ABN: 51 989 937 672. NDIS ID: 4-4331-924

Community Living Association

Growing communities where all people are valued

5 Nundah Street, Nundah QLD 4012 Phone: 07 3266 5633 www.communityliving.org.au

Enquiries: reception@communityliving.org.au

9 March 2026

The Honourable Paul Anastassiou KC

Commissioner for the Queensland Child Safety Commission of Inquiry

By email: info@childsafetyinquiry.qld.gov.au

Dear Commissioner,

We are writing on behalf of Youth Advocacy Centre Inc, Youth Housing Project (YHP), Queensland Youth Housing Coalition Inc, Qshelter, Queensland Family and Child Commission, Office of the Aboriginal and Torres Strait Islander Children's Commissioner, Career Employment Australia Ltd, ZigZag, Peakcare, HBNC, and Professor Karen Healy, Associate Professor Kathy Ellem, and Associate Professor Jemma Venables from the University of Queensland School of Nursing, Midwifery and Social Work, and ourselves.

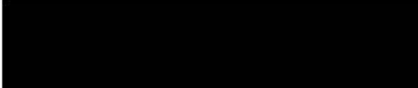
Our submission draws on findings from a Participatory Action Research (PAR) project undertaken between 2022–2023 by Community Connections, part of Community Living Association Inc., exploring the lived experiences of under 16s navigating homelessness and the systemic barriers they encounter. These young people remain largely invisible within policy, data collection, and the current service system, despite clear evidence of need.

Across young people, youth workers, and sector practitioners, one message was consistent: **Child Safety frequently does not respond to under 16's homelessness**, leaving young people without safe or viable pathways to support. In addition, young people and workers identified that Child Safety staff often hesitate to open interventions due to concerns that residential care may expose young people to further risk—an issue that highlights a critical failure in a system designed to protect children under 18.

This lack of system responsiveness forces young people into unsafe environments, unstable couch surfing arrangements, and, in some cases, high risk survival strategies such as riding public transport overnight, staying in emergency departments for shelter, or intentionally being criminalised to access the facilities within youth detention. Additionally, Community Living Association has been informed of high levels of homeless young people (both within and outside of the care of Child Safety) are entering into hospital systems and are staying for extended periods of time due to the absence of safe and suitable accommodation. The same situation exists within youth detention; whereby young people are unable to be released into community.

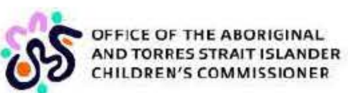
The evidence clearly demonstrates a significant gap: **there is currently no dedicated housing pathway for under 16s in Queensland**, with most homelessness and youth housing services restricted to those aged 16 and over. These findings are to no surprise to workers within the community sector, as is witnessed within our everyday work. We seek urgent consideration and response to the implications of these findings, to adequately support and respond to the needs of young people experiencing homelessness under 16 years. A copy of the PAR executive summary and support letters are attached to this document for your viewing.

Warm regards,



Tania Lawrie

CEO- Community Living Association Inc.



Community Living Association

Growing communities where all people are valued

ABN: 51 989 937 672. NDIS ID: 4-4331-924

5 Nundah Street, Nundah QLD 4012 Phone: 07 3266 5633 www.communityliving.org.au

Enquiries: reception@communityliving.org.au

Under-16s Experiences of Homelessness in Queensland

Based on Participatory Action Research (PAR) conducted by Community Connections

Purpose

This document summarises key insights from a Participatory Action Research (PAR) project investigating the experiences of young people under 16 years who experience homelessness in Queensland. The research responds to growing recognition that this cohort is largely invisible within policy, data collection, and service delivery systems, despite clear evidence of need.

In addition to highlighting the experiences of under 16s navigating homelessness in Queensland, this submission to the enquiry notes young people and workers identify little to no response from Child Safety. Additionally, Child Safety workers hesitation to offer a response with acknowledgement that experiences of young people in the care of Child Safety can often expose young people to additional unsafe/risk factors, poses a mass critical error in the intention of this system, to protect children under the age of 18 years.

Background

The 2021 Census recorded 5,708 young people aged 12–15 as homeless nationwide, though this figure is likely an undercount due to the transient nature of homelessness. In Brisbane, Brisbane Youth Service (BYS) recorded 52 under-16 presentations in 2022, an 11% rise from the year prior. Across the sector more broadly, under 16s help seeking and needs are under recorded due to not meeting service's eligibility.

Queensland's homelessness and youth housing systems generally accept clients from age 16, leaving under-16s dependent on Child Safety—which young people and workers consistently describe as unresponsive. Despite multiple mandatory reporting touchpoints, very few under-16s experiencing homelessness receive adequate statutory intervention. Young people experiencing homelessness before age 16 are therefore subject to multiple system gaps that heighten risk.

Methodology

Three PAR cycles were conducted, including:

- Youth digital survey (2022)
- Revised youth survey and youth practitioner survey (2023)
- Focus group at Red Cross Night Café (2023)

These methods captured lived experience, professional insight, and system-level barriers.

Key Findings

1. Reliance on Natural Supports

Under-16s most commonly turn to friends and family as their first support when leaving home. However, these supports often cannot sustain accommodation due to financial strain, overcrowding, conflict, risk exposure, or safety concerns. When these supports fail, young people typically move into public spaces or highly unstable environments.

2. Statutory Services Frequently Do Not Respond

Young people and youth workers described Child Safety as:

- unresponsive, slow, or inaccessible
- dismissive of adolescents' homelessness
- referring them to services ineligible for under-16s
- offering no practical assistance

This leaves young people without safe housing options despite Child Safety's legislative responsibility for all under-18s and despite numerous mandatory reporting pathways/points of disclosure, and were issues highlighted across surveys and the focus group.

3. Resorting to High-Risk Survival Strategies

Due to service ineligibility and lack of system responsiveness, young people reported:

- riding public transport all night
- staying in hospital emergency departments for shelter
- entering fights or crime intentionally to access watch houses or youth detention

These behaviours reflect systemic design failures, not youth choice.

4. Youth Workers Provide Essential Support but Are Under-Resourced

Youth workers are key to stabilising housing by assisting with:

- mediation with families and informal accommodation hosts
- crisis navigation and advocacy
- systems navigation (Centrelink, Child Safety)
- access to material supports and safety planning

These interventions often stabilised accommodation. However, years of sector funding cuts severely limit service capacity, availability, and early intervention.

5. No Housing Pathway Exists for Under-16s

Queensland currently offers no youth homelessness accommodation for this age group. Homelessness services housing support, youth foyers, and supported accommodation begin at 16 years. This forces young people into:

- unsafe homes
- couch surfing
- rough sleeping
- criminalisation

Despite government commitments to increasing homelessness responses, age-based exclusions persist.

Ruby's Reunification Program (for 12–15-year-olds) offers a promising early intervention model but requires family agreement, making it inaccessible for many young people fleeing unsafe environments or for whom family is unable/unwilling to participate. Additionally, the respite aspect of the model is short term and intermittent.

6. Young People Want Self-Determination

Young people want respect for their autonomy, support to make informed choices, and genuine participation in decisions about their housing, relationships, and safety. Yet statutory frameworks often undervalue their decision-making capacity, despite established Gillick competence frameworks.

Implications

- Under-16s are experiencing homelessness without an appropriate service system
- Under-16 homelessness is both widespread and structurally hidden.
- Statutory systems are not functioning as intended for this group.
- Child Safety's inconsistent responses leave young people in unsafe environments or returning to unsafe homes.
- Natural supports provide temporary stability but are rarely sustainable without additional intervention.
- Youth workers could prevent entrenched homelessness, but sector capacity is insufficient due to historic cuts to the community sector. Without intervention, young people develop entrenched homelessness trajectories before age 16.
- Young people repurpose public transport, emergency departments and justice systems for shelter, highlighting structural failures and creating long-term and high-cost impacts on systems in the absence of age-appropriate housing.

The evidence shows urgent need for policy and system redesign, not minor adjustments.

Priority Recommendations

1. Develop Dedicated Housing Responses for 12–15-Year-Olds

- Crisis and transitional accommodation designed specifically for under-16s
- Early intervention respite options that do not require parental participation

2. Reinvest in the Community Youth Sector

- Increase long-term funding to rebuild youth services and worker capacity to enable early intervention, outreach, and support for natural networks
- Resource services to deliver after-hours responses

3. Reform Child Safety Engagement

- Clear pathways and accountability for responding to under-16 homelessness
- Timely assessments and response timeframes with increased trauma-informed practice

- Embedding Gillick competence and active participation into decision-making processes

4. Improve Access to Financial Supports

- Centrelink pathways that do not require fixed addresses or extensive documentation, with simplified ID requirements
- Prevent Centrelink payment suspensions due to homelessness barriers
- Provide emergency material assistance (IDs, hygiene items, phones, clothing and food)

5. Strengthen Community Capacity

- Public education to counter deficit focused narratives (e.g. youth crime), reduce stigma and increase willingness to support young people
- Promote a more accurate narrative about youth behaviour and vulnerability
- More community-based, non-judgmental support environments

Conclusion

Young people under 16 experiencing homelessness in Queensland face significant systemic failures that result in unsafe housing, disengagement, and high-risk survival strategies. Despite strong reliance on natural supports, these are rarely sustainable without targeted service provision. Youth workers play a crucial role in stabilising housing and supporting self-determination, but severe under-resourcing limits their impact. The PAR research shows that early intervention, youth worker support, and safe housing options are essential, but the current system lacks the structures and resources required. Significant reform—including age-appropriate housing pathways, reinvestment in youth services, statutory system improvement, and supports for self-determination—is urgently needed to protect this vulnerable cohort and reduce long-term social and economic harm, as well as entrenched homelessness.

"A Little Can Mean a Lot"

246 Sandgate Road
ALBION QLD 4010
PO Box 1111 Lutwyche QLD 4030

Phone: (07) 3256 0241

ABN: 18 840 331 085

Youth Housing Project Assoc Inc.
246 Sandgate Road
Albion, Qld, 4010
19th of February 2026

Re: Letter of Support – Submission on Under-16 Homelessness and Child Safety System Responses

To whom it may concern,

Youth Housing Project is writing in support of the submission prepared by Community Living Association which highlights the urgent and unmet needs of young people under 16 who are experiencing homelessness in Queensland.

As an organisation working with young people and families, we share the concerns raised in this submission. Young people under 16 are navigating homelessness in environments that offer little to no appropriate service response. Young people and workers consistently describe that Child Safety often does not respond to under-16 homelessness, leaving young people without safe options or statutory intervention where it is required.

We also recognise the concern raised by both young people and workers that some Child Safety staff hesitate to intervene due to fears that residential care placements may expose young people to further risk. This reflects a significant systems issue: a protective framework that is unable to fulfil its purpose for children under 18 when homelessness occurs.

Youth Housing Project supports the call for:

- development of dedicated housing responses for 12–15-year-olds
- strengthened, timely and accountable Child Safety engagement
- increased resourcing and capacity within the youth and community sector
- improved cross-system collaboration to ensure young people can access safe, appropriate supports without barriers

The Youth Housing Project Association Inc. (YHP) is a Specialist Homelessness Service (SHS) which provides supported, independent accommodation to young people aged from 16 - 21 years who are homeless or at risk of homelessness. Parenting partners up to 25 years of age are also housed on acceptance of a case plan. YHP has been operating since 1987. YHP is also funded to provide transitional accommodation through its Community Housing Programs.

From our own experience, we observe that the Child Safety residential model often further traumatises and destabilises the young people and resorts to them self-placing and then reaching out to SHSs.

"A Little Can Mean a Lot"

246 Sandgate Road
ALBION QLD 4010
PO Box 1111 Lutwyche QLD 4030
Email: alison.cole@yhp.org.au
Phone: (07) 3256 0241
ABN: 18 840 331 085

In addition, in our experience the support model often doesn't set young people up for independence e.g. boundaries, skill-building.

The barrier to under 16s accessing SHSs is of course that we are not funded to support this age group and even if we were it would take additional resourcing and training for the workforce as under 16s are minors and there are different legal obligations etc. Youth SHSs are already supporting the young people that have potentially slipped through the gaps of Child Safety (almost all of Youth Housing Projects young people being housed and supported by us have come from unstable home/family environments/experienced family violence) or aged out of care.

Youth Housing Project have observed that young people who are in the older age group e.g. 15-17yo, often have slipped through the gaps of Child Safety but if flagged with Child Safety, they are reluctant to start an order with an older teenager. (This would potentially be due to limited resources to support young people who are aging out of the target group for Child Safety)

We believe the recommendations put forward in this submission are both necessary and urgent. Without structural reform, young people under 16 will continue to rely on unsafe environments, unstable informal supports, and high-risk survival strategies that place them at significant harm.

Youth Housing Project endorses the submission and urges Queensland Child Safety to act swiftly to ensure no young person under 16 is left without a safe place to live and appropriate support.

Thank you for considering this supporting statement.

Yours sincerely,

Alison Cole
CEO
Youth Housing Project Assoc Inc.

Queensland Youth Housing Coalition Inc.

E: admin@qyhc.org.au
Website: qyhc.org.au

18th February 2026

Re: Letter of Support – Community Living Association's Submission on Young People Under16 years of age experiencing Homelessness and Child Safety System Responses

To whom it may concern,

Queensland Youth Housing Coalition wholeheartedly supports the Community Living Association's submission which highlights the urgent and unmet needs of young people under 16 years of age who are experiencing homelessness in Queensland.

The Queensland Youth Housing Coalition Inc. (QYHC), established in 1984, is a not-for-profit state-wide peak body and coalition of organisations and individuals. We are a significant voice for and with young people impacted by homelessness and the various service systems they navigate. Our focus is on ending youth homelessness and addressing the underlying causes. The vision of the Queensland Youth Housing Coalition is: All young people safely housed.

QYHC is committed to improving the life opportunities and wellbeing of young people impacted by homelessness by working collaboratively across government and non-government organisations and the private sector to address homelessness, through the provision of housing, and addressing the multitude of intersecting issues that impact wellbeing such as: poverty, access to education, child protection, health services, income, safety, and social inclusion. QYHC acknowledges that connection and relationships are key for all young people and underpin our collective work. Young people under 16 years of age are a particularly vulnerable group of young people who fall through many systemic gaps and continue to be overlooked. Unfortunately, this all too often means they fall foul of those willing to take advantage of their vulnerability. This includes introducing them to criminal activity, sometimes via manipulation and sometimes for survival.

QYHC has been called on many occasions when all avenues for a homeless and at-risk young person under 16 years of age have been exhausted, in order to escalate the case. Over the past few years an increase in acceptance of young people being homeless at

such a young age seems to have become apparent. Some of these children are in care and are considered to be 'self-placing'. Others are asking to be in care and are being assessed as not needing support. A more robust and fulsome system of intake and assessment is needed, particularly for this young cohort. Dedicated services for 12–15-year-olds are key. QYHC's recent working group on this issue alongside conversations with risk management services noted that the development of these services needs to occur with consideration of the legal and insurance aspects of service delivery, acknowledging that government underwriting may be required. QYHC's findings were that these continue to be key blocks in offering services to this group of young people. As such these barriers need to be addressed to ensure appropriate responses for the most marginalised of homeless young people.

QYHC supports the call for:

- development of dedicated housing responses for 12–15-year-olds
- strengthened, timely and accountable Child Safety engagement
- increased resourcing and capacity within the youth and community sector
- improved cross-system collaboration to ensure young people can access safe, appropriate supports without barriers

The recommendations put forward in this submission are both necessary and urgent. Without structural reform, young people under 16 will continue to rely on unsafe environments, unstable informal supports, and high-risk survival strategies that place them at significant harm.

QYHC endorses the submission and urges Queensland Child Safety to act swiftly to ensure no young person under 16 is left without a safe place to live and appropriate support.

I thank you in advance of your consideration of this vital matter.

Yours sincerely,

Lorraine Dupree (she/her) | Executive Director
Queensland Youth Housing Coalition
W: qyhc.org.au

I acknowledge and pay my respects to the traditional owners and custodians of the land on which I work, walk and live.

24 February 2026

Q Shelter
Address: 515 Wickham Terrace (PO Box 214) Spring Hill Qld 4004
From: [redacted]
To: Queensland Child Safety Commission of Inquiry

Letter of Support
Submission on Under 16 Homelessness and Child Safety System Responses

To whom it may concern,

Q Shelter writes in support of the submission prepared by Community Living Association, highlighting the urgent and unmet needs of young people under 16 experiencing homelessness in Queensland.

Q Shelter is Queensland's peak body working to address housing need and homelessness. We envision a future in which every Queenslander has a safe, affordable and accessible place to call home. Since 1993, we have worked to strengthen housing system capacity and influence policy, investment and service integration to deliver effective and sustainable solutions. We engage across all levels of government and collaborate with the community services, public and private sectors to advance reforms grounded in evidence and implementation capability.

Without early intervention, homelessness in childhood can become entrenched, increasing the likelihood of repeat homelessness, justice system involvement, and long-term disadvantage. Preventing homelessness before it occurs, and responding swiftly when it first presents, is fundamentally about safeguarding children's safety, stability and opportunity to thrive.

As a peak body representing frontline services working with young people and families, we share the concerns raised in this submission. Young people under 16 are navigating homelessness in environments where there is often no clear, consistent or developmentally appropriate response. Services report that Child Safety engagement can be inconsistent when homelessness is the presenting issue, leaving some young people without safe accommodation or statutory intervention where it may be warranted.

We also acknowledge concerns raised by young people and practitioners that hesitation to intervene may reflect broader systemic pressures, including limitations within residential care settings. This points to a structural gap: a child protection and housing system that is not sufficiently integrated to deliver safe, timely and preventative responses when housing instability emerges.

Q Shelter supports the call for:

- development of dedicated housing responses for 12–15 year olds
- strengthened, timely and accountable Child Safety engagement
- increased resourcing and capacity within the youth and community sector
- improved cross-system collaboration to ensure young people can access safe, appropriate supports without barriers

In addition, we emphasise the importance of shifting from crisis response to prevention and early intervention. Q Shelter is a member of the Preventative Peaks Alliance — a collaborative initiative of Neighbourhood Centres Queensland, PeakCare, the Queensland Aboriginal and Torres Strait Islander Child Protection Peak (QATSICPP), the Queenslanders with Disability Network (QDN), and Q Shelter, established to address fragmented supports and the overrepresentation of vulnerable cohorts in statutory systems.

