot, the difference is not statistically significant.

What do you worry about most?

This open-ended question, new to the 2011 survey, provides insights into the worries that children and young people in care experience. Analyses of the 1057 valid comments revealed several distinct themes although the prevalence of these themes varied between children and young people.

The primary theme to emerge from the young peoples’ comments was the safety and wellbeing of family and friends. In order of frequency, other themes were, concerns relating to school; changing placements; missing family; safety; bullying and teasing; general everyday concerns; and the future.

The safety and wellbeing of family and/or friends was also the primary concern for children. However, rather than school, children were next most likely to express concerns about their own safety with many commenting on fears (such as strangers, sharks, spiders) and having bad dreams. The main themes and some examples of relevant comments from children and young people were:

- Worry about Mum because she smokes and takes drugs and may die early but I love her.
- Mum and Dad and my brother and pets.
- I worry about my baby brother at home.
- Illness in family and friends.
- About my Dad – if he is still alive.
- When Dad is in gaol I worry that he might not come out.
- Mum and Dad and what is happening to them.

Worries about school work, assignments, marks and tests:

- Starting a new school.
- My NAPLAN.
- Doing homework.
- Doing maths at school.
- Worry about whether I get an A or B, I like A+s.
- If I do well in school.
- Being behind at school.

Worries about changes to placements and having to leave their carer:

- Getting sent somewhere else.
- Mum taking me away.
- If I have to move placements as I don't want to go.
- Where will I live if Nan gets sick?
- I might get sent from this home to another home.
- Being with someone different.

Missing or wanting to return to family:

- Living the rest of my life without my real parents.
- Will I ever get to be with my Mum and when that will be?
- I just want to go back home.
- About Mummy and Daddy because I miss them a lot.
- My family. If I can see my family again.

Worries about safety, bullying, or teasing:

- Picked on by others at school.
- Parents finding me.
- Bad nightmares.
- Strangers.
- School. Sometimes I get teased by people who don't like me.
- Like I think Mum is coming to get me.
Education

According to the Department of Education, Training and Employment (DETE), all children on a child protection order granting custody or guardianship to Child Safety Services are entitled to an Education Support Plan (ESP). An ESP is a written document that identifies the educational goals for a child or young person in care and the strategies and resources necessary to achieve these goals. ESPs should be developed in collaboration with the child or young person and be reviewed at least annually. DETE has reported that at August 2010, 83.4% of students in out-of-home care had a completed ESP (Department of Education, Training and Employment, 2012).

Has an Education plan been developed for you because you are in care?

Just over half (53.2%) of the young people who participated in the current survey reported having an ESP, 34.1% reported not knowing if they had an ESP and the remaining 12.7% reported that they did not have an ESP. Figure 4 shows that the proportion of young people reporting to have an ESP has improved from 29% since the survey commenced in 2006. The increase is statistically significant.

Has your ESP been helpful to you?

Of those who reported having an ESP, 81.3% indicated that it had been helpful. This proportion has also improved significantly since these surveys commenced in 2006. At that time, only 45.0% of young people reported finding their ESP helpful (see Figure 4).


Do you have any problems at school that you haven’t been able to get help with? If yes, what sort of problems?

More than one quarter (25.6%) of young people reported having problems at school that they have been unable to get help with (see Figure 5). While this figure represents a significant improvement since 2009, it is considerably higher than the proportions of young people who reported having unresolved school problems in 2006 and 2007.

Figure 5. Unresolved problems at school – young people (2006, 2007, 2009, 2011)

Young people who reported having unresolved problems at school were also asked to identify from a list of options what those problems were. Figure 6 shows that unresolved problems most often related to schoolwork (49.5% of those with unresolved problems), bullying (40.4%) or problems with the young person’s behaviour (23.0%). A further 19.9% reported problems with teachers not listening to or understanding them and 8.0% reported not having the things needed for school.