The Alliance aims to promote system reform and stronger integration across housing, child protection, disability, community services and Aboriginal and Torres Strait Islander organisations, with a focus on coordinated, culturally responsive, community-led approaches. A preventative framework requires early identification of housing instability, coordinated family support, and clear, integrated pathways between systems so that risks are addressed before they escalate into homelessness.

Without structural reform and genuine system integration, young people under 16 will continue to rely on unsafe environments, unstable informal supports and high-risk survival strategies that place them at significant harm.

Q Shelter endorses this submission and encourages timely action to ensure that no young person is left without a safe place to live or access to the coordinated support they need.

Thank you for considering this supporting statement. For further questions or contact, please liaise with our Policy & Strategic Engagement Lead, Maya Glassman at in the first instance.

Yours sincerely

Jackson Hills
General Manager, Policy & Strategic Engagement
Q Shelter

Telephone: 07 3900 6000
Reference: TF26/369 – D26/2838

Mr Paul Anastassiou KC
Commissioner
Commission of Inquiry into Queensland's Child Safety System

Re: Letter of Support – Submission on Under-16 Homelessness and Child Safety System Responses

Dear Commissioner Anastassiou

The Office of the Aboriginal and Torres Strait Islander Children's Commissioner (OATSICC) is writing in support of the submission prepared by Community Living Association which highlights the urgent and unmet needs of young people under 16 who are experiencing homelessness in Queensland.

As an organisation working with young people and families, we share the concerns raised in this submission. Young people under 16 are navigating homelessness in environments that offer little to no appropriate service response. Young people and workers consistently describe that Child Safety often does not respond to under-16 homelessness, leaving young people without safe options or statutory intervention where it is required.

We also recognise the concern raised by both young people and workers that some Child Safety staff hesitate to intervene due to fears that residential care placements may expose young people to further risk. This reflects a significant systems issue: a protective framework that is unable to fulfil its purpose for children under 18 when homelessness occurs.

OATSICC supports the call for:

- development of dedicated housing responses for 12–15-year-olds
- strengthened, timely and accountable Child Safety engagement
- increased resourcing and capacity within the youth and community sector
- improved cross-system collaboration to ensure young people can access safe, appropriate supports without barriers

According to **Homelessness Australia**, 15,436 children and young people under 18 experienced homelessness in 2022–23. At least 1,439 children presented alone to homelessness Services. While the data does not specify how many of these children were under 16, we know from our work and from broader system trends that younger children are an increasingly vulnerable and largely invisible cohort.

For children and young people involved in the child protection system, placement instability remains a critical driver of homelessness. Experiences of disrupted placements, absences from care, and exits from care before 18 are well documented, including in the ***Absent from care*** insights paper published by the Queensland Family and Child Commission. Young people who leave or are absent from care frequently fall into a significant funding and service gap between state-funded child protection responses and federally funded homelessness services. For those at risk of homelessness, key drivers consistently include placement breakdown, running away from unsafe or unsuitable residential care, or being informally "self-placed" without adequate support. Many children and young people presenting to

Specialist Homelessness Services require accommodation support, yet fewer than half receive it. Crisis accommodation services are largely not designed, funded or authorised to support children on child protection orders, creating further barriers. In practice, this leaves some young people being turned away, while others are accommodated in settings that are not resourced to meet their developmental or statutory needs.

Young people we have recently spoken with who have lived experience of child protection describe profound distress, instability and a lack of safe alternatives:

> *"My time in care was really, really bad… If there was stuff going on, I literally would call the ambulance because… I had nobody to tell. You can't go away. The only place away is to some drug addict's place on the street or to the hospital."*
>
> *"All of my belongings were packed up without my permission… I was told to come home and retrieve them and self-place… They refused to place me because I hadn't been coming home."*
>
> *"A lot of people these days are leaving care at 16 or running away from their placements… they're sleeping rough on the streets."*
>
> *"I'd rather be homeless than be in that residential care… I was sleeping behind the servo for about half a year… I'd rather be there on the cold rocks than somewhere I had no rights."*

These stories reflect systemic gaps rather than isolated incidents. Young people describe choosing rough sleeping over residential care environments where they feel unsafe, unheard or powerless. They report difficulty accessing income support, particularly when under 16, and significant barriers navigating Centrelink requirements without stable housing, adult advocacy or identification documents.

In our observation, there is a growing cohort of children under 16 who are:

- experiencing placement instability or absences from care
- unable to access age-appropriate crisis accommodation
- falling between child protection and homelessness service systems
- struggling to access income support
- lacking coordinated, therapeutic and housing responses tailored to their age and legal status.

From OATSICC's perspective, children under 16 experiencing homelessness are entitled to protection, care and an adequate standard of living, and governments have a clear responsibility to ensure no child is left without a safe place to live. Aboriginal and Torres Strait Islander children are disproportionately affected, making culturally safe responses grounded in connection to family, community and Country essential. Addressing this issue requires not only improved services, but clear accountability, coordinated cross-system action, and responses that reflect children's best interests, safety and developmental needs.

We believe the recommendations put forward in this submission are both necessary and urgent. Without structural reform, young people under 16 will continue to rely on unsafe environments, unstable informal supports, and high-risk survival strategies that place them at significant harm.

OATSICC endorses the submission and urges Queensland Child Safety to act swiftly to ensure no young person under 16 is left without a safe place to live and appropriate support.

Thank you for considering this supporting statement.

If you or your officers would like to discuss further, I can be contacted on [redacted] or via email [redacted]

Yours sincerely

Natalie Lewis
Aboriginal and Torres Strait Islander Children's Commissioner
Office of the Aboriginal and Torres Strait Islander Children's Commissioner
Queensland Family and Child Commission

26 February 2025

2 March 2026

To whom it may concern,

Re: Letter of Support – Submission on Under-16 Homelessness and Child Safety System Responses

Career Employment Australia Ltd (CEA Ltd) is writing in support of the submission prepared by Community Living Association which highlights the urgent and unmet needs of young people under 16 who are experiencing homelessness in Queensland.

As an organisation working with young people and families, we share the concerns raised in this submission. Young people under 16 are navigating homelessness in environments that offer little to no appropriate service response. Young people and workers consistently describe that Child Safety often does not respond to under-16 homelessness, leaving young people without safe options or statutory intervention where it is required.

We also recognise the concern raised by both young people and workers that some Child Safety staff hesitate to intervene due to fears that residential care placements may expose young people to further risk. This reflects a significant systems issue: a protective framework that is unable to fulfil its purpose for children under 18 when homelessness occurs.

CEA Ltd supports the call for:

- development of dedicated housing responses for 12–15-year-olds
- strengthened, timely and accountable Child Safety engagement
- increased resourcing and capacity within the youth and community sector
- improved cross-system collaboration to ensure young people can access safe, appropriate supports without barriers

Through our Reconnect Program we have become aware of rising statistics of youth homelessness including those under 16.

We believe the recommendations put forward in this submission are both necessary and urgent. Without structural reform, young people under 16 will continue to rely on unsafe environments, unstable informal supports, and high-risk survival strategies that place them at significant harm.

CEA Ltd endorses the submission and urges Queensland Child Safety to act swiftly to ensure no young person under 16 is left without a safe place to live and appropriate support.

Thank you for considering this supporting statement.

Yours sincerely,

Jason Gardiner
CHIEF EXECUTIVE OFFICER

A place of healing, support & social action

Zig Zag
575 Old Cleveland Road
Camp Hill Qld 4152

27 February 2026

To whom it may concern,

Re: Letter of Support – Submission on Under-16 Homelessness and Child Safety System Responses

To whom it may concern,

Zig Zag writes in support of the submission prepared by Community Living Association, which highlights the urgent and unmet needs of young people under 16 who are experiencing homelessness in Queensland.

Zig Zag is a community based not-for-profit organisation in Brisbane that provides services to young women, trans and gender diverse young people aged 12-25 years, including:

- medium-term supported accommodation and housing support to women and gender diverse young people (and their children) aged 16-25 years who are experiencing homelessness or at risk of homelessness, and
- counselling and support for women and gender diverse young people aged 12 to 25 years who have experienced sexual violence.

As an organisation supporting young people and families, we share the concerns raised in this submission. Young people under 16 are navigating homelessness in environments that offer little to no appropriate service response.

Zig Zag supports the call for:

- the development of dedicated housing responses for 12–15-year-olds,
- increased resourcing and capacity within the youth and community sector, and
- improved cross-system collaboration to reduce barriers and ensure young people can access safe and appropriate supports.

From our own experience, we receive requests for support from young people under the age of 16, but we are unable to offer them housing, nor are there sufficient services to refer them to for housing support.

Without structural reform, young people under 16 will continue to rely on unsafe environments, unstable informal supports, and high-risk survival strategies that place them at significant harm.

Zig Zag endorses the submission and urges the Queensland Government to act swiftly to ensure no young person under 16 is left without a safe place to live and appropriate support.

Thank you for considering this supporting statement.

Yours sincerely

Danieka Montague
Team Leader, Housing Program
Zig Zag

Re: Letter of Support – Submission on Under16 Homelessness and Child Safety System Responses

To whom it may concern,

PeakCare writes in support of the submission prepared by Community Living Association, which highlights the urgent and unmet needs of young people under 16 experiencing homelessness in Queensland.

As the peak body representing child and family support services across Queensland, we share and strongly endorse the concerns raised. Young people under 16 are navigating homelessness in a service environment that offers few developmentally appropriate responses. Our members consistently report that children in this age group are presenting without safe accommodation options yet often do not receive timely or consistent Child Safety intervention, even where statutory involvement appears warranted.

We also acknowledge the concerns raised by both young people and frontline workers that some Child Safety staff may hesitate to intervene due to fears that residential care placements could expose young people to further risk. This points to a deeper systemic issue: a protective framework that, in the context of youth homelessness, is struggling to fulfil its mandate to safeguard children under 18.

From our direct engagement with services across the state, we are hearing of rising presentations of children under 16 experiencing homelessness, frequently linked to family conflict, domestic and family violence, mental health challenges, and cumulative unmet needs. Services describe significant barriers to securing Child Safety responses, with thresholds for intervention perceived as high and inconsistently applied. At the same time, there are very limited age-appropriate accommodation options for 12–15-year-olds. This leaves workers with few safe pathways and forces reliance on informal, unstable, or unsuitable arrangements. The result is a systemic gap that places young people at heightened risk and creates ethical and practical dilemmas for frontline practitioners striving to keep children safe.

PeakCare supports the calls for:

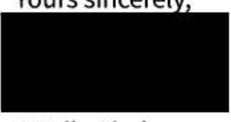
- Development of dedicated housing and support responses for 12–15-year-olds
- Strengthened, timely and accountable Child Safety engagement
- Increased resourcing and capacity across the youth and community sector
- Improved cross-system collaboration to ensure children can access safe, appropriate, and barrier-free supports.

The recommendations put forward in this submission are both necessary and urgent. Without structural reform, young people under 16 will continue to rely on unsafe environments, unstable informal supports and high-risk survival strategies that expose them to significant harm.

PeakCare endorses this submission and urges the Queensland Government to act swiftly and decisively to ensure that no young person under 16 is left without a safe place to live and the protection and support they require.

Thank you for considering this supporting statement.

Yours sincerely,



Estelle Abela
Interim Chief Executive Officer

Level 8
100 Creek Street
Brisbane QLD 4000

GPO Box 1719
Brisbane QLD 4001

07 3368 1050

peakcare.org.au
office@peakcare.org.au

3 March 2026

Hervey Bay Neighbourhood Centre
22-36 Charles Street
Pialba QLD 4655

Re: Letter of Support – Submission on Under-16 Homelessness and Child Safety System Responses

To whom it may concern,

Hervey Bay Neighbourhood Centre (HBNC) is writing in support of the submission prepared by Community Living Association which highlights the urgent and unmet needs of young people under 16 who are experiencing homelessness in Queensland.

As an organisation working with young people and families, we share the concerns raised in this submission. Young people under 16 are navigating homelessness in environments that offer little to no appropriate service response. Young people and workers consistently describe that Child Safety often does not respond to under-16 homelessness, leaving young people without safe options or statutory intervention where it is required.

We also recognise the concern raised by both young people and workers that some Child Safety staff hesitate to intervene due to fears that residential care placements may expose young people to further risk. This reflects a significant systems issue: a protective framework that is unable to fulfil its purpose for children under 18 when homelessness occurs.

HBNC supports the call for:

- development of dedicated housing responses for 12–15-year-olds
- strengthened, timely and accountable Child Safety engagement
- increased resourcing and capacity within the youth and community sector
- improved cross-system collaboration to ensure young people can access safe, appropriate supports without barriers

From our own experience, the HBNC Reconnect Service are seeing this pattern of inappropriate referrals to the non-government sector when statutory systems are over-stretched. It underscores the increasing pressure and unfunded expectation placed on programs like Reconnect to respond to high-risk, high-needs young people who have effectively fallen through the safety net of government care. It illustrates how frontline non-government

services are being asked to assume responsibilities beyond their funded scope and capability to keep young people safe.

We believe the recommendations put forward in this submission are both necessary and urgent. Without structural reform, young people under 16 will continue to rely on unsafe environments, unstable informal supports, and high-risk survival strategies that place them at significant harm.

HBNC endorses the submission and urges Queensland Child Safety to act swiftly to ensure no young person under 16 is left without a safe place to live and appropriate support.

Thank you for considering this supporting statement. You are welcome to contact me for further information on

Yours sincerely,

Sheenah Heinonen
Family, Children and Youth Service Manager
Hervey Bay Neighbourhood Centre

School of Nursing, Midwifery and Social Work
ABN 63 942 912 684
CRICOS PROVIDER NUMBER 00025B

26/02/26

Re: Letter of Support – Submission on Under-16 Homelessness and Child Safety System Responses

To whom it may concern,

We (Professor Karen Healy, As/Professor Kathy Ellem and As/Professor Jemma Venables) are a research team from the School of Nursing, Midwifery and Social Work at The University of Queensland, engaged in programs of research that seek to transform child protection systems. Our work aims to build evidence for new approaches to strengthening family and community capacities to enhance the wellbeing of children and families. We are writing in support of the submission prepared by Community Living Association which highlights the urgent and unmet needs of young people under 16 who are experiencing homelessness in Queensland.

Our submission draws on the program of research led by As/Professor Jemma Venables concerning the safety and wellbeing of young people leaving out-of-home care. As a research team focused on building knowledge to enhance outcomes for young people and families, we share the concerns raised in this submission. Our research has shown that young people under 16 are navigating homelessness in environments that offer little to no appropriate service response. Young people and workers (from both statutory and non-government sectors) consistently describe that Child Safety often does not adequately respond to under-16 homelessness, leaving young people without safe options or statutory intervention where it is required.

We also recognise the concern raised by both young people and workers that some Child Safety staff hesitate to intervene due to fears that residential care placements may expose young people to further risk. This reflects a significant systems issue: a protective framework that is unable to fulfil its purpose for children under 18 when homelessness occurs.

Our research team supports the call for:

- development of dedicated housing responses for 12–15-year-olds
- strengthened, timely and accountable Child Safety engagement
- increased resourcing and capacity within the youth and community sector
- improved cross-system collaboration to ensure young people can access safe, appropriate supports without barriers

Our support is grounded in findings from our program of research focused on young people in out-of-home care who leave approved placements without permission to stay in unapproved locations. This cohort frequently experience homelessness and unstable living arrangements. Our findings indicate that young people often feel they have no other option but to leave approved placements due to a lack of safety, connection and agency in these arrangements. Despite this, many young people report being met with punitive system responses such as the withholding of resources. This, in concert with unstable living arrangements can lead to further disconnection of young people from supports, compounding their vulnerabilities and impeding transition planning and support. Importantly, our findings also highlight the systemic challenges that practitioners face in trying to respond to and support this cohort of young people and highlight the benefit of increased resourcing to the youth and community sector – particularly for assertive outreach.

The School of Nursing, Midwifery and Social Work
The University of Queensland
Brisbane QLD 4072 Australia

T + 61 7 3365 2068
E nmsw@uq.edu.au
W www.uq.edu.au/nmsw

We attach copies of three articles that provide further details of our findings:

- Approaches to supporting young people in out-of-home care who 'self-place' in unapproved locations: Perspectives of statutory child protection practitioners
- Diminishing their voice through choice? How 'self-placing' in out-of-home care affects children affects children and young people's participation in decision-making
- Access to Transition Planning and Support for Young People who self-place when in out-of-home care: The perspectives of young people and practitioners

We believe the recommendations put forward in this submission are both necessary and urgent. Without structural reform, young people under 16 will continue to rely on unsafe environments, unstable informal supports, and high-risk survival strategies that place them at significant harm.

Our research team endorses the submission and urges Queensland Child Safety to act swiftly to ensure no young person under 16 is left without a safe place to live and appropriate support.

Thank you for considering this supporting statement.

Kind regards,

Professor Karen Healy AM
B.Soc. Wk. (hons 1), PhD, Grad Cert Applied Stats

Head of School
Professor of Social Work

School of Nursing, Midwifery & Social Work
The University of Queensland
Brisbane Qld 4072 Australia

As/Professor Kathy Ellem
BSocWk (Hons), GradCertAcadPrac, PhD

Head of Discipline (Social Work & Counselling)

School of Nursing, Midwifery & Social Work
The University of Queensland
Brisbane Qld 4072 Australia

As/Professor Jemma Venables
BA, BSW (Hons 1), PhD, SFHEA

Program Lead – Master of Social Work (Qualifying)

School of Nursing, Midwifery & Social Work
The University of Queensland
Brisbane Qld 4072 Australia

Research outputs. Please contact A/Prof J Venables for additional copies (jemma.venables@uq.edu.au)

Venables, J., Cullin, J., Ellem, K., & Healy, K. (2025). Diminishing their voice through choice? How 'self-placing' in out-of-home care affects children and young people's participation in decision-making. *European Journal of Social Work*, *28*(4), 701-714.

Venables, J., Simpson Reeves, L., Ellem, K., Healy, K., & Cullin, J. (2025). Access to Transition Planning and Support for Young People Who Self-Place When in Out-Of-Home Care: The Perspectives of Young People and Practitioners. *Australian Journal of Social Issues*, *60*(3), 757-767.

Venables, J., Warrell, C., Cullin, J., Ellem, K., & Healy, K. (2025). Approaches to Supporting Young People in Out-of-Home Care Who 'Self-Place' in Unapproved Locations: Perspectives of Statutory Child Protection Practitioners. *The British Journal of Social Work*, *55*(1), 141-160.

The School of Nursing, Midwifery and Social Work
The University of Queensland
Brisbane QLD 4072 Australia

T + 61 7 3365 2068
E nmsw@uq.edu.au
W www.uq.edu.au/nmsw

Australian Journal of Social Issues

WILEY

ORIGINAL ARTICLE OPEN ACCESS

Access to Transition Planning and Support for Young People Who Self-Place When in Out-Of-Home Care: The Perspectives of Young People and Practitioners

Jemma Venables | Laura Simpson Reeves | Kathy Ellem | Karen Healy | Joel Cullin

The School of Nursing, Midwifery and Social Work, The University of Queensland, St Lucia, Queensland, Australia

Correspondence: Jemma Venables

Received: 24 July 2024 | **Revised:** 4 October 2024 | **Accepted:** 6 January 2025

Funding: This work was funded by the University of Queensland under the Early Career Researcher Development: Knowledge Exchange and Translation grant scheme.

Keywords: extended care | out-of-home care | self-placing | transition from care | young people

ABSTRACT

This paper explores the experiences of young people in Queensland, Australia, under child protection orders who leave approved out-of-home care placements (e.g., foster; residential care) to stay in unapproved locations (e.g., sleeping on the streets; staying with friends, family/kin, or strangers). This phenomenon is commonly referred to as 'self-placing'. Young people who self-place are at increased risk of homelessness, exploitation, contact with the justice system, and disconnection from support services, including education and health care. We argue that this disconnection from formal support impedes their access to transition care planning and support—factors internationally recognised as essential for enhancing outcomes for care leavers. Our paper draws on qualitative interviews with 11 young people with experience of self-placing and focus group data involving 26 statutory child protection practitioners and 17 specialist non-government practitioners. We describe the ways in which self-placing was perceived to shape young people's access to, and practitioners' ability to provide, transition planning and support. We identify ongoing gaps and examples of good practice to inform more robust transition from care policies that are responsive to the needs of this marginalised cohort.

1 | Introduction

Young people with experience of the child protection system are one of Australia's most vulnerable populations (Mendes, Bollinger, and Flynn 2023). Their vulnerability further increases when they leave formal out-of-home care (OOHC) arrangements (foster, kinship, or residential care) without permission to stay in unapproved locations (e.g., sleeping on the streets, staying with friends, family/kin, or strangers). These arrangements, referred to in Australia as 'self-placing'[1], are often precarious, temporary, and insecure (Bowden and Lambie 2015). There is increasing evidence that young people who self-place (YPwSP) become disconnected from their support systems and are at heightened risk of homelessness, maltreatment, sexual exploitation, and violence (Attar-Schwartz 2013; Biehal and Wade 2000). They also typically have increased contact with the justice system (Colvin et al. 2018) and disengage from formal education (Biehal and Wade 2000). They face barriers to accessing physical and mental health care and experience ongoing crisis and trauma (Biehal and Wade 2000). Despite their vulnerability, there is limited evidence on the characteristics of, motivations for, needs of, and effective responses to support YPwSP, especially in their transition from OOHC.

This is an open access article under the terms of the Creative Commons Attribution-NonCommercial License, which permits use, distribution and reproduction in any medium, provided the original work is properly cited and is not used for commercial purposes.

© 2025 The Author(s). *Australian Journal of Social Issues* published by John Wiley & Sons Australia, Ltd on behalf of Australian Social Policy Association.

1.1 | What Is Known About Self-Placing From OOHC in Australia?

Australia's federal government has limited involvement in child protection and transition from care; primary responsibility for statutory child protection is the purview of individual states and territories. In Queensland, where this study takes place, 9832 children and young people were in OOHC as of 30 June 2023 (PC 2024). Most of these children and young people were placed in home-based care—either foster care (40%) or relative/kinship care (42%)—with the remaining 18% placed in residential care (PC 2024). While Australian jurisdictions are required to report on the number of children and young people in OOHC by placement type, there is no such requirement to report on the number of YPwSP. A lack of consensus regarding terminology and definitions of this phenomenon (Bowden and Lambie 2015) further contributes to the absence of reliable cross-jurisdictional data (CCYP 2021).

While the exact number of YPwSP in Australia is unknown, in a national survey of young people with an OOHC experience, a third self-reported an absence of at least 1 week from their approved placement in the last year (McDowall 2020). In December 2022, an estimated 6.7% of all children and young people in OOHC in Queensland were absent from their approved placement (QFCC 2024). Internationally, this figure is estimated to be about 25% (Bowden and Lambie 2015). Although YPwSP are not residing in approved OOHC arrangements, they remain under child protection orders, and thus the child protection authority (CPA) is still legally required to provide them with support. Any provision of support (e.g., food vouchers, case management) by the CPA within such arrangements does *not* mean that it is an approved care arrangement type as defined within the state's child protection legislation.

There is also very limited evidence describing the characteristics of YPwSP in Australia. There is some research that suggests that Aboriginal and/or Torres Strait Islander young people may self-place, often back with family, at a younger age than their non-Indigenous counterparts (Mendes et al. 2020). Internationally, research indicates that those who are older, female, have emotional and/or behavioural difficulties, are placed in residential care, and/or have experienced placement instability are more likely to self-place than other young people in OOHC (Branscum and Richards 2022).

The limited international research on this topic largely involves quantitative analysis of administrative data and has focused on the risk factors for leaving approved placements (e.g., Branscum and Richards 2022). This literature mostly frames self-placing as an individualised choice and delinquent behaviour, and thus something that needs to be managed and prevented (Attar-Schwartz 2013; Bowden and Lambie 2015). More recently, individual risk factors have been considered alongside contextual and relational factors, including fractured relationships with family and peer networks or a desire to live with family, feeling unsafe, placement (in)stability, and policy decisions of the broader child protection system (CCYP 2021; McDowall 2018).

Statutory practitioners from Queensland's CPA report that working with YPwSP is challenging due to the safety risks to the young person, a lack of policy guidance in concert with limited empirical evidence regarding best practice, and concerns about being blamed if something goes wrong (Venables et al. 2024b). The literature that does exist on responses to self-placing tends to focus on reactive responses, such as police involvement, or on the adoption of punitive responses upon their return to an approved OOHC placement (Colvin et al. 2018). A smaller body of literature calls for trauma-informed approaches as these prioritise therapeutic support and safety planning (CCYP 2021). There nonetheless remains a knowledge gap regarding how practitioners support YPwSP in their transition to adulthood.

1.2 | Transition From OOHC to Adulthood Policy

Despite being recognised as a priority group requiring significant support in their transition to adulthood (Commonwealth of Australia 2021), young people exiting OOHC continue to experience poorer outcomes across various life domains—including health, housing, education, and employment—than those without an OOHC experience (Mendes 2022; Mendes, Bollinger, and Flynn 2023). Federally, support is largely limited to the Transition to Independence Living Allowance (TILA), a one-off grant provided to care leavers aged 15-25 years.[2] All Australian jurisdictions require young people aged 15 and up to have a transition from care plan that considers the supports a young person would require to support their independence.

All jurisdictions have recently introduced universal extended care to support young people financially and practically as they 'age out' of care at 18 years up to the age of 21 years (Mendes 2023). In Queensland, all care leavers turning 18 years old on or after 1st July 2023 are now eligible for the Extended Post Care Support (EPCS) program. Under EPCS, young people who move into independent living arrangements are eligible for an annual financial support package. Foster/kinship carers will continue to receive their fortnightly carer payment if the young person remains living with them. While the introduction of EPCS is an important policy change, this paper focuses specifically on the impact of self-placing on young people's access to transition planning and support *while under 18 years and still under child protection orders*.

As in other jurisdictions, Queensland's policy recommends that transition planning commence at 15-years and then intensify as the young person reaches 17-years, with a planned exit at 18-years (Queensland Government 2024). Transition planning is typically done by a CPA practitioner in conjunction with the young person, their carer, and their family (Queensland Government 2024). This approach is designed for a 'standard' transition from OOHC, where the young person remains in an approved placement until they 'age out'. Arguably, YPwSP have impeded access to this transition planning and support, exacerbating the risk of poor transitions from OOHC to adulthood (QCPCI 2013). Thus, this paper seeks to address the research questions:

For young people under child protection orders, how does self-placing shape

a. young people's access to transition planning and support?
b. practitioners' ability to provide transition planning and support?

18394655, 2025, 3, Downloaded from https://onlinelibrary.wiley.com/doi/10.1002/ajs4.391 by Info Access & Delivery Service, Wiley Online Library on [24/02/2026]. See the Terms and Conditions (https://onlinelibrary.wiley.com/terms-and-conditions) on Wiley Online Library for rules of use; OA articles are governed by the applicable Creative Commons License

2 | Method

This paper reports on data from a study that explored the needs of and responses to YPwSP in Queensland from the perspectives of young people and practitioners. It was conducted in conjunction with Queensland's CPA and a specialist non-government service (herein NGO) that is funded to provide voluntary support to YPwSP, aged 12-18 years, while under child protection orders in the South-East Queensland region.[3]

2.1 | Recruitment

A purposive sample of young people and practitioners from the CPA and NGO were recruited for the study.

Young people were eligible to participate if they (a) had been under child protection orders in Queensland and self-placed at some point whilst in OOHC and (b) were currently or recently supported by the NGO. This mitigated risk by ensuring the young person was linked to appropriate supports. It is important to note that this NGO's involvement with a young person does not remove the CPA's statutory obligations to support YPwSP.

Practitioners from the NGO distributed recruitment material—written in Easy English with pictorial aids to support comprehension—to eligible young people and, where appropriate, their guardian. Young people were able to contact the researchers directly to express interest in participating, but most elected to complete a 'consent to contact form', which they placed in a locked letterbox at the NGO, giving permission for the researchers to contact them or a trusted support person directly. To protect the young person's confidentiality, the researchers did not advise the support person if the interview proceeded. Members of the research team also spent time at the NGO's service locations, so that young people were able to ask questions about the project directly and become familiar with the interviewers.

Practitioners were eligible to participate if they had experience supporting YPwSP and worked for Queensland's CPA or the NGO. For the NGO, the researchers shared the recruitment materials with the service manager, who distributed them internally to practitioners (herein referred to as NGO-Ps) in either case management, overnight accommodation support, or overnight outreach roles. For the CPA, the regional directors from two regions[4] identified eligible practitioners (herein referred to as CPA-Ps) in 'frontline' (e.g., child safety officers), 'local leadership' (e.g., team leaders, senior practitioners), or 'executive' (e.g., managers, directors) roles. The researchers emailed out recruitment materials to the identified participants. Interested participants from both the CPA and NGO contacted the researchers directly.

2.2 | Participants

2.2.1 | Young People

Eleven young people participated in the study. Most were female ($n=9$) and non-Indigenous ($n=7$). Seven of these young people were under 18 years and so required both guardian consent and their assent. Queensland's CPA provided blanket consent for any young person under 18 years old who met the study criteria and were thus unaware of which individuals participated. The remaining four participants were 18 years old and provided their own consent to participate. Prior to the young person providing either verbal or written assent/consent, the interviewer reviewed the participant information sheet with them, confirmed their understanding, and addressed any questions they had about the study.

Participants were allocated a pseudonym, which is used to refer to them throughout this paper (see Table 1). Participants reported being in OOHC for between three and 17 years. Most first self-placed when aged 14 years or above and described episodes of self-placing during the period that transition planning should occur (when aged 15 years to 17 years). Young people reported self-placing, either continually or intermittently, for between one and 6 years ($\bar{x} = 2.6$ years). Of the seven young people who were still under child protection orders at the time of the interview, five were currently self-placing (see Table 1).

2.2.2 | Practitioners

Forty-three practitioners participated in the study: 17 NGO-Ps and 26 CPA-Ps. Most identified as female ($n=32$), non-Indigenous ($n=40$), and had worked with young people in OOHC for less than 5 years ($n=20$). The majority had at least one tertiary qualification, with most holding qualifications in social work, psychology, and related fields (see Table 2).

2.3 | Data Collection

Data collection occurred between April and December 2022, *prior* to the introduction of Queensland's EPCS, following ethical clearance from The University of Queensland Human Research Ethics Committee (2022/HE000699) and approval from Queensland's CPA.

2.3.1 | Young People

A semi-structured interview was conducted face-to-face with each participant at a safe and mutually agreed location. While young people were advised that they were able to bring a support person, no participants elected to have one present in the interview. Some participants wished to conduct the interview at one of the NGO's service locations. In these instances, the interviews were carried out in rooms away from the NGO practitioners, although the young person could access them as they wished. Young people were also clearly advised prior to commencing the interview what type of information would need to be reported back to the CPA (e.g., unacceptable risk of harm), so that they could make an informed decision about the information they chose to share. Young people were provided with pictorial aids (e.g., "stop", "break", "thumbs up/down" cards) as an alternative option to verbal cues to help them control the flow of the interview. The interview explored young people's experiences of self-placing, as well as their needs and any support provided. Interviews lasted between 24 and 113 min, with 10 participants consenting to audio recording and detailed field notes being taken of the remaining interview.

18394655, 2025, 3, Downloaded from https://onlinelibrary.wiley.com/doi/10.1002/ajs4.391 by Info Access & Delivery Service, Wiley Online Library on [24/02/2026]. See the Terms and Conditions (https://onlinelibrary.wiley.com/terms-and-conditions) on Wiley Online Library for rules of use; OA articles are governed by the applicable Creative Commons License

TABLE 1 | Young people—Participant pseudonyms and characteristics.

Pseudonym	Age at interview (years)	Age when 1st self-placed (years)	Current child protection order	Current living arrangement
Zana	16	14	Yes	Residential care
Maly	16	14	Yes	Supported Independent Living
Jaiden	18	15	No	Boarding house
Esme	15	12	Yes	Self-placing with parents
Indy	18	15	No	Living with parents
Sophia	13	13	Yes	Self-placing with family friends
Jedda	18	15	No	Supported Independent Living
Keira	17	15	Yes	Self-placing with partner's family
Allira	18	11	No	Public housing
Talia	17	16	Yes	Self-placing with kin
Koen	16	13	Yes	Self-placing with previous carer

TABLE 2 | Practitioners—participant characteristics.

Item	Characteristics of participant	CPA ($n=26$)	NGO ($n=17$)
Highest Qualification	None	1	1
	Certificate/Diploma	1	1
	Bachelor degree	18	10
	Masters degree	2	5
	Missing data	4	0
Length of time working in OOHC	<5 years	7	13
	5–9 years	7	2
	10–19 years	5	1
	≥ 20 years	4	1
	Missing data	3	0
Sex	Male	6	5
	Female	20	12
Aboriginal and/or Torres Strait Islander Status	Aboriginal and/or Torres Strait Islander	0	0
	Non-Indigenous	23	17
	Missing data	3	0

2.3.2 | Practitioners

Focus groups explored practitioners' experiences of supporting young people in OOHC who self-place. Separate focus groups were held for CPA-Ps ($n=7$) and NGO-Ps ($n=3$). Due to the hierarchical nature of the CPA, different focus groups were held with 'frontline', 'local leadership', and 'executive participants'. Focus groups ranged from 67 to 103 min and were conducted by two researchers via videoconferencing.

2.4 | Data Analysis

Interview and focus group recordings were transcribed, de-identified, and uploaded into the NVivo-14 qualitative software program. The authors involved in the analysis are social workers and researchers with experience regarding child protection, youth transitions, and social exclusion. Our thematic analysis drew on Braun and Clarke's (2013) widely accepted approach. We familiarised ourselves with a subset of the data, inductively

18394655, 2025, 3, Downloaded from https://onlinelibrary.wiley.com/doi/10.1002/ajs4.391 by Info Access & Delivery Service, Wiley Online Library on [24/02/2026]. See the Terms and Conditions (https://onlinelibrary.wiley.com/terms-and-conditions) on Wiley Online Library for rules of use; OA articles are governed by the applicable Creative Commons License

coding at least three transcripts each. An initial coding frame was established via consensus and then applied to all transcripts and further refined as new codes emerged. Once all transcripts were coded, we began to refine the coding frame in response to the specific foci of this paper and look for related themes within the data. The similarities and differences between emergent themes in the dataset were explored throughout the analysis process. Candidate themes were discussed with the other authors, and a final list of the themes agreed upon.

3 | Results

The transition from OOHC was raised in all practitioner focus groups and interviews with young people. Participants reported that YPwSP share the same transition needs as other young people exiting OOHC. However, there was explicit recognition from both groups of practitioners and young people that YPwSP overwhelmingly have negative experiences with the child protection system prior to self-placing, resulting in compounded vulnerability at this key transition point. The impact of self-placing on the transition from OOHC was perceived by all participants to have shaped young people's access to, as well as practitioners' ability to provide, transition planning and support. This was particularly evident in three interrelated areas.

First, the narratives provided by both the young people and the practitioners who work with them demonstrated the impact that unstable living arrangements had on their ability to prepare for transition, compounding their existing vulnerabilities. Second, this instability and compounded vulnerability also contributed to YPwSP disconnecting from formal supports, including the CPA. Third, this disconnection and the subsequent impact on the ability to access and/or provide transition planning and support highlighted the need for support systems to be much more responsive. While there were often similar views shared by both the young people and the practitioners, there were notable differences between the practitioner groups (CPA-Ps and NGO-Ps) in their *ability to respond* to the needs of YPwSP. We explore these three key areas from the perspectives of YPwSP, CPA-Ps, and NGO-Ps below.