As shown in Figure 6, the proportions of young people identifying schoolwork and behaviour as the source of their unresolved problems have declined since this information was first collected in the 2009 survey. However, only the decline in schoolwork is statistically significant.

Figure 6. Types of problems at school – young people (2009, 2011)

Children were also asked if they were having problems at school that they have been unable to get help with. More than one quarter (26.9%) reported that they did. As with the young people, this has improved significantly since 2009 when children were first asked the question. At that time, 33.8% reported having problems. Children’s reports, like those from young people, reveal that the most common unresolved problems were with schoolwork (43.6%), followed by bullying (33.6%),
problems with their behaviour (29.4%), problems with teachers (15.6%), and not having things needed for school (5.7%). These figures remain largely unchanged since 2009.

**Current placement**

*Do you feel safe here?*
Almost all young people (98.4%) reported feeling safe in their placement. This figure has remained largely unchanged since the surveys commenced in 2006 (see Figure 7). The proportion of children reporting to feel safe in their placement has also remained largely unchanged during that time - 2006 (97.6%), 2007 (98.2%), 2009 (97.5%) and 2011 (97.9%).

![Figure 7. Feel safe in placement – young people (2006, 2007, 2009, 2011)](image)

*Does your carer listen to you?*
The vast majority of young people (97.1%) reported that their carer listens to them all (67.3%) or most (29.8%) of the time. Only a small proportion indicated that their carer does not listen very often (2.8%), or never listens (0.1%). These figures have remained largely unchanged since the question was first asked in 2006. When children were asked to respond ‘yes’ or ‘no’ to the same question, 97.0% responded ‘yes’. This figure has also remained consistent since 2006.

*Does your carer treat you well?*
Almost all (99.1%) the young people also reported that they were being treated well by their carer. When children were asked a similar question, “Is your carer nice to you?”, 98.7% reported that they were. These figures have remained constant since 2006.

*Do you have someone to turn to for support?*
The vast majority of young people indicated that they have someone to turn to for support all (64.5%) or most (29.8%) of the time. Only 4.2% indicated that they did not have someone to turn to very often and 1.6% reported that they “never” have someone to turn to. This question was new to the 2011 survey.

When children were asked whether or not they have someone to turn to for support, 96.8% reported that they do.

*How would you rate your happiness in your placement?*
Young people were asked to rate their happiness with their placement on a scale from 1 (very unhappy) to 10 (very happy). Figure 8 shows that 74.8% rated their happiness at 9 or 10 (with a mean score of 8.9). This proportion is similar to 2007 and 2009 but higher than 2006 when 68.0% rated their happiness at 9 or 10 (with a mean score of 8.6).

![Figure 8. Rating of 9 or 10 for happiness in current placement – young people (2006, 2007, 2009, 2011)](image)

When children were asked whether or not they are ‘happy living here’, 97.1% reported that they are. This has remained constant since 2006.

*What is the best thing about living here?*
This open-ended question elicited 1890 comments from children and young people. Analyses of these comments revealed four broad themes. In order of frequency, these themes are ‘lifestyle and opportunities’ (such as going on holidays, having possessions, and own bedroom, having nice food, pets and going to school); ‘relationship with or qualities of the carer’ (such as feeling loved and protected and living with a nice carer); ‘being part of a family’; and ‘having basic needs met’ (such as having meals, a bed or a shower). Some examples of the comments from children and young people are:

**Lifestyle and opportunities:**
- We go fishing & camping & swimming shopping.
- Get to visit people, got friends.
- We have chooks, cows, budgies, flying fish & all the animals. Have a sister, dogs, playing on trampoline, pool, everything’s better now.
- Well I get most of the things I want and I get all of the things I need.
- We get delicious food. They reward us with treats when we are good.
• I get care, I get treated well, I have an education. I learn different things every day.
• We can do stuff like kids, not work all the time.
• Lots of things to do. Good lifestyle.