3.1 | Instability When Self-Placing Compounds Vulnerability

All young people in our study described periods of instability when self-placing, including sleeping rough, couch-surfing, and needing to leave locations swiftly and unexpectedly. Self-placing was viewed by practitioners and young people as simultaneously "a form of independence[5]" from the OOHC system *and* an increased risk for poor life outcomes, due to YPwSP not having "a safe base" (CPA_FG1), which then compounds their vulnerability and impedes their preparedness for transition.

Some practitioners referenced Maslow's hierarchy of needs to explain how young people needed to address basic needs when self-placing, preventing them from focusing on transition from care. Young people shared similar views: Indy, for example, reflected on how the instability of her time self-placing made it challenging to engage in transitioning planning, suggesting that she may have had a transition plan but didn't know because "it was a messy time". CPA-Ps also noted how the instability of self-placing created challenges for linking young people to other services and completing transition tasks:

> Can't get any services involved if they're bouncing around…constantly losing ID [identification], so then you can't apply for anything… and it takes us months to get a replacement, then all these things are just huge barriers in terms of any [transition planning].
>
> (CPA_FG4)

This comment highlights how standard approaches to transition planning are based on assumptions that young people have a stable address, i.e., residing in an approved OOHC placement. However, a lack of suitable OOHC placements was identified as a key driver for why young people self-placed.

3.1.1 | Inappropriate Placements

Many practitioners indicated that young people's concerns about OOHC placements, particularly residential care, often preceded self-placing episodes. Young people echoed this view, with seven of the 11 young people reporting they first self-placed from a residential care placement because it did not meet their needs for safety, connection with family and informal networks, and engaging in independent activities. There was recognition that "even though they have chosen to self-place…most of them are keen on stable housing. Just not that residential model" (NGO_FG3). However, re-entering an approved placement after self-placing, particularly as young people approached their 18th birthday, was identified as a challenge that could negatively impact their transition from care.

Re-entering residential care was routinely described as unsuitable for many young people who had a history of self-placing and a desire to "exercise their own rights and choices" (CPA_FG7). Both CPA-Ps and NGO-Ps acknowledged that such behaviours were not readily accommodated within a "constrictive" residential care setting, characterised by "punitive responses" (NGO_FG3) and "so many rules that often inhibits them developing their own skills around making good decisions and being independent" (CPA_FG7). This suggests an awareness that existing residential care models, driven by risk-averse practices, may fail to meet young people's developmental and transition needs related to agency.

3.1.2 | Access to Appropriate Housing

Whilst access to appropriate housing is a significant transition need for all young people leaving OOHC, it was recognised as a particular challenge for YPwSP, who were often "transitioning into homelessness" (CPA_FG3). CPA-Ps and NGO-Ps both advocated for "more appropriate housing options… that they'll actually be likely to use, so your [supported independent living[6]] type of housing…unsupervised medium to long term housing" (NGO_FG3). However, some of the NGO-Ps shared a perception that YPwSP may not be considered for transitional housing, such as supported independent living (SIL), once they're over 17 years, suggesting that SIL was only an option for those who

18394655, 2025, 3, Downloaded from https://onlinelibrary.wiley.com/doi/10.1002/ajs4.391 by Info Access & Delivery Service, Wiley Online Library on [24/02/2026]. See the Terms and Conditions (https://onlinelibrary.wiley.com/terms-and-conditions) on Wiley Online Library for rules of use; OA articles are governed by the applicable Creative Commons License

were younger. In contrast, some CPA-Ps suggested that YPwSP were not suitable for SIL as they "don't have the opportunity to learn [required life skills, e.g., cooking] when they do self-place" (CPA_FG2). Jedda illustrated this point, explaining that she disengaged from school when placed in SIL at 17 years following a period of self-placing because "all of a sudden... I have to wash my uniform, I have to feed myself, I have to wash myself... have to worry about school...worry about transport".

Whilst acknowledging that the instability of self-placing increased the vulnerability of young people, all NGO-Ps expressed a belief that *appropriately supported* self-placing could enable young people to "be the leaders of their own lives" and have better transition outcomes, as they would have "an opportunity to find out what it is that they want to do, who they want to be with, whether they make mistakes or not along the way" (NGO_FG2). While several frontline CPA-Ps agreed, this was not a consistent view, particularly amongst those CPA-Ps that conceptualised self-placing as a form of early independence from the OOHC system. These CPA-Ps perceived that the instability of self-placing provided a "period of intensive learning street smarts" (CPA_FG4), which "through necessity... develop some really good skills for their life and for their independent living, even if it's not by design" (CPA_FG7). Consequently, in contrast to the NGO-Ps and some of their CPA-P colleagues, they suggested that some young people were "on a fast track" to independence and "well above their peers" because "they know how hard life can get" (CPA_FG4). This perception of early 'independence', alongside compounded vulnerability growing from housing and placement instability, was viewed by all groups of participants as a contributing factor to why YPwSP may disconnect from formal supports during this key transition period.

3.2 | Disconnection From Formal Support During Key Transition Period

Disconnection from formal support was a dominant theme in the accounts of young people, as well as in the practitioners' experiences of supporting YPwSP. The "process of being disconnected" was perceived to hinder positive transitions and compound the "risk of poor life outcomes... because it's really harder for them to re-engage with any type of education or employment, harder for them to live in a home, on and on it goes" (CPA_FG7). This view was echoed by the young people, who indicated that self-placing had played a role in their temporary or permanent disconnection from school. Jaiden, for instance, shared how life when self-placing had "just gotten in the way of [re-engaging with mainstream schooling] ever being a possibility". Other young people expressed similar challenges, and five of the young people interviewed advised that they had not completed schooling beyond Year 9. Most discussed though, was young people's disconnection from the CPA.

3.2.1 | Disconnection From CPA

When self-placing, young people are not directly supervised daily by a carer (foster, kinship, residential) who can help to fulfil their day-to-day care and transition needs. Nonetheless, their daily care and transition support needs remain the legal responsibility of CPA-Ps. All young people in the study described examples of poor, ruptured, or non-existent relationships with their—often multiple—CPA-Ps. This impeded YPwSP's involvement in discussions and decisions about their lives, including transition planning. Of those aged over 15 years, some reported that nobody from the CPA had discussed transition planning with them. Others, like Zana, felt that her requests to discuss transition planning were not prioritised, due in part to CPA-P turnover:

> I have been asking...since I was 15, since I first self-placed... People have been saying that people are going to help me do it, but nothing... My CSO was going to...but then she stopped being my CSO.

In such instances, NGO-Ps asserted a need to sometimes push back on the CPA-P to provide support, because "you're their guardian, you're supposed to be doing this" (NGO_FG3). However, there was also recognition amongst the NGO-Ps that the "sheer workload" and statutory responsibilities of CPA-Ps could make it "hard... to do the type of practice [CPA-Ps] would like to do" with YPwSP regarding transition planning and support. These challenges were implied, if not explicitly stated, by many CPA-Ps.

Some of the NGO-Ps perceived that young people's disconnection from the formal supports provided by the CPA was perpetuated when CPA-Ps viewed self-placing as "rebellion" and responded with punitive attitudes, which an NGO-P characterised as "You refuse to take placement, so figure your shit out" (NGO_FG3). The NGO-Ps stressed that such attitudes were more prevalent in some CPA teams and service centres than others but suggested that when such attitudes were held, CPA-Ps may "turn their back on [YPwSP]", deprioritising support for YPwSP, particularly when 15 years and above, and instead expect the 'independent' young person to proactively seek support from their CPA-P if needed (NGO_FG3). Notably, several young people recounted how they had stopped asking their CPA-Ps for support due to a perception that the CPA-Ps were not responsive to their needs.

Interestingly, this view of CPA-Ps was challenged by members of the CPA's executive, who were eager to see a shift in the frontline practice of CPA-Ps from punitive and risk-averse approaches to one that was more relational and better recognised and supported young people's agency. They suggested that if young people were adequately supported, self-placing could be:

> a healthy part of their transition to adulthood while exiting from the statutory child protective system. And it's a choice; it is a path that they have chosen and hopefully guiding them, not in the wrong direction, but hopefully in a safer direction.
>
> (CPA_FG7)

These executives elaborated that this approach would allow young people in OOHC the same opportunity to exercise

18394655, 2025, 3, Downloaded from https://onlinelibrary.wiley.com/doi/10.1002/ajs4.391 by Info Access & Delivery Service, Wiley Online Library on [24/02/2026]. See the Terms and Conditions (https://onlinelibrary.wiley.com/terms-and-conditions) on Wiley Online Library for rules of use; OA articles are governed by the applicable Creative Commons License

agency as their non-OOHC-experienced peers, commenting that "not every teenager stays at home until they're 18; they exercise their own rights and choices" (CPA_FG7). The executives proposed that YPwSP should be given context-specific and individualised support but "still have expectations, still have some guiding, supporting scaffolding in those choices" (CPA_FG7).

3.2.2 | Compressed Transition Planning

Despite self-placing, the young people reported feeling "nervous" about their impending formal exit from OOHC, aware that many formal supports would cease at their 18th birthday. Zana (16 years) reported concerns that her CSO had "talk[ed] about how it's transitioning to adulthood, but there's no actual, this is what's going to happen... This is when it's going to happen." She shared that she felt she had needed to self-advocate to make sure it happened:

> I'm almost 17... I just want to make myself as stable as I can get for when I'm in the world, by myself, alone. I want to get as much sorted now so that I'm ready for that. Because I'm not ready. And I'm sure a lot of other kids were never ready...or they didn't know how to be ready, and they just let life go on.

Both CPA-Ps and NGO-Ps shared a view that the disconnection of YPwSP from the OOHC system meant that transition support was often compressed into the months preceding their 18th birthday. As one NGO-P described:

> When they're close to 18, everyone rushes in. All the stakeholders are coming through. They're like, "Oh, we need to do this. We need to do this."
>
> (NGO_FG3)

One of the young people who had recently turned 18 years, Jedda, shared her frustrations about this approach, stating, "I've been in Child Safety for 15 years and leaving [transition tasks] to the last minute was not the best thing to do". Across the CPA-Ps, there was a dominant view that focusing on immediate safety and risk management often trumped transition planning in their work when young people self-placed, meaning that when young people approached their 18th birthday, "there's nothing set up [for transition]...all the work was just targeted around their immediate safety...there was just no scope for anything else" (CPA_FG4). The need for more flexible and adaptive supports that could be responsive to the specific needs of YPwSP was consistently implied across all participants.

3.3 | The Need for Responsive Supports

Both CPA-Ps and NGO-Ps reflected on examples of YPwSP yet had positive transitions from care experiences. Responsive support, particularly securing appropriate housing, was pivotal in all their examples.

3.3.1 | Individualised Housing Options

What the YPwSP viewed as appropriate housing in each of their examples varied, highlighting the importance of individually tailored plans rather than a one-size-fits-all model of transitional housing support. Practitioners also recognised the importance of individualised housing options. For example, one CPA-P reflected on the different types of accommodation one young person tried before they found the right fit:

> A young person lived in a residential area; she was engaging in criminal activity and substance misuse, I think she was the age of 16. They put her in a [SIL] placement; she didn't really cope with that whole situation or engaging with the other tenants, she decided to self-place and get her own independent accommodation. She's in TAFE now...she's getting her driver's license...she's thriving.
>
> (CPA_FG6)

The perception that appropriate housing enabled young people to thrive in other life domains was shared by both young people and practitioners. At the time of the interview, only two of the young people in this study, both 18 years, were living in locations they believed to be appropriate for their needs and explicitly linked this to a positive influence on their transition to adulthood. Indy continued to live with her parents, having self-placed there at 17-years. She reflected on how moving home had positively changed her transition trajectory, enabling her to rebuild her relationships with younger siblings and her parents, as well as providing her with a foundation from which to stop using drugs, engage in exercise, and commence study and employment. In contrast, Allira, moved into public housing just after her 18th birthday, a result of being prioritised due to being pregnant and at significant risk from a former partner who she had self-placed with. She described how this housing stability helped prevent her own child from being removed.

CPA-Ps, however, recognised that current CPA funding policies made it challenging to legitimately fund self-placing arrangements. As one CPA-P shared:

> We can't just be paying people who are not carers in terms of our business system and just looking at the red tape aspect of it. So, we can't pay a young person's rent...even though it could be a great space for them
>
> (CPA_FG4)

In instances such as these, frontline CPA-Ps spoke of needing to source alternative funding, such as Queensland's Youth Housing and Reintegration Services (YHARS), to secure housing options that "won't fit the departmental boxes, but we can work with" because it provided "stability" for the young person (CPA_FG4). Some CPA-Ps suggested that young people's self-placing status could be leveraged to have them considered as a priority group for homelessness funding or housing applications, "because they are seen more in need of support", enabling "them to fast track through the system, which can mean

18394655, 2025, 3, Downloaded from https://onlinelibrary.wiley.com/doi/10.1002/ajs4.391 by Info Access & Delivery Service, Wiley Online Library on [24/02/2026]. See the Terms and Conditions (https://onlinelibrary.wiley.com/terms-and-conditions) on Wiley Online Library for rules of use; OA articles are governed by the applicable Creative Commons License

good outcomes". Other proposed strategies for working around this issue included the CPA-P encouraging the YPwSP to use their Centrelink payments to "pay for the rent" and then "I'll give you the food voucher" in lieu of directly paying for housing (CPA_FG4).

3.3.2 | Beyond the CPA

Beyond secure and appropriate housing, it became apparent that the young people in this study needed support for transition beyond what the CPA-Ps could provide. Many of the NGO-Ps acknowledged that, as a voluntary service with smaller caseloads, they were better positioned to build relationships with YPwSP, able to "respond differently" to the CPA, and viewed transition support as a key part of their role (NGO_FG2). Similarly, many of the CPA-Ps, particularly those in the metropolitan area with a longer history of working with the NGO, acknowledged the NGO as an "extra level of support" that "help[s] us with all the [transition] stuff we wish we had time to do...something that a carer might [usually] be doing" (CPA_FG2).

NGO-Ps reiterated the importance of supporting young people's developing agency to "make your own choices" via a harm-minimisation approach that "support[s] you to try and do it in the safest way" and is predicated on "unconditional positive regard" (NGO_FG3). Young people also recognised the NGO's role in building a trusting relationship with them, supporting their completion of transition tasks, including assistance with public housing applications, acquiring a driver's license, reconnecting with formal education, and applications for identification and tax file numbers. Allira described how the NGO raised her awareness of her right to transition support, sharing that her NGO-P told her "what Child Safety can do to help me exit care". Several young people also appreciated how their NGO-P advocated for them and helped "make things go a lot quicker" (Allira) when requesting support from their CPA-P. Others described how the NGO had supported them to get "everything done" (Keira). Several of the NGO-Ps and young people also described how NGO-Ps had helped to (re)build relationships between YPwSP, their CPA-P, and other stakeholders, thus increasing the network of support around the young person to aid their transition.

3.3.3 | Financial Resources

The importance of income support was also identified as necessary for aiding YPwSP's transition from OOHC. Young people who received their own income prior to turning 18 years described how this could help them contribute to household costs in their self-placing arrangements and increase their range of housing options to include private rentals. Personal income also reduced their need to request food vouchers from the CPA, which could be unreliable or conditionally provided when self-placing. Indeed, Keira shared the challenges of trying to contribute to living arrangements without an independent income course, sharing that "now I'm on Centrelink, so I just do [contribute to costs] myself" rather than relying on the CPA. Interestingly, Jedda recounted being dissuaded by a residential care worker to apply for social security payments:

> When I needed to start doing my JobSeeker stuff, they [the worker] said, "No, we're not taking you there. We're not taking you to get free money." I was like, "It's literally called Workforce Australia. If anything, it's like taking me for employment"

Typically, young people in OOHC can access a Youth Allowance payment from 16 years (QFCC 2024). Of the nine young people aged 16 years or above, all except Koen advised that they were currently receiving Centrelink payments. However, an additional special benefit payment can be accessed from Centrelink when aged 15 years if the young person meets the 'independence' criteria (QFCC 2024). YPwSP can be at a disadvantage to their peers who are not under child protection orders as they are unable to meet this criterion:

> It's this really difficult space where if we [CPA] have guardianship, they are able to live at our homes technically...so they can't access that earlier payment...Whereas if you looked at young people who probably had very similar experiences but...weren't removed [into OOHC], they can access that earlier if they leave their home...one group can access that earlier payment, and the other can't.
>
> (CPA_FG4)

Practitioners highlighted the importance of supporting young people to meet their Centrelink mutual obligation requirements so that "you're not making them further vulnerable by not having access to funds" (CPA_FG7). Both CPA-Ps and NGO-Ps also discussed the importance of helping YPwSP to develop the life skill of budgeting. However, there was a small group of CPA-Ps who shared more restrictive practices and views related to financial support for YPwSP and receipt of Centrelink payments whilst they are still under child protection orders. They described how they did not provide resources such as food vouchers, instead encouraging the young person to better budget and access community resources, "because it's about making sure that [YPwSP] has access and the independence, not actually promoting this co-dependency [on the CPA]" (CPA_FG1). Several practitioners, predominantly CPA-Ps, also warned, "There's a level of exploitation that then happens when they have that income" (CPA_FG5) and are in self-placing arrangements. However, there was very limited discussion about the need to support young people to develop the skills to navigate financial exploitation.

4 | Discussion

In the Global North, the developmental journey from adolescence to 'independent' adulthood is becoming more protracted, increasingly recognised as a non-linear and supported period of 'emerging adulthood' (Arnett 2000). Yet, there is international recognition that young people exiting OOHC "have more accelerated and compressed transitions than their peers" (Stein 2016:v). Already recognised as a vulnerable group, this abrupt transition from OOHC itself compounds the disadvantage experienced by this cohort (Mendes 2022; Mendes, Bollinger, and Flynn 2023).

18394655, 2025, 3, Downloaded from https://onlinelibrary.wiley.com/doi/10.1002/ajs4.391 by Info Access & Delivery Service, Wiley Online Library on [24/02/2026]. See the Terms and Conditions (https://onlinelibrary.wiley.com/terms-and-conditions) on Wiley Online Library for rules of use; OA articles are governed by the applicable Creative Commons License

Our findings indicate that the transition from care to adulthood for YPwSP is even more accelerated and compressed than their OOHC peers, driven by (a) the instability and disconnection from formal support that young people experience whilst self-placing, before they 'age-out' of care; and (b) the way in which this instability and disconnection interact to impede access to, and delivery of, any transition planning and support that is available.

Our findings show that living arrangements that meet the needs of young people (be it for safety, connection, or greater freedom)—irrespective of whether they are formally approved or not—can support their transition (see also McDowall 2018). Whilst instability and disconnection were commonly described features of self-placing arrangements, our findings also highlighted examples of when self-placing provided young people with stability. Young people and practitioners alike explained that when self-placing arrangements met the needs of the young person *and* were properly resourced, it provided a platform from which they were able to reconnect with family and education and make healthy changes to their lifestyle, supporting their transition to adulthood.

Conversely, our findings also highlight how being placed in inappropriate yet approved OOHC placements, predominantly residential care, could be the trigger for self-placing, disconnection, and instability. Thus, our findings further expand on the work of others (e.g., Mendes, Bollinger, and Flynn 2023; Moore, McArthur, and Roche 2017) who highlight that young people placed in residential care in Australia have poorer transition outcomes than other care leavers. The inadequacy of residential care must be addressed if we are to prevent self-placing in the first instance and enhance transition outcomes for this cohort. The recommendations of Queensland's recent Residential Care Review, particularly those focused on establishing the right care models and keeping families together and connected, are steps in the right direction (DCSSDS 2024).

Our findings reinforce other Australian evidence that suggests that both young people (Venables et al. 2024a) and practitioners (Venables et al. 2024b) commonly frame self-placing as a young person's choice, suggesting that they have agency in the decision to leave an approved placement to stay elsewhere. Many of the CPA-Ps in this study viewed self-placing as young people *choosing* to be self-reliant, making an early transition to 'independence', limiting their provision of support in response. However, this notion of 'free choice' has been critiqued (CCYP 2021), and our findings suggest that whilst young people may indeed choose to leave an approved placement, this decision is often "nested within layers of context in which the young person may have had *no* choice" (Venables et al. 2024a: 10). The reason this is of relevance to transition support is because the language used to describe YPwSP has implications for the attitudes of practitioners towards them and thus, the way in which they provide support (CCYP 2021).

International evidence indicates that young people who 'age out' of care with limited social support are more likely to have negative transition outcomes than those with support (Storø 2018). Our findings demonstrate that YPwSP experience this lack of support *prior* to exiting care, further compounding their risk of poor transition outcomes. However, the presence of the NGO in the lives of the young people in this study provided not only a supportive social network and positive relationship with adults—both factors associated with *inter*dependence and positive transitions (McDowall 2020; Storø 2018)—but also advocacy that helped to mobilise the CPA and other resources to which they were entitled.

Like in other Australian jurisdictions, Queensland's child protection legislation mandates that the CPA-P must make "active efforts" to ensure that young people's rights under the legislation are upheld, including to have a safe and stable place to live, care arrangements that meet their needs, and support to transition to adulthood. Like previous studies (e.g., McDowall 2018), our findings raise questions as to the extent that YPwSP are having these rights to support met in general, but particularly in transition planning. Our findings clearly demonstrate that the instability and disconnection associated with self-placing hampers transition support for YPwSP. These unmet needs are further compounded by systemic issues, including the availability of social housing and policies within government agencies that restrict funding options to YPwSP. Until social housing stocks can be increased, existing homelessness funding programs within Queensland that prioritise care leavers, such as YHARS, must be continued and expanded to offset the deficit of affordable, safe, and accessible housing. Arguably, those who have histories of self-placing should be prioritised and provided with supported housing packages to ensure they have the requisite life skills to maintain their housing and participate in society.

Current approaches to providing transition planning and support are predicated on young people being in stable and approved placements with a carer who can support their daily care and transition tasks. Our findings highlight that this is not the case for YPwSP, who experience disconnection from formal supports and high levels of instability. Additionally, there is limited evidence on how best to support YPwSP, meaning that practitioners need to rely on their own practice wisdom and frameworks when supporting this cohort (Venables et al. 2024b). More responsive approaches, centred on relational, harm-minimisation, and proactive outreach models, are required. Our findings indicate that the involvement of specialist non-government services, with smaller caseloads compared to the CPA, can play a key role in providing transition support and helping to (re)connect young people with other formal supports. This is necessary, but insufficient. Culture and policy shifts within the CPA that allow frontline CPA-Ps to adopt such an approach, rather than risk-averse practices, are also required. Evidence suggests that the adoption of adolescent-only or transition-focused teams within CPA service centres, rather than mixed-load teams, may support such a shift (Venables et al. 2024b).

The recent introduction of universal extended care in Queensland and in all Australian jurisdictions, supporting care leavers up to 21 years, is a long-awaited and welcome addition (Mendes 2022, 2023). EPCS's provision of financial and practical support is an important start (Queensland Government 2024). However, the disconnection of YPwSP from formal support systems may mean that they are not aware of, or face barriers to accessing, support available to them. Further research that explores YPwSP's knowledge of and access to extended and

18394655, 2025, 3, Downloaded from https://onlinelibrary.wiley.com/doi/10.1002/ajs4.391 by Info Access & Delivery Service, Wiley Online Library on [24/02/2026]. See the Terms and Conditions (https://onlinelibrary.wiley.com/terms-and-conditions) on Wiley Online Library for rules of use; OA articles are governed by the applicable Creative Commons License

aftercare support is required to ensure these initiatives are meeting the specific transition needs of this cohort.

Longitudinal research, or studies involving older care leavers in a retrospective study, is needed to better understand the ongoing impact of young people's access to transition planning and support whilst in OOHC and self-placing. The young people in this study were recruited through a specialist NGO to ensure that they had access to support if required. However, this approach not only reduced the number of young people who could participate but also means that the experiences of YPwSP *without* the involvement of a specialist service like an NGO remain predominantly unknown (see McDowall 2020). We also note that none of the practitioners and only a few of the young people who participated in this study identified as Aboriginal and/or Torres Strait Islander. Given the over-representation of Aboriginal and/or Torres Strait Islander children in OOHC in Australia, proactive efforts in future studies are needed to ensure that their voices are informing the evidence base in this area. We also encourage further research that focuses on the strengths, capacities, and achievements of YPwSP. Many of the current narratives take a deficit approach towards this highly vulnerable group. Further, studies that explore the networks of informal support that aid YPwSP are also needed so that these can be leveraged in future policy and practice.

5 | Conclusion

Evidence related to the needs of YPwSP and how best to support them in general, let alone during the transition from OOHC to adulthood, is embryonic. It is established that self-placing increases the vulnerability of young people in OOHC and contributes to their disconnection from formal supports (Attar-Schwartz 2013; Bowden and Lambie 2015). This paper has built on these prior studies by providing insights into how self-placing can shape young people's access to, and practitioners' ability to provide, transition planning and support. We focused on the period when young people are still under child protection orders (up to 18 years) and, according to Australian and Queensland policy, should be engaged in transition planning and support with the CPA (Queensland Government 2024). Through this paper, we highlight the ongoing gaps in our understanding of the experiences and support needs of YPwSP, as well as examples of good practice. These understandings should inform a more robust transition from care policies that are responsive to the needs of this marginalised cohort. Doing so may help reduce the likelihood of poor life outcomes for this highly vulnerable population as they transition into adulthood.

Author Contributions

Jemma Venables: conceptualization, funding acquisition, writing – original draft, methodology, writing – review and editing, formal analysis, project administration. **Laura Simpson Reeves:** writing – original draft, formal analysis. **Kathy Ellem:** conceptualization, methodology, formal analysis, writing – review and editing. **Karen Healy:** conceptualization, methodology, writing – review and editing. **Joel Cullin:** conceptualization, methodology, writing – review and editing.

Acknowledgements

We would like to thank the young people for their time and sharing their experiences with us. Thank you also to the practitioners who participated for their contributions to this study. We acknowledge the important in-kind contributions of the Queensland Government and the Community Living Association's Brisbane Emergency Response and Outreach Service to this project. We would also like to thank Dr. Madonna Boman and Ms. Juli Richmond for their excellent research assistant work in data collection and preliminary analysis for this study. Open access publishing facilitated by The University of Queensland, as part of the Wiley - The University of Queensland agreement via the Council of Australian University Librarians.

Conflicts of Interest

The authors declare no conflicts of interest.

Endnotes

[1] While the term 'self-placing' is often used in Australia to signify this phenomenon (e.g., Mendes et al. 2020), we recognise that this terminology is not universally accepted and a variety of other, also contested, terms, such as 'absconder', 'runaway', and 'missing', may be used in the literature (CCYP 2021).

[2] At the time of writing, this grant was $1500. The usefulness and adequacy of this payment have been critiqued (see e.g., Mendes 2022).

[3] The NGO is a 24/7 service that provides case-management support, overnight outreach, and support, as well as some overnight accommodation (see also Venables (2023)).

[4] Queensland's CPA operates across six different geographical regions.

[5] We recognise that 'interdependence' is the preferred term in transition from OOHC literature (e.g., McDowall 2020; Storø 2018), but we use the term' independence here as it reflects the terminology used by participants.

[6] Supported Independent Living (SIL) refers to a care arrangement that supports young people aged 15 to 18 years to live in a residential setting, with case and/or youth workers providing support through regular visiting.

References

Arnett, J. J. 2000. "Emerging Adulthood: A Theory of Development From the Late Teens Through the Twenties." *American Psychologist* 55, no. 5: 469–480.

Attar-Schwartz, S. 2013. "Runaway Behavior Among Adolescents in Residential Care: The Role of Personal Characteristics, Victimization Experiences While in Care, Social Climate, and Institutional Factors." *Children and Youth Services Review* 35: 258–267.

Biehal, N., and J. Wade. 2000. "Going Missing From Residential and Foster Care: Linking Biographies and Contexts." *British Journal of Social Work* 30, no. 2: 211–225.

Bowden, F., and I. Lambie. 2015. "What Makes Youth Run or Stay? A Review of the Literature on Absconding." *Aggression and Violent Behaviour* 25: 266–279.

Branscum, C., and T. N. Richards. 2022. "An Updated Examination of the Predictors of Running Away From Foster Care in the United States and Trends Over Ten Years (2010–2019)." *Child Abuse & Neglect* 129: 105689.

Braun, V., and V. Clarke. 2013. *Successful Qualitative Research: A Practical Guide for Beginners*. London: Sage.

CCYP. 2021. *Out of Sight: Systemic Inquiry Into Children and Young People Who Are Absent or Missing From Residential Care*. Vol. 2021, 27–31. Melbourne: Commission for Children and Young People.

18394655, 2025, 3, Downloaded from https://onlinelibrary.wiley.com/doi/10.1002/ajs4.391 by Info Access & Delivery Service, Wiley Online Library on [24/02/2026]. See the Terms and Conditions (https://onlinelibrary.wiley.com/terms-and-conditions) on Wiley Online Library for rules of use; OA articles are governed by the applicable Creative Commons License

Colvin, E., K. McFarlane, A. Gerard, and A. McGrath. 2018. "'We Don't Do Measure and Quotes': How Agency Responses Criminalise and Endanger the Safety of Children Missing in Care in New South Wales, Australia." *Howard Journal of Criminal Justice* 57, no. 2: 231–249.

Commonwealth of Australia. 2021. *Safe and Supported: The National Framework for Protecting Australia's Children 2021–2031*. Canberra: Department of Social Services. https://www.dss.gov.au/system/files/documents/2024-10/dess5016-national-framework-protecting-childrenaccessible.pdf.

DCSSDS (Department of Child Safety, Seniors, and Disability Services). 2024. "Residential Care Roadmap – at a Glance." https://www.dcssds.qld.gov.au/resources/dcsyw/about-us/reviews-inquiries/residential-care-review/residential-care-roadmap-at-a-glance.pdf.

McDowall, J. J. 2018. *Out-Of-Home Care in Australia: Children and Young People's Views After Five Years of National Standards*. CREATE Foundation. https://create.org.au/wp-content/uploads/2023/03/Being-Absent-from-Out-of-Home-Care.pdf.

McDowall, J. J. 2020. *Transitioning to Adulthood From Out-Of-Home Care: Independence or Interdependence?* Parramatta: CREATE Foundation. https://create.org.au/wp-content/uploads/2021/05/CREATE-Post-Care-Report-2021-LR.pdf.

Mendes, P. 2022. "Ending Australia's Status as a "Leaving Care Laggard": The Case for a National Extended Care Framework to Life the Outcomes for Young People Transitioning From Out-Of-Home Care." *Australian Social Work* 75, no. 1: 122–132.

Mendes, P. 2023. ""The Most Significant Child Welfare Reform in a Generation": An Examination of the Strategies Used by the Home Stretch Campaign." *Australian Journal of Social Issues* 59, no. 2: 328–343. https://doi.org/10.1002/ajs4.288.

Mendes, P., J. Bollinger, and C. Flynn. 2023. "Young People Transitioning From Residential Out-Of-Home Care in Australia: The Case for Extended Care." *Residential Treatment for Children & Youth* 40, no. 3: 348–362.

Mendes, P., R. Standfield, B. Saunders, et al. 2020. *Indigenous Care Leavers in Australia: A National Scoping Study*. Melbourne: Monash University and SNAICC.

Moore, T., M. McArthur, and S. Roche. 2017. *Safe and Sound: The Safety Concerns of Young People in Residential Care*. Canberra: Institute of Child Protection Studies.

PC. 2024. *Report on Government Services 2024, Part F, Section 16: Child Protection Services*. Canberra: Productivity Commission. https://www.pc.gov.au/ongoing/report-on-government-services/2024/community-services/child-protection.

QCPCI (Queensland Child Protection Commission of Inquiry). 2013. *Taking Responsibility: A Roadmap for Queensland Child Protection*. Brisbane: QCPCI.

QFCC. 2024. *Absent From Care Insights Paper*. Brisbane: Queensland Family and Child Commission.

Queensland Government. 2024. "Planning for When You Turn 18." https://www.qld.gov.au/youth/support-services/young-people-in-care/leaving-care/planning-when-turn-18.

Stein, M. 2016. "Foreword." In *Young People Transitioning From Out-Of-Home Care*, edited by P. Mendes and P. Snow. London: Palgrave Macmillan.

Storø, J. 2018. "To Manage on One's Own After Leaving Care? A Discussion of the Concepts Independence Versus Interdependence." *Nordic Social Work Research* 8, no. sup1: 104–115.

Venables, J. 2023. "Features of Service Delivery That Young People in Out-Of-Home Care Who 'Self-Place' and Stay in Unapproved Placements Value When Accessing a Specialist Support Service." *Child and Adolescent Social Work Journal*: 1–13. https://doi.org/10.1007/s10560-023-00939-8.

Venables, J., J. Cullin, K. Ellem, and K. Healy. 2024a. "Diminishing Their Voice Through Choice? How 'Self-Placing' in Out-Of-Home Care Affects Children and Young People's Participation in Decision-Making." *European Journal of Social Work*: 1–14. https://doi.org/10.1080/13691457.2024.2408429.

Venables, J., C. Warrell, J. Cullin, K. Ellem, and K. Healy. 2024b. "Approaches to Supporting Young People in Out-Of-Home Care Who 'Self-Place' in Unapproved Locations: Perspectives of Statutory Child Protection Practitioners." *British Journal of Social Work*: 1–20. https://doi.org/10.1093/bjsw/bcae131.

18394655, 2025, 3, Downloaded from https://onlinelibrary.wiley.com/doi/10.1002/ajs4.391 by Info Access & Delivery Service, Wiley Online Library on [24/02/2026]. See the Terms and Conditions (https://onlinelibrary.wiley.com/terms-and-conditions) on Wiley Online Library for rules of use; OA articles are governed by the applicable Creative Commons License

European Journal of Social Work

ISSN: 1369-1457 (Print) 1468-2664 (Online) Journal homepage: www.tandfonline.com/journals/cesw20

Diminishing their voice through choice? How 'self-placing' in out-of-home care affects children and young people's participation in decision-making

Jemma Venables, Joel Cullin, Kathy Ellem & Karen Healy

To cite this article: Jemma Venables, Joel Cullin, Kathy Ellem & Karen Healy (2025) Diminishing their voice through choice? How 'self-placing' in out-of-home care affects children and young people's participation in decision-making, European Journal of Social Work, 28:4, 701-714, DOI: 10.1080/13691457.2024.2408429

To link to this article: https://doi.org/10.1080/13691457.2024.2408429

© 2024 The Author(s). Published by Informa UK Limited, trading as Taylor & Francis Group

Published online: 27 Sep 2024.

Submit your article to this journal

Article views: 1664

View related articles

View Crossmark data

Citing articles: 1 View citing articles

Full Terms & Conditions of access and use can be found at
https://www.tandfonline.com/action/journalInformation?journalCode=cesw20

EUROPEAN JOURNAL OF SOCIAL WORK
2025, VOL. 28, NO. 4, 701–714
https://doi.org/10.1080/13691457.2024.2408429

Diminishing their voice through choice? How 'self-placing' in out-of-home care affects children and young people's participation in decision-making

Jemma Venables, Joel Cullin, Kathy Ellem and Karen Healy

School of Nursing, Midwifery and Social Work, The University of Queensland, St Lucia, Australia

ABSTRACT

In liberal welfare states, legislation acknowledges the State's responsibilities to uphold specific rights when meeting the care and protection needs of children and young people (CYP) placed in out-of-home care (OOHC). In Queensland (Australia), where this study was conducted, the State's child protection legislation was recently amended to reinforce CYP's right to participate in decisions about their lives whilst in OOHC. Whilst most CYP in OOHC stay in approved foster/kinship or residential placements, there are some who leave approved OOHC placements to stay in unapproved locations (e.g. family/friend's houses or the streets). The term 'self-placing' signifies this phenomenon in Queensland, although this terminology is contested. Those who self-place are disconnected from support and experience increased vulnerability including homelessness and criminalisation, as well as barriers to education, income support, and health care. This paper draws on interview data from 11 CYP with experiences of self-placing in OOHC. We report specifically on the: reasons they left approved placements; extent to which their voices were considered by formal systems; and practices that enabled them to feel they had a voice in the decisions that impact on them. Implications of these findings for enhancing the safety, connection, and wellbeing of this cohort are discussed.