Relationships with or qualities of the carer:
• I’ve got all the support and help I need. They love me for who I am and are there for me through thick and thin.
• They look after me & care about me & treat me like a human.
• Cuddles and hugs when I am sad.
• I have never felt more loved. We have lots of support, lots of love and an excellent brother.
• They love you no matter what and will always want the best for you.

Feeling part of a family
• I get treated as a family member. Call [carers] mum & dad & all kids as brothers & sisters.
• I have my twin sister here and older sister. We have a pool and lots of toys. I get my own room.
• They treat me like family and teach me how to look after myself and good manners.
• I feel lucky that I have a family.
• I am a big priority in the family.

Having basic needs met:
• That I can eat and got a shower. That I have my own room, bed and roof over my head.
• That I don’t get junk. That I am safe here and the house is clean and not dirty. That I have good teeth.
• Having a good roof over me.
• Get education and food.

Child Safety Officers

Do you know the name of your current CSO?
Of the 98.0% of young people who reported having a CSO, 84.1% also reported knowing their name. This proportion has remained largely unchanged since 2009 (84.9%) but has improved significantly since 2007 (78.1%) and 2006 (75.1%).

Children were also asked if they know their CSO’s name. Of the 99.4% of children who reported having a CSO, 63.8% also reported knowing their CSO’s name. While this figure has declined significantly since 2009 (69.3%), it remains an improvement since the first survey in 2006 (55.6%).

How often do you see your CSO?
Of the 90.0% of young people who had met their current CSO, 50.3% reported seeing them about once per month, 31.4% every three months, and 7.3% only once a year or less (see Figure 9).

Despite a statistically significant decline between current survey and the last survey in 2009, the proportion of young people reporting to see their CSO every month has generally increased since 2006. The surveys also show that since 2006, the proportion of young people reporting to see their CSO only once a year or less has more than halved.


When children were asked the simplified question, “Do you see your CSO much?”, 46.0% reported that they do. As with young people, the proportion of children reporting frequent contact with their CSO had been improving since 2006 (32.4%) and 2007 (38.4%), but has declined since the last survey in 2009 (51.6%). The decline is statistically significant.

How often do you want to see your CSO?
Just over half (52.3%) the young people indicated that they are happy with the frequency of contact they have with their CSO, almost one third (32.2%) would like to see their CSO more, and 15.5% would prefer to see them less. These figures have remained largely unchanged since 2006.

Children appear less satisfied than young people with how often they see their CSO. Only 39.6% indicated that they are happy with the frequency of contact they have with their CSO, 46.3% would like to see their CSO more often, and 14.1% would prefer to see them less. These figures have improved since 2006 when only 32.1% reported being happy with the frequency of contact they have with their CSO.

Can you contact your CSO when you need to?
Of the 67.1% of young people who indicated they had needed to contact their CSO, 36.3% reported being able to contact them all of the time, 35.3% most of the time, 15.9% not very often and 12.4% never. These figures are consistent with those reported in 2009 but represent a significant improvement since 2006. At that time, only 25.4% of young people reported being able to contact their CSO all of the time while 20.3% reported never being able to contact their CSO.
How helpful has your CSO been?
Young people were asked to rate the helpfulness of their CSO on a scale from 1 (very unhelpful) to 10 (very helpful). As seen in Figure 10, 49.2% of young people rated their CSO’s helpfulness as 9 or 10 (with a mean score of 7.4). There has been a significant increase in perceived helpfulness of CSOs since 2006 when only 34.8% of young people rated CSO helpfulness at 9 or 10 (with a mean score of 6.3).


When children were asked “Has your CSO helped you with anything?”, 59.1% indicated that they had. This is significantly less than the 67.6% in 2009 but consistent with reports from 2006 (61.2%) and 2007 (62.3%).

What things has your CSO helped you with?
A total of 624 young people and 231 children provided examples of the types of assistance that CSOs have been able to provide. Most comments could be grouped into one of eight themes:

Family contact or reunification:
- Getting to see my sister
- Seeing Dad and Mum and Nanny.
- Trying to get me home.
- Helping me with getting my brother and sister over.
- Not having to see my mother.

Listening, talking or dealing with anger:
- Able to talk to him about anything.
- Helping me with my family and my relationship with them.
- If I’m sad she can help me feel better.
- When my Mum said that I could live with her, I was worried. The CSO explained that I didn’t have to. She sticks up for me and listens to me.

School, education, training:
- If I’m having trouble at school she can help.
- Told the school when I got teased.
- Getting enrolled into my beauty course.

Sports, activities, camps, trips:
- Going on a horse riding camp.
- Basketball youth group trip to NZ last year.
- Holidays. Going to NSW with the foster family.

Placement, guardianship, /kinship, or stability issues:
- Getting me out of a bad family to a good family.
- To go ahead with guardianship and change names.
- Nothing really only getting me this awesome placement.

Acquisition of things or personal possessions:
- She got me a computer. She organised a washing machine for us after the flood.
- Computer and beds.
- Buy things such as clothes and toys.

Health issue, medical appointments or counselling:
- Speech therapy, occupational therapy. I liked to those things and want to do it again.
- Take me to the doctor.
- Health passport.

Following up on departmental issues:
- Transition from care and organising all of the funding to be approved by the government and also being supportive of us.
- Implementing my case plan.
- Telling us we’re aloud [sic] to have a sleepover.

Support from the Department
According to the Department of Communities, Child Safety and Disability Services, all children subject to an ongoing intervention by way of an Intervention with Parental Agreement or a Child Protection Order should have a current case plan. A case plan is a written document that explains why a child is in need of protection, the goals of the intervention and the outcomes and actions necessary to achieve the goals. It should provide a clear statement about the roles and responsibilities of all participants in addressing the child’s care and protection needs. Case plans are to be reviewed at least every 6 months with the process involving the child, their family and other significant people. The Department’s figures state, that at 30 June 2011, 81.8% of those subject to an intervention (including placement in residential care) had a current case plan (Department of Communities, Child Safety and Disability Services, 2012)

Do you have a case plan?
Less than half (46.2%) of the young people surveyed reported having a case plan, 46.9% reported not knowing if they had a case plan and 6.9% reported not having a case plan. As Figure 11 shows this is significantly more than in 2006.
(26.3%) and 2007 (39.9%) but significantly less than in 2009 (63.1%).

**Do you know what’s in your case plan?**
Of the 46.2% of young people who indicated that they had a case plan, 53.8% reported knowing what was in the plan. This compares with only 18.2% in 2006, 26.9% in 2007, and 42.1% in 2009 (see Figure 11).

**Figure 11. Have a case plan, know what's in it – young people (2006, 2007, 2009, 2011)**

Do people explain decisions made about you?
Responses from young people suggest that more often than not, decisions are explained to them. As can be seen in Figure 12, more than two thirds (67.6%) indicated that decisions are explained to them all (29.1%) or most (38.5%) of the time. The remaining 32.4% indicated that decisions are not often (22.2%) or never (10.2%) explained. Figure 11 also shows that the proportion of young people reporting that decisions are usually explained to them has increased since the surveys began in 2006.

When children were asked whether or not decisions are explained to them, 68.4% indicated that they are. These results have remained consistent since 2006.

**Do you get to have a say about what happens to you?**
When asked how often they get to have a say about what happens to them, 68.5% of young people reported having a say most or all of the time, while 31.5% indicated that they never have a say or do not have a say very often. Figure 12 shows the proportion of young people reporting to have a say has fluctuated since the surveys commenced. Overall, however, the proportion has increased significantly from 46.9% in 2006.

When children were asked whether or not they have a say in what happens to them, 61.8% reported that they do. This is a significant improvement from 53.1% in 2006.

**Do people listen to what you want?**
The majority (86.9%) of young people reported that they are listened to most (55.7%) or all (31.2%) of the time, while 13.1% indicated that they are not very often (11.5%) or never listened to (1.6%). Figure 13 shows that the proportion of young people reporting that they are listened to most or all of the time has increased since 2006 (75.4%) and remained reasonably stable in the last two surveys.