ARTICLE HISTORY
Received 14 December 2023
Accepted 7 September 2024

KEYWORDS
Participation; children and young people; out-of-home care; self-placing

Introduction

The United Nations Convention on the Rights of the Child (UNCoRC) stipulates that children and young people (CYP) should be cared for by family unless their safety and wellbeing cannot be secured. The State may remove CYP and place them in out-of-home care (OOHC) as a mechanism for meeting their care and protection needs. Whilst most CYP in OOHC stay in approved foster, kinship, or residential care placements, there is a small group who leave their approved OOHC placements to stay in unapproved locations (e.g. family/friend's houses or living on the streets). In Queensland (Australia), where the study was conducted, the term 'self-placing' is used to signify this phenomenon, although this terminology is contested (Commission for Children and Young People [CCYP], 2021). CYP who self-place remain under the care of the State, despite staying in unapproved locations.

Whilst CYP are in OOHC, the statutory child protection authority regularly makes decisions about their lives, including where and with whom they live; the nature and frequency of contact with family

CONTACT Jemma Venables jemma.venables@uq.edu.au School of Nursing, Midwifery and Social Work, The University of Queensland, St Lucia 4072, Australia

© 2024 The Author(s). Published by Informa UK Limited, trading as Taylor & Francis Group
This is an Open Access article distributed under the terms of the Creative Commons Attribution-NonCommercial-NoDerivatives License (http://creativecommons.org/licenses/by-nc-nd/4.0/), which permits non-commercial re-use, distribution, and reproduction in any medium, provided the original work is properly cited, and is not altered, transformed, or built upon in any way. The terms on which this article has been published allow the posting of the Accepted Manuscript in a repository by the author(s) or with their consent.

and others; and the types of health and social services that are provided (Wilson et al., 2020; Woodman et al., 2023). These decisions have significant and long-lasting implications for CYP's connection, wellbeing, identity, and safety (Wilson et al., 2020). Despite the gravity of such decisions, CYP in OOHC routinely report low levels of participation in decisions about their lives (Nylund, 2020).

Arguably, CYP in OOHC who self-place face additional barriers to participation, due to their disconnection from formal supports and increased vulnerability (Bowden & Lambie, 2015). We report on a qualitative study exploring the experiences of CYP in OOHC who self-place. We particularly consider the extent to which they feel involved in decisions about their lives and what facilitates and inhibits their participation. We draw on Shier's (2001) five-level 'Pathway to Participation' model in our conceptualisation of 'voice' and 'choice'. We use 'voice' as an umbrella term for the extent to which CYP's views *on* decisions are considered, reflective of Shier's first three levels of participation. We use 'choice' when referring to CYP's involvement and influence *in* decision-making – akin to Shier's final two levels.

Children and young people's right to participation in child protection

Increasingly, CYP are recognised as social actors who are experts in their own lives, capable of contributing to decisions, rather than being passive objects or 'adults-in-the-making' (James, 2007; Stoecklin, 2013). The UNCoRC holds that CYP have a right to information, to express their views on matters that impact their lives, and for their views to be given due weight in accordance with their age and maturity. Evidence suggests that participation in decision-making has social, psychological, and emotional benefits, building problem-solving capacity, self-esteem, and a sense of belonging (Stafford et al., 2021). Child protection research shows that involving CYP aids more accurate and responsive decisions that enhance safety and wellbeing (Woodman et al., 2023).

Legislative framework for participation in child protection in Queensland (Australia)

Like most jurisdictions in the Global North, CYP's right to participate in decision-making processes is enshrined in all Australian state and territory child protection legislation. In Queensland, where this study was conducted, the guiding legislation is the *Child Protection Act 1999* (Qld). Whilst the requirement to obtain CYP's views was existing, in 2022 the Act was amended to reinforce their rights and to strengthen their voices in decisions that affect them. The Act also contains a Charter of Rights for CYP in care, which reiterates their right to: be consulted about, and take part in making decisions affecting their life; be given information about decisions about their future; make a complaint if their rights are not being upheld.

The challenge of participation in a complex and risk-averse context

Despite the benefits of CYP's participation in child protection processes, internationally, authors note that it is difficult to achieve meaningfully in practice (McCafferty & Mercado Garcia, 2023; Woodman et al., 2023). This lack of participation leaves CYP feeling disempowered, uninformed, and scared about the choices adults make about their lives (Toros, 2021; van Bijleveld et al., 2015), and even cynical about future invitations to participate (Cashmore, 2011). Literature from across the Global North identifies 'persistent systemic, cultural and practice-operational barriers are preventing children to have a voice, rendering many … invisible and unheard' (Stafford et al., 2021, p. 2).

The legalistic and bureaucratic nature of child protection in many liberal welfare states privileges a 'protectionist' approach to practice, in which practitioners are positioned as the 'adult expert' charged with ensuring decisions are made in CYP's 'best interests' (McCafferty et al., 2021). Nylund (2020) discusses *adultism* – where adults exert power over CYP due to a belief they are not capable – and *protectionism* – the notion that CYP are vulnerable and in need of protection – as particular barriers to participation, which negatively impact on CYP's ability to exercise self-determination (Stafford et al., 2021). In the increasingly complex and risk adverse environment of child

protection, McCafferty et al. (2021) argue that practitioners make increasingly protectionist and interventionist decisions, thus reducing opportunities for CYP's views to shape decisions.

The vulnerability of CYP in OOHC increases when they leave formal placements to stay in unapproved locations, as these arrangements are often temporary, and insecure (Bowden & Lambie, 2015). Further, those who self-place are disconnected from support, at increased risk of homelessness and exploitation, have increased contact with the justice system, disengage from education, face barriers to mental and physical health care, and experience ongoing trauma and crisis (Bowden & Lambie, 2015). It is plausible that this increased risk borne by both the CYP and the child protection authority, may result in increasingly protectionist and interventionist practices. The authors of this paper were unable to locate any literature that explores participation in child protection processes from the perspective of CYP who are self-placing. This paper seeks to address this gap by answering the research question: 'what are CYP's experiences of participation in child protection decisions and processes whilst self-placing away from approved OOHC placements?'

Method

We report on a subset of qualitative data from a study exploring the needs of, and responses to, CYP in OOHC who self-place in Queensland (Australia). We sought to privilege the perspectives of CYP, upholding their right to express their views on matters that impact their lives. This project received ethical clearance from the University of Queensland's Human Research Ethics Committee (2022/HE000699) and approval from the Director General of Queensland's child protection authority.

Recruitment

A purposive sample of CYP with an experience of being in OOHC in Queensland and self-placing were recruited. To reduce risk of harm, only CYP currently or recently supported by a specialist service funded by the Queensland Government to support CYP in OOHC who self-place were eligible. Practitioners within the specialist service distributed recruitment material to CYP and where relevant their guardian. Members of our research team also spent time at the three service locations to discuss the project with interested CYP and as an attempt to ensure those with negative views of the service felt able to participate. CYP were able to contact the research team directly to discuss their interest. However, the majority elected to use a 'consent to contact form', which gave their consent for the research team to either contact them or a trusted support person to discuss their participation.

Participants

Eleven CYP participated in the study. In accordance with the ethical clearance, the 7 participants under 18-years required guardian consent *and* the young person's assent. Queensland's child protection authority provided this consent. The 4 participants who were 18-years-old provided their own consent.

Participants were aged between 13 and 18 years. They reported being in OOHC for between 3–17 years. Most participants were female ($n = 9$) and non-Indigenous ($n = 7$). Each participant was given a pseudonym, which is used to refer to them throughout this paper. Participant pseudonyms and demographics are outlined in Table 1.

Data collection

A one-off, semi-structured interview was conducted with each participant between August and December 2022. Interviews explored participants' experiences of self-placing, as well as their needs and any provided supports. Interviews lasted between 24 and 113 min ($\bar{x} = 51$ mins) and

Table 1. Participant pseudonyms and characteristics.

Pseudonym	Age (years)	Gender	Aboriginal and/or Torres Strait Islander Status	Reported time in OOHC (years)
Arya	16	F	Non-Indigenous	4
Grace	16	F	Non-Indigenous	7
Eli	18	M	Non-Indigenous	3
Francine	15	F	Aboriginal	11
Catriona	18	F	Non-Indigenous	3
Rhianna	13	F	Aboriginal	4
Tameika	18	F	Non-Indigenous	13
Billie	17	F	Non-Indigenous	5
Decca	18	F	Non-Indigenous	11
Evelyn	17	F	Aboriginal	17
Tomas	16	M	Aboriginal	16

were conducted at a safe location of their choosing, such as their home or a library. Ten of the 11 participants consented to their interview being audio-recorded. Detailed field notes were taken for the remaining interview.

Data analysis

Interview recordings were professionally transcribed verbatim, de-identified and uploaded into the qualitative data management programme, NVivo. Our thematic analysis was guided by Braun and Clarke's (2013) widely accepted approach. We familiarised ourselves with the data, each inductively coding at least 3 transcripts. We then collaboratively established an initial coding frame, which was subsequently applied to all transcripts. This process involved discussing the production of new codes and resolving any discrepancies. Authors A and B then looked for patterns of meaning across the data associated with the research foci of this paper. Candidate themes were discussed with the other authors and a final list of themes agreed upon. Similarities and differences between the themes were explored throughout the analysis process.

Results

Four themes related to CYP's experiences of voice and choice in decisions about their lives when self-placing were identified.

When self-placing, the notion of 'choice' is complex

Participants offered varying reasons for leaving approved OOHC arrangements to stay elsewhere, with most sharing examples of when they had actively chosen to leave, and instances where they felt forced to self-place due to the choices of others.

Self-placing as a mechanism for exercising agency

Underpinning all descriptions of entering self-placing arrangements was a perception that approved OOHC placements were not meeting the needs of CYP. Several participants felt that the placement matching process failed to adequately consider their need for connection with family, friends, partners, school, and/or employment. For many, self-placing was perceived as a mechanism for exercising their personal agency in response to this lack of voice and choice within the OOHC system. Rhianna's statement, 'I'm choosing where to live, I have a choice. And my choice matters', exemplifies this perception.

Further, interviewees discussed how they self-placed in response to the features of the OOHC placements they were given and had no say in – factors such as location, homeliness/ suitability of the

physical space, who they were placed with, qualities of workers, house rules, and the availability of transport support. For example, Eli recounted:

> they'd sent me around five [residential care] houses in three months, and by the fifth house, because they just kept declining in quality … I'd had enough of it, so I packed my bags and I left.

For others, like Tameika, the decision to self-place was motivated by a desire for a 'normal' life and to avoid placement instability:

> I self-placed because I knew that my foster care placements don't hold up well and I didn't want to mess around and go to all these other places … I felt that self-placing, going to live in normal people houses with none of the mandates that these people have, it might be the closest to normal you might get.

Tameika's comments highlight how the rules of approved placements can make CYP feel 'othered' compared to their peers who are not in OOHC.

Self-placing as a 'constrained' or 'forced' choice

Participants also emphasised their lack of choice in some instances of self-placing, describing situations where the decision to close their OOHC placement was made by either the child protection authority or the carer – mainly residential care providers. They described this as being 'kicked out' or 'forced to leave'. Several participants explained that their approved OOHC placements had been closed due to their behaviour, namely anti-social behaviour, or repeated unapproved absence. Participants' motivations for being frequently absent from placement varied. For example, several participants, including Grace and Catriona, both reported how their choice to spend extended periods of time at partner's and friends' houses resulted in placement closure. Participants also described specific negative experiences in approved placement contexts (e.g. bullying, or exposure to violence/self-harm), which they felt made it untenable for them to remain. For example, Rhianna shared:

> I stopped going there because of … two males in the house … One of them touched me, so he got kicked out, but the other one is being weird. So I stopped going there for a while … every time I go back I just get the bad memories of what's happened to me … since I didn't go there for a long period of time, the placement services decided to close my placement there and I got kicked out and so I moved in properly with [self-placing arrangement].

Rhianna's decision to avoid being at the house was a constrained one – a response to not feeling safe – as was the 'decision' to self-place following the resultant placement closure.

In contrast, Eli's stories illustrates how his own anti-social behaviour resulted in the closure of placements:

> I was constantly becoming quite loud and angry and punching things and destroying things. I deserved what I got. Through my eyes anyway, just in a moral sense, I deserved what I got when they kicked me out.

Eli's story also speaks to the implications of placement breakdown for some CYP in terms of their voice and choice with respect to personal belongings:

> they'd packed up my whole bedroom and they'd taken it to the tip. And that was a lifetime of stuff for me at the time … everything that I had even a feint memory of and attachment to, right the way through to things that I hold very near and dear to my heart, they [residential care provider] … took it all to the tip.

Across Eli and other participants' accounts, many of their described 'choices' are significantly constrained, and a context-sensitive lens casts them in a different light. Some narratives speak to the compounding nature of these constrained choices and diminishing voice.

Self-placing can afford certain freedoms, but can also further limit voice and choice

Some participants spoke of benefits of self-placing – for example, being able to connect at will with others or engage in activities that were not available to them in residential care. In other ways,

however, a young person's voice and agency can be further limited while self-placing – particularly regarding a lack of housing security/tenure and reduced access to resources.

Self-placing allows connection

Participants described the significant benefit accompanying self-placing of being able to spend time with important others at will, in contrast with their experiences of being constrained by rules and the need for approval when in residential care. For example, Rhianna stated:

> we couldn't go see anyone unless we had specified contact days. But since I'm now self-placing, I can go see Dad whenever I want to, I can see Grandma, I can see my aunty, I can see everyone. We weren't really allowed out of the house at resi, unless it's all been approved.

For Arya, the specialist support service assisted her with transport to enable social connection while she was self-placing. When in residential care, however, this support was not available:

> [support service] are a lot more lenient in the fact that if you tell them where you need to go, they'll take you there. But [at residential care], you need approval for everything, so it's a bit harder. And if I wanted to go somewhere after 5:00, I can't, because the person that approves it isn't clocked on.

For participants, self-placing granted them greater autonomy regarding important relationships – a key developmental need in adolescence. This highlights the how restrictions and bureaucracy in OOHC can constrain informal connections for CYP.

Lack of security/tenure

Despite this freedom, several participants spoke about the lack of security/tenure that can come with self-placing arrangements, and some offered cautionary advice to those who might consider self-placing. For example, Arya stated, the 'majority of the people that self-place are in really shitty situations and self-place in places that aren't positive'. When asked if she would self-place again in the future, Arya responded:

> I think I'll have a place and then I want to live there and then I can't live there anymore. I'll get kicked out and then I'll be at square one … it's just really shitty when you just don't know where you're going to be living or that feeling where you just don't know where you're going to live tomorrow, where you're going to be next week.

Like Arya, most respondents reported unplanned breakdowns of often multiple self-placing arrangements. Reasons for self-placing arrangements ending included disputes with hosts, hosts' changing circumstances (e.g. birth of a child, or other family members needing to stay), and when the young person's presence was no longer useful to the host. For example, one participant spoke of being told to leave a self-placing arrangement once she got a job because she was no longer helping enough with caring for the host's children.

Participants, including Eli, also described finding it difficult to establish a pathway back into approved care once they had self-placed:

> doors open up with family, and so they abandon their placements, they pack their lives up and they move back in and it collapses within a matter of weeks or months, but they can't just go back to that placement. That's no longer available. Someone else is now living in your room.

Further, participants highlighted that the choice to leave approved care was not always accompanied by a free choice about where they would go. Options were again constrained by various factors, including the nature of their informal support networks, their age (e.g. adults seeking flatmates online often don't want to live with somebody under 18-years), and their access to resources (welfare support, work income, food vouchers etc. from the Department).

Reduced or regulated access to resources

As CYP who self-place remain in OOHC, the child protection authority's responsibility to meet basic needs and rights remains. However, respondents explained how self-placing could result in reduced

or regulated access to resources. Arya discussed how it was often hard to find out what you were entitled to whilst self-placing, commenting:

> the thing that really pisses me off about the system is, I don't get told about the support until it's way after, and then it'll be little bits here and there. But I think that all kids should know about all the services and support they can get while they're in the Department.

Participants also expressed how their needs and access to resources change when self-placing; highlighting that many resources including food, clothing, menstrual products, and transport are no longer automatically part of their care/living arrangement. As such, participants reported needing to pro-actively seek these, drawing on varying degrees of knowledge of their rights, and ability to self-advocate.

Some participants said that 'rules' cited by their Child Safety Officer (CSO) regarding material support were an impediment to having needs met when self-placing. Whilst it is not known if such rules or procedures do in fact exist, either as formal policy or as local practices, participants believed they were in place. For example, Francine reported:

> … I think this is ridiculous … kids should be able to get things that they need. For example, toiletries, especially if you're a female. [CSO] only provides [department store] vouchers for clothes and stuff like that every four months … I have contacted him … I couldn't wait because I needed new clothes … for winter … He just told me I had to wait till I was due for it.

Here, Francine describes feeling as though her own assessment of her needs was overridden by compliance with procedures.

Participants frequently expressed that access to resources was contingent upon certain behaviour on their part. Some, such as Arya, spoke of the need to be strident in efforts to obtain basic entitlements:

> You've got to really follow up on them all the time, constantly, like calling the office. And a lot of kids don't do that, that's why they don't get it, because they can't be fucked calling them and telling them to do their job. But I always did because I knew what I had to do. If I wanted to get something …

Others spoke of only being given resources if they met their worker in a particular location (e.g. child safety service centre). Eli spoke of the challenges in meeting this obligation when self-placing:

> All I wanted from them was the food money. That's all I wanted and that's all I thought I needed from them. And I had to go and pick it up each time … I had to bus it. I had to spend money that I'd begged off of strangers to spend on a bus ticket to get there.