When children were asked whether or not people listen to what they want, the majority (85.9%) reported that they are. This has remained consistent since the surveys commenced in 2006.

**Has someone from the department explained why you came into care?**
In 2011, 60.5% of young people reported that someone from the department had explained to them why they came into care. In previous years, young people had been asked “Has anyone explained to you why you came into care?” Due to the change in question wording, comparisons with previous years are not valid. When children were asked if anyone had explained why they came into care, around half (53.4%) reported that they had.
A total of 212 young people commented in relation to this question. Of these, 47 mentioned being unsure if they had been told or explained that they were too young at the time to understand and 37 claimed that they ‘already knew’, or had ‘figured it out’ themselves. Other young people commented that they ‘still don’t know’ and ‘would like to be told’ or that they had only been given ‘bits and pieces’ of information. Many of the remaining comments focused on who had told them the reason they came into care. Most often, this was their carer or a relative. Other young people commented on the reason they were in care. One young person also commented, I made the choice to come into care, while another explained I don’t really want to know at the moment.

Some examples of young people’s comments are:

Explanation given:
- Because they were mean (mum and her boyfriend).
- Dad is not looking after us properly.
- I was treated badly by my family.
- Mum [carer] has said the parents didn’t know how to look after me.
- Because it wasn’t safe.
- Because my mum was unstable.

Unsure/don’t know:
- They won’t tell me.
- Vaguely but not a lot of detail.
- But not properly.

Too young at the time:
- Was a baby when came into care.

Figured it out:
- No but I think that I have worked it out by myself.
- I had to figure that out myself.
- I already new [sic] because I saw all the bad things.
- Bits & pieces from different people & put it together myself.

Need to know:
- I want to know badly.
- I want to get freedom of information due to I don’t get told anything.
- But I’m gonna find out!
- I want to and I have a right to know.

Source of explanation:
- Only my carer has explained why I am currently here.
- My sisters have explained it to me.

Are you worried that you will have to move to another place in the new few months?
Young people were asked to indicate if they are worried that they will have to change placements in the coming months. In response, 84.0% reported that they are not concerned while 16.0% indicated that they are. These figures represent a significant improvement since 2009 and 2007, when 19.6% and 19.9% expressed concern about having to change placements.

When the Department says you can do something, or have something, do you feel sure that it will happen?
More than half (57.2%) the young people reported feeling sure that when the department says they can do or have something, it will happen. Figure 14 shows that, since the surveys commenced in 2006, there has been a consistent increase in young people’s perceptions that the department will follow through on its promises. At that time, the proportion was only 41.1%.

Are you better or worse off since coming into care?
The vast majority (89.9%) of young people indicated that they feel better off since coming into care while 10.1% feel they are worse off. These figures have been relatively stable since 2006. A similar proportion of children (88.4%) reported that they are better off since coming into care. This figure is consistent with previous year’s surveys.

Comments from 441 children and young people provided insights into why they feel better or worse off. Examples of the comments are:

Better off:
- Carers look after me and love me.
- Much better and happier and good.
- Clean room, eat with table manners, dress neatly in public, personal hygiene.
- I am safe and not hungry.
- Better opportunities, guidance and support.
- My real mum nearly let me drown and my arm broke.
• Amazing carer.
• Dad didn’t treat us very well.
• I love being in care. Although it can be tough, it’s so much better for my life.

Worse off:
• It is sad when you lose your mummy & daddy.
• Only because I want to live with mum.
• Cause people at school are mean to me.
• Can’t speak my language. Away from Mum.

Comments from some reflected their mixed feelings about coming into care. For instance:
• I don’t really know I was sad to leave my dad.
• Better, for education, feel safer, worse because you don’t like explaining that you are in care or thinking about why.
• In between. Good and bad things.

If you are an Aboriginal and/or Torres Strait Islander, do you have a cultural plan?
Cultural Support plans are developed for Aboriginal and/or Torres Strait Islander children and young people who are subject to an ongoing intervention. Cultural support plans aim to keep children connected to their culture, families and communities regardless of their placement situation and are a key part of the case planning process. Departmental figures state that, at 30 June 2011, 80.6% of Indigenous children had a cultural plan on their record (Department of Communities, Child Safety and Disability Services, 2012).

Of the young people identifying as Aboriginal and/or Torres Strait Islander, 21.2% indicated they had a cultural plan. Figure 11 shows that those with a carer of the same cultural background were significantly more likely (26.9%) to report having a cultural plan than those with a carer of a different cultural background (13.8%). This question was first asked in the 2011 survey.

If you are an Aboriginal and/or Torres Strait Islander, do you feel that you are in touch with your community?
Young people of Aboriginal and/or Torres Strait Islander background were also asked if they feel that they are in touch with their community. Of this group, 69.6% indicated that they do.

This is similar to the 71.3% who, in 2009, reported feeling in touch with their community but it is significantly higher than in 2007 when the question was first asked. At this time, only 63.0% of Aboriginal and/or Torres Strait Islander young people reported feeling in touch with their community. Figure 15 shows that those with a carer of the same cultural background were significantly more likely (80.3%) to report feeling in touch with their community than those with a carer of a different cultural background (57.5%).

Leaving Care
According to the Department of Communities, Child Safety and Disability Services, transition for care planning occurs for young people aged 15 years and over who are subject to a child protection order granting custody or guardianship to the Chief Executive. Whereas at the time of the survey, transition from care had involved the development of discrete Leaving Care Plans, transition planning is now subsumed within the case plan document. The latest information from the department indicates that at 30 June 2011, transition for care planning had occurred for 63.9% of young people of which 89.6% had been involved in the planning (Department of Communities, Child Safety and Disability Services, 2012).

The survey asked 16 to 18 year-olds a series of questions about leaving care. Of the 140 eligible participants, 131 responded.

Has a leaving care plan been developed for you?
More than half (55.0%) the 16 to 18 year-olds responding to the survey reported having a leaving care plan, 27.5% reported not having a leaving care plan, and the remaining 17.6% reported not knowing if they had a leaving care plan.

As shown in Figure 16, the proportion of young people reporting to have a leaving care plan has been improving since the first survey in 2006. The proportions reporting to have a leaving care plan were 22.2% in the 2006 survey, 33.9% in 2007, and 37.2% in 2009.

If you have a plan, were you involved in its development?
Of the 55.0% of young people who reported having a leaving care plan, 94.5% reported being involved in its development.

Figure 16 shows, that since 2006, the proportion of young people reporting to be involved in the development of their leaving care plans has been consistently high.
Would you like to stay living with your foster care family after you have turned 18?

Almost two thirds (64.8%) of young people indicated that they would like to remain with their foster carer when they turn 18, around one fifth (21.6%) were undecided and the remaining 13.6% indicated that they would prefer not to. These figures are similar to those first reported in 2009, when 54.2% reported wanting to stay with their family, 28.3% were undecided and 17.5% indicated that they would prefer to leave.

Many of those who were undecided indicated that they hoped to be able to stay with their family at least until they found a job and somewhere else to live.

Thirty-eight young people commented further on the option of staying with their foster care family. Comments from those who expressed a preference for staying with the family include:

- Yes, yes, yes.
- I have spoken to my carers. They would love me to stay with them.
- I will still be in school.
- I'm not leaving home until I complete university or when I'm 21 years of age.
- I never want to leave here I feel loved and valued.
- Because they are my real family (nana).
- Absolutely!

Some of the young people wanting to stay with their family envisaged that it would only be for the short-term. For instance:

- Until I get my life on track & drivers [sic] license etc.
- Until I'm ready to go to my own place.
- Just for a little bit.
- At least till a placement is found by ds and my carers will still have input.