Others also described not receiving support until some aspect of their circumstance changed. For example, Decca expressed her understanding of the child protection authority's responsibility to provide material support such as food vouchers but added that she did not reliably receive such support until she became pregnant.

Another challenge faced by some participants was the rule that basic resources such as food were provided for their personal use/consumption only and may be withheld if the CSO believed they would share the resource with others. Participants shared examples of how they tried to convey the reality of their self-placing circumstance to change this decision. For example, explaining that sharing food was their contribution to the household and helped to sustain the self-placing arrangement. Or, in Evelyn's case, it was the need to use shared household food storage – where food might be taken – that was a challenge – '[CSO] says only for me; but I tell her I can't just buy food and put it in my room; I have to put it in the fridge'. Others reported giving up on requesting even basic provisions after repeated denials. For example, Francine, who self-placed with her parents shared:

> … my parents struggle. That's why I try to rely on [CSO] to give me those things so I can help my mum and dad out with some of the foods … so that they don't always have to pay for my school lunches … even though [CSO] does say, 'Is there anything you need? I can help you with it'. But when I ask him for it, he can't provide it at the time. It's just to the point where I just don't ask him for things anymore.

Like Francine, the timeliness of support provision was critical to CYP feeling their requests and needs whilst self-placing were being taken seriously by workers.

Relationships with workers mediate voice

Most participants described finding it hard to establish trust in relationships in general, for example sharing that they 'find it hard to talk to people … hard to maintain a relationship … I prefer to just keep things to myself'. Subsequently, many found it challenging sharing their voices and concerns with workers, particularly those with whom they had not established trusting relationships. Participants tended to speak more positively of their relationships with non-government providers, particularly the specialist self-placing support service they were engaged with. They reported feeling able to share more openly within these trusting relationships:

> The best thing about [specialist service practitioners] is that they're kind and they're very understanding and they don't make you feel like you need to do something … when you hang out with them, it's not like hanging out with a social worker. It's like hanging out with a friend because you're able to have that connection with them … They make you feel comfortable. (Francine)

In contrast, only a few provided examples of positive relationships with a statutory child protection officer. However, all described negative or ruptured relationships with statutory practitioners. For example, Arya reflected,

> the [CSOs] that I've had previously, majority of them have just cared about their jobs. I had one that really did care about me and I really liked her and then she left … and then I had to have a different one.

Due to frequent staff changes, several participants reported not knowing the name of their current CSO, with one reporting that they did not even have a CSO. Other factors, including personality clashes, high caseloads and a lack of timeliness and responsivity were cited as contributing to difficulty in establishing relationships of trust with statutory officers. For example, Evelyn spoke of the challenges in connecting with her CSO and how this diminished her trust and willingness to engage in the relationship:

> … she doesn't really answer me … doesn't get back to me … then just stresses me out, especially when we have no food … most of the time she can't even get the stuff. And it'll just take a month at the most … That's why I don't really bother with her.

In contrast, for Decca, the fundamental nature of the statutory child protection role affected her ability to trust, because 'they were the ones that took me from my family, so I really hated them'. This limited her willingness to engage with them.

These ruptured and disconnected relationships served to constrain their voice. For some, this meant that self-placing felt like 'you're doing it all on your own and have no support from anyone' (Arya). The participants who shared these views positioned themselves as *outside* of the child protection system. This meant that they believed they did not have a voice in, and often were not aware of, the decisions that were being made about them. Some indicated that the decisions of the child protection authority were almost irrelevant to them because they were self-placing and 'going it alone'.

Voice is amplified through responsive support and advocacy

Participants reported numerous instances in which their ability to have a voice and/or participate in decision making was contingent on the provision of practical support, advocacy, and/or system navigation support. Most examples of this related to their engagement with the specialist support service.

Practical support

Several participants discussed how they were able to engage in decision-making process with various stakeholders simply by being transported to appointments, particularly those with

Centrelink (Australia's social security provider), housing, education/training and health providers. The practical support to attend such important meetings was particularly valuable to Decca during her pregnancy:

> Getting me onto Centrelink, helping me with [accessing] money so I could get furniture, a lot of stuff, take me to my appointments for ultrasounds and stuff like that, which is a big thing if you don't do that. Child Safety can get involved and try and take your child.

For Decca, demonstrating that she was actively involved in important decisions and processes related to her health and wellbeing had implications for her ability to avoid the removal of her own child.

Advocates and system navigators

When asked about their involvement with the specialist support agency, every respondent spoke positively about their experiences, describing various manifestations of responsive support and most notably, allyship and advocacy. For example, Eli noted workers from this agency advocated for him with the child protection authority:

> Yeah, they've been a voice for me with Child Safety. If they're not doing the right thing or weren't doing the right thing, my [specialist support] case managers have stood up and called and given them hell, so that they'll actually do what they're supposed to do … They've gone above and beyond for me.

Like Eli, all participants indicated that they received resources such as food, clothing or phone credit from the child protection authority much faster once this specialist support service had requested it on their behalf. They valued not having to do some of the pro-active self-advocacy themselves. For example, Francine shared, 'if you had a bad CSO, they're able to get in contact with him and fix all of that for you, instead of you personally having to do it, like if you don't feel comfortable doing it'.

Others highlighted the advocacy and system navigation work that the specialist support service undertook on their behalf. For example, assistance in obtaining social security payments, housing and (re)engaging with school. Again, Francine explained how the specialist service could act as a proxy in these stakeholder meetings, particularly when she felt unable to share her own story:

> I missed out on two years of my schooling and [specialist support service] actually helped me get back into school. They came with me to my school interviews … they were just there as another … support person to be there, to explain anything that you don't feel comfortable explaining.

Other participants also explained how the specialist service would bring different stakeholders together, thus amplifying the voice of the young person across their required formal support networks. As Tameika commented:

> They tend to work with other organisations very swiftly … And as long as I gave consent, they could all talk about stuff, and they'd talk about surrounding issues or whatever. Because that way they could all form a plan of attack.

The specialist service, as a non-statutory agency, is legally and contractually required to obtain young people's consent before disclosing information to other stakeholders. This process of seeking consent enabled Tameika to have choice and control over what information the specialist service shared and with whom. Notably, the statutory child protection authority does not have such obligations. This means that gaining CYP's consent prior to sharing information with stakeholders involved in their care would be at the discretion of the CSO.

Discussion

Despite the UNCoRC and child protection legislation across the Global North enshrining CYP's rights to participate in decisions that impact their lives, it is well established in the literature that their

participation is limited in practice (McCafferty & Mercado Garcia, 2023; Woodman et al., 2023). This paper has extended prior studies on CYP's participation in child protection processes by focusing specifically on the experiences of those who self-place. Our findings indicate that the disconnection of CYP from the child protection authority whilst self-placing creates further barriers to their meaningful participation in decisions about their lives; compounding the disadvantage already experienced by this cohort. Yet, paradoxically, the participants in this study reported that at least one of their self-placing episodes was driven by the desire to have *more* choice and autonomy over their lives than was possible within an approved OOHC placement, most notably residential care placements.

While there was no one reason why participants in our study self-placed, a systemic view of the phenomenon suggests that the 'choice' to do so was often nested within other layers of context in which the young person may have had *no* choice. For example, our analysis indicates that self-placing was often preceded by a lack of voice and choice in placement decisions and restrictions within these approved placement contexts, particularly regarding activities and contact with family and friends. This may reflect challenges associated with the scarcity of placements, particularly for CYP with behavioural issues (Moore et al., 2017). Our findings echo those of Byers et al. (2023), who assert:

> It is essential that youth continue to have voice and choice in the placement decisions made, including where and with whom they live, and as developmentally appropriate, the rules, restrictions, and privileges of their placement. Together these actions will improve overall fit of placements for youth and promote a sense of normalcy, belonging, and sustained family connection. (p. 21)

Notably, participants in our study clearly distinguished between situations where self-placing was an active choice, versus times they felt they had no other option due to the approved OOHC placement not feeling-safe (see Moore et al., 2018), or due to the placement being closed by the provider/child protection authority due to their behaviours. For example, several of those in our study described instances where their residential care placements were closed due to frequent and/or extended unapproved absences. This is problematic, as whilst CYP were seeking greater contact with their family and friends, they often still valued, and indeed required, the resources and support provided to them by their formal placement. This was particularly important when they faced relationship ruptures with family and friends and then felt they had no place to return to.

Again, like Byers et al. (2023), our findings suggest that some CYP would benefit from shared-care models, where they can be supported to spend time in the home of family members whilst retaining the support and resources of an OOHC placement. Supporting CYP to maintain contact with family is important because even if formal reunification is not an option, many in OOHC still turn to their families for emotional and practical supports (Byers et al., 2023). Furthermore, most CYP with an OOHC experience will return to, or at least continue relationships with, their birth family after exiting the care system and into adulthood (Courtney et al., 2011). However, several participants in our study indicated that the households of family they self-placed with may lack sufficient resources (e.g. food) and may not always feel safe. Shared-care models may therefore enhance the safety and wellbeing of CYP who would otherwise self-place, by facilitating connection whilst also providing a safety-net of support.

When self-placing, participants reported being disconnected from and even 'outside' of formal decision-making processes about their lives. They reported challenges in having requests for resources addressed in a timely manner due in part to ruptured relationships and/or limited contact with key workers, which was compounded by instability caused by staff and placement turnover as well as high caseloads (see also Moore et al., 2018; Toros, 2021). Shier's (2001) model of participation would frame this as a lack of both *openings* (which are established through the commitment of practitioners supporting CYP) and *opportunities* (i.e. practice environments which enable participation to occur). Research suggest that practitioners' lack of time to work directly with CYP is a main barrier to their participation in child protection (van Bijleveld et al., 2015) as

are other 'organisational barriers, such as a focus on risk management and bureaucratic constraints' (van Bijleveld et al., 2015, p. 137); arguably factors which are elevated when CYP self-place.

When in approved OOHC placements, it is the responsibility of the carer to provide CYP with food, clothes and other necessities – funded by the child protection authority. However, when CYP self-place there is no approved 'carer' charged with this responsibility or provided with such resources. In such instances, CYP's rights and needs remain the same; however, meeting those rights and needs may be even more challenging as the responsibility for daily needs falls to the child protection authority and thus the allocated CSO. Within this context, the participants in our study indicated that the onus often fell to them to self-advocate to their CSO and other services to request basic resources. In doing so, participants were leveraging the child protection agency's *obligation* (Shier, 2001) to support their participation in decision-making about their care.

Like McCafferty and Mercado Garcia's (2023) systematic review, our findings also indicate that relationships are an important determining factor in CYP's participation in child protection. The positive impact of relationship-based models of practice for CYP in and transitioning from OOHC is also well established (Mendes & Purtell, 2020). Our findings support and extend those from previous research on the experiences of CYP self-placing in Queensland. Like Venables (2023), this study also found that trusting relationships, particularly with non-government services, can help CYP (re)connect with other formal service providers and to participate in decision-making by facilitating their agency and recognising them as worthy and capable individuals, and making them feel safe to share their circumstances and seek support. Together, these factors help counter adultism and protectionist responses by privileging the voices of CYP and ensuring their understandings of needs, safety and risk are included in decision-making (Toros, 2021; van Bijleveld et al., 2015).

Our findings also show how practitioners can act as allies and advocates for CYP. Work by Kennan et al. (2018) has also evidenced how advocates can encourage participation in child protection contexts. All participants in our study recognised that both statutory and non-government practitioners could undertake the role of ally and advocate. Notably, statutory officers who acted as advocates were viewed as an exception, whilst non-government organisations were much more routinely cast in this role, as they were located outside the statutory system (see also Venables, 2023).

Part of being an advocate is also ensuring that CYP have information about available resources and upcoming decisions that are relevant to them. Previous research has highlighted that decision-making spaces are often not inclusive nor conducive to fostering CYP's participation (Kennan et al., 2018; McCafferty & Mercado Garcia, 2023). As such, decisions also need to be made in places that are accessible to CYP – this may involve the provision of practical support such as transport or access to phones or devices for online meetings.

Strength and limitations

Aligned with a child-rights focus, this study sought to privilege the voices CYP in OOHC who self-place; a cohort considered particularly 'hard-to-reach'. This is reflected in the small sample ($n = 11$) and reliance on self-report data. Whilst our purposive sampling approach enhanced the feasibility of recruiting CYP with experiences of self-placing and ensuring they were supported, the use of the specialist service as a gatekeeper may have been a barrier to those with negative experiences of the services participating. Whilst this is a limitation, our study collected rich accounts of CYP's lived experience of self-placing and the implications of this for their voices and choices whilst in OOHC. Despite our small sample, we were able to report on the experiences of CYP aged 13–18-years. However, because of recruiting through one specialist service, our findings only capture the experiences of those within their south-east Queensland catchment. Future research needs to consider the views of CYP outside of south-east Queensland and those not linked to specialist supports.

Conclusion

This paper has explored the experiences of CYP in OOHC who self-place and the implications of this for their participation in decisions that impact their lives. The findings highlight how CYP may self-place as a strategy for gaining more agency over their lives, particularly when approved placements do not adequately meet their needs. However, self-placing also creates additional barriers to the participation of CYP in decisions about their care whilst involved with the child protection system. These are compounded by pressures on child protection systems. Despite these challenges, relationship-driven practices that centre the views of CYP can help to ensure that their voices are still heard, even when self-placing. Relationships with non-government organisation and other trusted adults who act as allies and advocates can also amplify CYP's voices, thus enhancing their participation, connection, safety, and wellbeing whilst self-placing.

Acknowledgements

We would like to thank the young people who participated for their time and valuable contributions to this study. We acknowledge the important in-kind contributions of the Queensland Government and the Community Living Association's Brisbane Emergency Response and Outreach Service to this project. We would also like to thank Dr Madonna Boman and Ms Juli Richmond for their excellent research assistant work.

Disclosure statement

No potential conflict of interest was reported by the author(s).

Funding

This work was supported by University of Queensland [grant number: Knowledge Exchange and Translation grant].

Notes on contributors

Dr Jemma Venables is an early career researcher and lecturer in the School of Nursing, Midwifery and Social Work at the University of Queensland. Her applied research explores the policy/practice interface of systems that support vulnerable children and their families, from the perspective of multiple stakeholders including young people, families and practitioners. Dr Venables' research focuses on enhancing policy and practice in three key areas: (1) responses to young people transitioning from out-of- home care; (2) upholding the rights of children and parents during child protection interventions; and (3) improving outcomes for women and children who have experienced domestic violence.

Joel Cullin is a social worker and individual, couple and family therapist. Joel completed his undergraduate training in Social Work (1998), his Master of Mental Health (Psychotherapy) (2005), and his PHD (2010) at the University of Queensland. Joel's Masters dissertation and PhD thesis both explored systemic thinking about complex problems at multiple levels of abstraction, including the levels of frontline practice in therapy, mental health and other contexts, and policy, and systems reform. Joel has expertise in the theory and practice of therapy, first principles of problem formation and problem resolution, and the trans-disciplinary systems science of cybernetics. Joel has well over twenty years experience as a family therapist and mental health clinician. Joel has worked in an array of public and not for profit contexts and has operated a busy private practice (Brisbane Family Therapy Clinic) since 2004. In addition to university teaching in mental health, Joel has also been a regular provider of private training and professional supervision to other mental health and human service professionals over the past fifteen years. Joel's programme of research is concerned with systems thinking and its application to context-sensitive approaches to therapy, mental health and human service work, and to social policy formulation and reform of care systems.

Dr Kathy Ellem is a Senior Lecturer in the School of Nursing, Midwifery and Social Work at The University of Queensland, Australia. She has previously practiced as a social worker in both government and non-government sectors, working with children, young people and their families in disability and child protection services. As a social worker, she has been actively involved in casework; case management; behavioural intervention; group work; community development; and individual, citizen and systems advocacy. She has taken on family leadership roles in the disability sector, including her former role as President of Queensland Parents for People with a Disability. She is a member of the Queensland board of the Australasian Society for Intellectual Disability.

Karen Healy is Professor of Social Work at the University of Queensland. Her research promotes a healthy start to life with children, young people and families who are at risk of social exclusion, particularly those subject to child protection interventions. She seeks to enhance the social, economic and cultural well-being of vulnerable and disadvantaged children, young people and families across the life course. Professor Healy's research uses mixed methods and co-design approaches. In 2016, she was appointed a member of the Order of Australia (AM) for her contribution to social work particularly in relation to the health and wellbeing of vulnerable children and families, higher education and research.

ORCID

Jemma Venables http://orcid.org/0000-0002-3783-1639
Joel Cullin http://orcid.org/0000-0003-2383-8351
Kathy Ellem http://orcid.org/0000-0003-2074-9724
Karen Healy http://orcid.org/0000-0002-7743-1699

References

Bowden, F., & Lambie, I. (2015). What makes youth run or stay? A review of the literature on absconding. *Aggression and Violent Behavior, 25*, 266–279. https://doi.org/10.1016/j.avb.2015.09.005

Braun, V., & Clarke, V. (2013). *Successful qualitative research: A practical guide for beginners*. SAGE.

Byers, K., Barton, J., Grube, W., Wesley, J., Akin, B. A., Hermesch, E., Felzke, E., & Roosevelt, R. (2023). "I Ran to make a point": predicting and preventing youth runaway from foster care. *Child and Adolescent Social Work Journal*, 1–24.

Cashmore, J. (2011). Children's participation in family law decision-making: Theoretical approaches to understanding children's views. *Children and Youth Services Review, 33*(4), 515–520. https://doi.org/10.1016/j.childyouth.2010.05.008

Child Protection Act 1999. (Qld). https://www.legislation.qld.gov.au/view/pdf/inforce/current/act-1999-010

Commission for Children and Young People. (2021). Out of sight: Systemic inquiry into children and young people who are absent or missing from residential care.