Some were uncertain about staying with the family:

- Depends if I go to university or not because I'd like to live in the city if I go to uni, to be close.
- I don't know probably yes I might live somewhere else but I am welcome to live here if I want to.
- I'm not sure. Will take things as they come.
- I know I can stay if I want to.
- I'm not sure if I can handle living with myself but I'm also not to [sic] sure.

Some were clear that they wanted to move on:

- Because I want to live independently and let the carers get on with their life.
- I want to be with my boyfriend.
- I would like to get my own place.
- Want to go my own way and get back with family.
- I want my independence. Looking at a semi independent programme.

Support from Community Visitors

The Commission’s Community Visitors make regular visits to children and young people in out-of-home care. Since the CV program commenced in 2004, these visits have occurred on a monthly basis. On 1 March 2010, the visiting policy was changed to allow a more flexible approach to the frequency of CV visits. Monthly visits still occur for some children and young people, including those who have been in a placement for less than 6 months, who are in unstable placements or are the subject of a serious or significant service delivery issue, or who are living in residential facilities and Aboriginal and Torres Strait Islander communities. However, depending on the needs of the child or young person, if that child or young person is considered to be in a stable, long term placement, visits can now occur bi-monthly or quarterly.

Questionnaires about CVs were offered to children and young people whom CVs visit. Carers were also asked to complete questionnaires on behalf of young children or those who, because of a disability, were unable to express an opinion. A total of 2037 questionnaires were received, 783 from young people, 509 from children and 745 from carers of young children. The following findings focus on reports from young people and children.

How often do you see your CV?

As anticipated, the new CV visiting policy has resulted in a significant decrease in the proportion of young people reporting that their CV visits monthly. Less than half (46.4%) of the young people report seeing their CV each month, compared with 95.2% in 2006, 91.8% in 2007 and 97.4% in 2009 when all visits were conducted monthly. The percentage of young people...
reporting that they see their CV each month closely aligns with the proportion of young people on a monthly visiting schedule (42%)².

The change in CV visiting schedules has had little impact on children’s perceptions of the frequency of their contact with CVs. When asked in 2011 if they ‘see their CV much’, 92.4% of children responded that they do. This compares to 87.6% in 2006, 89.4% in 2007, and 93.2% in 2009.

**How often do you want to see your CV?**
The majority of young people (73.6%) reported being satisfied with the frequency of contact they have with their CV. A further 18.4% reported wanting to see their CV more often and 8.1% wanted to see their CV less often. Figure 17 shows that since 2006, the proportion of young people reporting to be satisfied with how often they see their CV has ranged from 72.0% to 76.6%.

**How helpful has your CV been?**
Young people were asked to rate the helpfulness of their CV on a scale from 1 (very unhelpful) to 10 (very helpful). Figure 18 shows that 80.8% of young people rated their CVs’ helpfulness at 9 or 10 (with a mean score of 9.2). Despite the reduction in CV visits, there has been a significant increase in perceived helpfulness of CVs since 2006 when 70.0% of young people rated the helpfulness of their CV at 9 or 10 (with a mean score of 8.8)

**Figure 18. Rating for of 9 or 10 for helpfulness of CV – young people (2006, 2007, 2009 and 2011)**

The majority of children (68.1%) also reported being happy with the frequency of their CV visits, while 24.4% would like to see their CV more often and 7.5% would like to see their CV less often. The proportion of children wanting more contact with their CV has fluctuated over the years (21.0% in 2006, 29.9% 2007 and 25.3% in 2009).

**Are you able to contact your CV when you need to?**
Of the 58.9% of young people who reported needing to contact their CV in the past, 76.9% indicated that they had been able to contact them all of the time. This proportion represents a statistically significant decline since 2007 (82.3%) and 2009 (80.6%). The question was first asked in 2007.

**Can you talk to your CV about things that are important to you?**
A new question in the 2011 survey asked young people about the extent to which they can talk to their CV about things that are important to them. Almost all (94.8%) the young people reported that they can talk to their CV all of the time. When children were asked to respond ‘yes’ or ‘no’ to the question, 97.5% responded ‘yes’.

**What things has your CV helped with?**
Young people and children were asked to comment on how their CV has helped them. Thematic analysis of the 632 comments received revealed that the three most commonly noted types of assistance were ‘helping with family contact’; ‘listening, friendship, understanding and doing things together’; and ‘following up on departmental issues’.

Some examples of the comments made by children and young people are:
- **Helping with family contact:**
  - Contact with my real family.
  - When I didn't want to see Mum and letter to magistrate.
  - Seeing my brothers.
  - Got visits back with Mum and Dad. Got visits with my sister.
  - Getting to see Grandma.
  - Tells CSO I want less contact with Mum.

- **Listening, friendship, understanding and doing things together:**
  - She is my friend, she listens to me.
  - She helps me with my problems.
  - Making me feel better in foster care.
  - She has great advice on everything.
  - She listens to my bad jokes and gives me ideas for more.
  - Helps me feel important.
I'm allowed to ring her when I'm mad. Following up on departmental issues:
- Trying to sort out my case plan.
- Get things through the department.
- Contact with CSO when needed.
- Assessment for disability service.
- She made the department listen to my carer for some things I needed.
- Definitely [sic]. He is always chasing the department for anything outstanding.

Conclusions and future directions

This report highlights some key strengths of Queensland’s child protection system. Responses from children and young people indicate that the vast majority continue to feel safe, happy and well treated in their foster care placement. Findings from the survey also point to some important gains since the conduct of the last survey, most notably the significant reductions in the reporting of unresolved health problems, reporting of unresolved problems at school and sustained improvement in young people’s awareness of their Leaving Care Plans and Education Support Plans.

Notwithstanding, the survey findings also point to further improvements that need to be made in the best interests of children and young people in care. It is clear from the findings that many children and young people are experiencing numerous placement changes, share a variety of worries, are unaware of why they are in care, feel that decisions are not explained to them and would like more contact with their Child Safety Officer. It is also apparent that many young people do not have, or do not know if they have a cultural plan, case plan or leaving care plan, and do not have confidence in the department following through on its promises. A change to the visiting schedules of the Commission’s CVs has also seen an increase in the proportion of respondents who would like to see their CV more.

These are important issues that together, can have a detrimental impact on the lived experiences of children and young people in care. To this end, the Commission will continue to work closely with the Department of Communities, Child Safety and Disability Services and other government and non-government agencies to help children and young people in the child protection system enjoy the kinds of positive life circumstances that others experience.

In the coming months, the Commission will disseminate additional findings stemming from the Views Surveys through a range of short topic-focused reports. A young person’s edition of the report will also be distributed by CVs to all children and young people in care so that they can see that their views have the capacity to inform and influence the systems that care for them.

Further and more in-depth analyses of survey data will be undertaken to shed light on factors that promote positive outcomes for children and young people in care. Of particular interest are the interactions between respondent characteristics such as age at commencement of care, cultural background and placement history and a range of subjective measures such as health, worry, happiness in placement, difficulties at school, and involvement in decisions. Insights gained from such analyses will continue to inform the Commission’s monitoring and Community Visitor functions and contribute to the growing evidence base on the determinants of wellbeing for children and young people in care.

At a broader level, the Commission will continue to play an active role in helping to shape the future direction of out-of-home care in Australia. Central to this the Commission is contributing feedback to the development of National Standards for Out of Home Care which comprise part of the federal government’s National Framework for Protecting Australia’s Children 2009–2020. The Commission is also providing expertise on the scope, content and implementation of the National Survey of Children and Young People in Out of Home Care. Underpinning the Commission’s advice in relation to both these initiatives is the view that children’s and young people’s perspectives are essential if policies and programs are to respond effectively to their needs.

Notes

2. Data obtained from Jigsaw – Commission’s client management system
References

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