Courtney, M., Dworsky, A., Brown, A., Cary, C., Love, K., & Vorhies, V. (2011). *Midwest evaluation of the adult functioning of former foster youth: Outcomes at age 26*. Chapin Hall Centre for Children, University of Chicago.

James, A. (2007). Giving voice to children's voices: Practices and problems, pitfalls and potentials. *American Anthropologist, 109*(2), 261–272. https://doi.org/10.1525/aa.2007.109.2.261

Kennan, D., Brady, B., & Forkan, C. (2018). Supporting children's participation in decision making: A systematic literature review exploring the effectiveness of participatory processes. *The British Journal of Social Work, 48*(7), 1985–2002. https://doi.org/10.1093/bjsw/bcx142

McCafferty, P., Duffy, J., & Hayes, D. (2021). Permanency decisions in child welfare: A qualitative study. *The British Journal of Social Work, 51*(6), 2134–2154. https://doi.org/10.1093/bjsw/bcab095

McCafferty, P., & Mercado Garcia, E. (2023). Children's participation in child welfare: A systematic review of systematic reviews. *The British Journal of Social Work, 54*, 1094–1108. https://doi.org/10.1093/bjsw/bcad167

Mendes, P., & Purtell, J. (2020). Relationship-based models for supporting young people transitioning from out-of-home care: Two case studies from Victoria, Australia. *Institutionalised Children Explorations and Beyond, 8*(1), 120–132. https://doi.org/10.1177/2349300320967179

Moore, T., McArthur, M., Death, J., Tilbury, C., & Roche, S. (2018). Sticking with us through it all: The importance of trustworthy relationships for children and young people in residential care. *Children and Youth Services Review, 84*, 68–75. https://doi.org/10.1016/j.childyouth.2017.10.043

Moore, T., McArthur, M., & Roche, S. (2017). *Safe and sound: The safety concerns of young people in residential care*. Institute of Child Protection Studies.

Nylund, A. (2020). Children's right to participate on decision-making in Norway: Paternalism and autonomy. In T. Haugli, A. Nylund, R. Sigurdsen, & L. R. L. Bendiksen (Eds.), *Children's constitutional rights in the nordic countries. Stockholm studies in child law and children's rights* (pp. 201–224). Koninkliike Brill.

Shier, H. (2001). Pathways to participation: Openings, opportunities and obligations. *Children & Society, 15*(2), 107–117. https://doi.org/10.1002/chi.617

Stafford, L., Harkin, J., Rolfe, A., Burton, J., & Morley, C. (2021). Why having a voice is important to children who are involved in family support services. *Child Abuse & Neglect, 115*, 104987. https://doi.org/10.1016/j.chiabu.2021.104987

Stoecklin, D. (2013). Theories of action in the field of child participation: In search of explicit frameworks. *Childhood, 20*(4), 443–457. https://doi.org/10.1177/0907568212466901

Toros, K. (2021). A systematic review of children's participation in child protection decision-making: Tokenistic presence or not? *Children & Society, 35*(3), 395–411. https://doi.org/10.1111/chso.12418

van Bijleveld, G. G., Dedding, C. W. M., & Bunders-Aelen, J. F. G. (2015). Children's and young people's participation within child welfare and child protection services: A state-of-the-art review. *Child & Family Social Work, 20*(2), 129–138. https://doi.org/10.1111/cfs.12082

Venables, J. (2023). Features of service delivery that young people in out-of-home care who 'self-place' and stay in unapproved placements value when accessing a specialist support service. *Child and Adolescent Social Work Journal*, *35*, 258. http://doi.org/10.1007/s10560-023-00939-8

Wilson, S., Hean, S., Abebe, T., & Heaslip, V. (2020). Children's experiences with child protection services: A synthesis of qualitative evidence. *Children and Youth Services Review*, *113*, 104974. https://doi.org/10.1016/j.childyouth.2020.104974

Woodman, E., Roche, S., & McArthur, M. (2023). Children's participation in child protection—How do practitioners understand children's participation in practice? *Child & Family Social Work*, *28*(1), 125–135. https://doi.org/10.1111/cfs.12947

British Journal of Social Work (2025) **55**, 141–160
https://doi.org/10.1093/bjsw/bcae131
Advance Access Publication August 8, 2024

Approaches to Supporting Young People in Out-of-Home Care Who 'Self-Place' in Unapproved Locations: Perspectives of Statutory Child Protection Practitioners

Jemma Venables *, Chloe Warrell, Joel Cullin, Kathy Ellem and Karen Healy

School of Nursing, Midwifery and Social Work, The University of Queensland, St Lucia, 4072, Australia

*Correspondence to Jemma Venables, School of Nursing, Midwifery and Social Work, The University of Queensland, St Lucia 4072, Australia. E-mail: jemma.venables@uq.edu.au

Downloaded from https://academic.oup.com/bjsw/article/55/1/141/7730225 by UQ Library user on 25 February 2026

Abstract

The responsibilities of statutory child protection practitioners (SCPPs) include supporting the care and protection needs of young people in out-of-home care. SCPPs face challenges in responding to young people's preferences and rights to self-determination within child protection systems that are often risk averse. This article considers SCPPs' approaches to working with young people who leave approved placements to stay in other, unapproved locations. This phenomenon is referred to as 'self-placing' in Queensland (Australia), where this study was conducted. These young people are often disconnected from support, at increased risk of homelessness and exploitation, have increased contact with the justice system, disengage from education, face barriers to mental and physical health care and experience ongoing trauma and crisis. We draw on data from seven focus groups conducted with twenty-six practitioners from Queensland's child protection authority to explore how they work with this cohort. Our findings highlight the discomfort that SCPPs experience, due to concerns about risk and a lack of formal practice guidelines. Despite sharing concerns for the safety of young people, SCPPs adopt different approaches to manage the complexities of this work. Understanding these practices can assist in developing more responsive policies and practices for supporting this cohort.

© *The Author(s) 2024. Published by Oxford University Press on behalf of The British Association of Social Workers.*
This is an Open Access article distributed under the terms of the Creative Commons Attribution License (https://creativecommons.org/licenses/by/4.0/), which permits unrestricted reuse, distribution, and reproduction in any medium, provided the original work is properly cited.

Keywords: child protection, out-of-home care, runaway, self-placing, service delivery young people

Accepted: July 2024

Introduction

Practice with young people in out-of-home care (OOHC) who leave approved placements (e.g. foster, kinship or residential care) to stay in other, unapproved, locations (e.g. staying with family/kin, friends or the streets) is under-investigated. We use the critiqued term 'self-placing' to describe this phenomenon as it reflects the terminology in Queensland (Australia), where this research was conducted. Other terms such as 'runaway' (Crosland *et al.*, 2020), 'absconding' (Bowden and Lambie, 2015) and 'missing' (Colvin *et al.*, 2018) have also been used in the literature. Whilst all young people in OOHC are recognised as a vulnerable group, those who self-place are particularly vulnerable (Attar-Schwartz, 2013). The Queensland Child Protection Commission of Inquiry (2013) found young people in OOHC are:

> … 'self-selecting' out of care without adequate support or future plans … It is likely that this group … are 'opting out' of care for such reasons as the perceived 'failings' of the state as a 'corporate parent' and their general mistrust of the system. This reluctance to engage is compounded by the effects of past abuse and related trauma, which are often not adequately addressed … (p. 303).

Despite their increased vulnerability, there is limited international evidence on effective approaches for supporting this cohort. Subsequently, practitioners may rely on their own practice wisdom and local practice cultures when working with young people who self-place. However, little is known about what statutory child protection practitioners (SCPPs) perceive shapes their practice approaches. This article contributes to addressing this knowledge gap by reporting on the experiences of SCPPs supporting young people who self-place.

Self-placing when in OOHC

There is a small body of international literature (e.g. Attar-Schwartz, 2013; Bowden and Lambie, 2015; Venables, 2023) exploring young people in OOHC who self-place. The lack of agreed terminology for describing the behaviour and inconsistent policies and documentation within child protection systems contribute to an absence of data on this cohort. Therefore, the scale and magnitude of the problem are largely

Downloaded from https://academic.oup.com/bjsw/article/55/1/141/7730225 by UQ Library user on 25 February 2026

unknown with no reliable cross-jurisdictional comparisons (Bowden and Lambie, 2015; Queensland Family and Child Commission [QFCC], 2016). Despite these limitations, a recent Australian survey ($n = 325$) found that 33 per cent of young people self-reported being absent from their OOHC placement for over one week in the previous year (McDowall, 2020). Young people in OOHC are also over-represented in the numbers of young people reported to police as 'missing' in Australia (McFarlane, 2021), the USA (Courtney *et al.*, 2005) and the UK (Biehal and Wade, 2000).

Most existing literature is focused on risk factors for self-placing, with older literature tending to frame it as an individualised and delinquent behaviour to be managed (Attar-Schwartz, 2013). The international literature suggests that those most likely to self-place are female, older, placed in residential care, and more likely to have emotional and/or behavioural difficulties (Branscum and Richards, 2022). More recent research considers individual risk factors in concert with relationships (e.g. family and peers) and contextual factors associated with placement arrangements, and the broader child protection system (Bowden and Lambie, 2015). As such, there is increasing recognition of both 'push' (getting away *from*) and 'pull' (going *to*) factors contributing to decisions to leave approved care arrangements (Attar-Schwartz, 2013).

Reference to positive aspects and consequences of self-placing is difficult to locate in the literature. However, there is a significant focus on the negative consequences, such as the risk of sexual exploitation and abuse, contact with the justice system as victims and offenders, homelessness and drug and alcohol exposure (Courtney *et al.*, 2005; Attar-Schwartz, 2013). Alongside these risks sits an increased likelihood of disengagement from formal supports related to education, mental and physical healthcare and the child protection system (Attar-Schwartz, 2013; Venables, 2023).

Responses to self-placing

Of the limited literature on responses to self-placing, most describes reactive and punitive responses to young people, including involving police to locate and return the young person to their placement (Colvin *et al.*, 2018) and withdrawing of privileges or possessions (Kerr and Finlay, 2006). Another small body of literature focuses on reducing 'runaway behaviour', and advocates for individualised responses involving safety planning and behaviour support plans for young people who leave placement, but eventually return (Crosland *et al.*, 2020). Some contributions advocate for trauma-informed responses which prioritise therapeutic support (Kerr and Finlay, 2006).

What is largely absent in the literature is discussion of programmes and practices designed to support young people *when* they are

Downloaded from https://academic.oup.com/bjsw/article/55/1/141/7730225 by UQ Library user on 25 February 2026

self-placing (QFCC, 2016). Whilst recent work by Venables (2023) outlines the role of a specialist service which provides such support, there is currently limited understanding of the ways in which SCPPs conceptualise and respond to self-placing. This knowledge is important since self-placing young people remains in the 'care' of the relevant child protection authority and SCPPs can play a significant part in improving the outcomes for these young people. Acknowledging the challenging nature of SCPPs' roles, this article seeks to address this gap by answering the questions:

- *What approaches do SCPPs adopt when supporting young people in OOHC who self-place?*
- *What influences SCPPs' practice when supporting young people in OOHC who self-place?*

Method

Recruitment and sample

A purposive sample of SCPPs in 'frontline' (e.g. child safety officers), 'local leadership' (e.g. team leaders and senior practitioners) or 'executive' (e.g. managers and directors) roles who had in/direct experience of supporting young people who self-place were recruited. Queensland's child protection authority approved the participation of SCPPs from two of its six regions (Regions A and B). Regional Directors identified eligible SCPPs, and the researchers emailed out recruitment materials. Interested participants contacted the researchers directly. The participant information sheet made it explicit that (i) participation was voluntary; (ii) the Child Protection Authority, although a gatekeeper, would not be advised of who participated; (iii) that they could elect not to answer any questions; and (iv) they could withdraw without penalty at any time.

Of the twenty-six participants, most were female ($n = 20$), non-Indigenous ($n = 23$) and had worked with young people in OOHC for less than 10 years ($n = 14$). The majority had at least one tertiary qualification, with most holding qualifications in social work, psychology and/or social and behavioural sciences. The 'frontline' and 'local leadership' participants represented eleven different local service centres, situated in regional, outer urban and metropolitan areas. Participant characteristics are outlined in Table 1.

Data collection

Data collection occurred during August and September 2022, following ethical clearance from the University of Queensland's Human Research

Downloaded from https://academic.oup.com/bjsw/article/55/1/141/7730225 by UQ Library user on 25 February 2026

Table 1. Participant characteristics.

Item	Characteristics of participant	Total ($n = 26$)
Highest Qualification	None	1
	Diploma	1
	Bachelor degree	18
	Master degree	2
	Missing data	4
Length of time working in OOHC	<5 years	7
	5–9 years	7
	10–19 years	5
	≥20 years	4
	Missing data	3
Role	Frontline	17
	Local leadership	5
	Executive	4
Gender	Male	6
	Female	20
Aboriginal and/or Torres Strait Islander Status	Aboriginal and/or Torres Strait Islander	0
	Non-Indigenous	23
	Missing data	3

Ethics Committee (2022/HE000222) and approval from Queensland's child protection authority. Table 2 summarises the composition of the focus groups.

Focus groups explored SCPPs' experiences of supporting young people in OOHC who self-place. They ranged from 68 to 103 min ($\bar{x} = 80$ min) and were conducted by two research team members via videoconferencing. With participants' consent, focus groups were audio-recorded, and then transcribed verbatim.

Data analysis

Transcripts were de-identified and participant codes were allocated before being uploaded into the data management programme, Nvivo. Our thematic analysis (Braun and Clark, 2013) commenced with each research team member familiarising themselves with a sub-set of transcripts before inductively coding at least one. The team developed an initial coding frame by discussing commonalities and differences in their codes. The frame was then applied to all transcripts by one team member. New codes were identified during this process and discussed during regular meetings between the coder and the first author (J.V.).

The authors (J.V.) and (C.W.) then led the thematic analysis of the data related to the research foci. They refined the coding within the broader frame before identifying themes across the data. For example, distinct categories were noted within each of the codes related to

Downloaded from https://academic.oup.com/bjsw/article/55/1/141/7730225 by UQ Library user on 25 February 2026

Table 2. Focus group composition and length.

Focus group	Practitioner type	Number of participants	Number of service centres represented
FG1 *(Region A)*	Frontline	3	1
FG2 *(Region A)*	Frontline	3	2
FG3 *(Region B)*	Frontline	2	2
FG4 *(Region B)*	Frontline	8	7
FG5 *(Regions A and B)*	Local leadership	3	2
FG6 *(Regions A and B)*	Local leadership	3	2
FG7 *(Regions A and B)*	Executive	4	Not applicable as work across the whole region

'attitude towards self-placing' (e.g. 'invalid placement'; 'a choice'; 'don't fit the system') and 'nature of support provision' (e.g. 'risk-averse'; 'fostering independence'; 'relational and responsive'). This led to the creation of the themes—for example, *'A relational approach to supporting young people who "don't fit" the system'*. Candidate themes were discussed and agreed upon with the other authors.

Findings

The SCPPs shared a range of concerns about self-placing (theme 1) and highlighted a dearth of formal practice guidance (Theme 2). Subsequently, practitioners reported developing their own approaches to working with young people who self-place (Theme 3).

Concerns about self-placing

Participants shared similar worries for the safety of young people when self-placing. For example, FG1_Frontline_1 cited safety concerns about 'who they're with, who's frequenting, are there drugs, is their alcohol misuse, are they being safe if they're having sex?'. Safety concerns are also related to unstable living arrangements, limited access to basic needs including food and hygiene, relational conflict, violence and financial and sexual exploitation.

Some front line participants in FG2 also raised concerns about lacking 'up-to-date information' or being notified of 'critical incidents' when a young person self-placed. They compared this to the regular updates they received from staff in residential placements. As one front line

Downloaded from https://academic.oup.com/bjsw/article/55/1/141/7730225 by UQ Library user on 25 February 2026

respondent stated, 'if someone's self-placing, we're just at their mercy… as to what type and how much information they give us and when they give that to us' (FG2_Frontline_3).

Whilst most participants cited concerns about the suitability of self-placing environments, there were a few who considered young people to be 'a danger to themselves' (FG3_Frontline_1) due to their engagement in criminal activity and drug use when self-placing. Notably, front line participants from one service centre in a regional location of Region A (FG2), also suggested that self-placing could create reputational harm for the young person with residential care providers, precluding them from future placement options.

Only front line participants in FG4 discussed reputational risk *for the child protection authority* when young people self-placed, commenting, 'You look at the front page of the article and it's Queensland Department starved and didn't provide anything for this child for six months' (FG4_Frontline_4). Such concerns drove practices to discourage young people from self-placing, for example:

> We don't want to make it too comfortable… do you give them $70 worth of [grocery] vouchers a week… to make sure that there's an opportunity for them to at least get food, but it doesn't make it so cruisy that they're enticed to keep living in that dangerous way? (FG4_Frontline_4).

As described above, front line participants in FG4 felt they were engaged in a balancing act between ensuring the young person's needs were met whilst not being seen as encouraging or endorsing self-placing. One respondent described this as 'creative harm-minimisation without sanctioning' (FG4_Frontline_6).

A lack of formal guidance

Participants from all role types and regions highlighted challenges associated with the lack of formal practice guidance regarding self-placing. The executive participants contextualised this lack of guidance suggesting self-placing is 'not seen as a valid part of the system… there's no [agreed] term for it, let alone any guidelines…' (FG7_Executive_4). They posited if self-placing was embraced as a legitimate option and integrated into the OOHC system, practices would be more 'thought through', and staff would 'feel empowered and safe to deliver' them. However, they noted 'a raft of things… would need to happen' to better support practice with this cohort, including changes to the state-wide Child Safety Practice Manual and to the client data management system to enable self-placing arrangements to be better recognised as a 'valid placement option' (FG7_Executive_4). It should be noted that approved care arrangement types are defined by the *Child Protection Act 1999*

Downloaded from https://academic.oup.com/bjsw/article/55/1/141/7730225 by UQ Library user on 25 February 2026

(Qld) and legislative change would also be required for self-placing to be considered as such.

The limited evidence base about effective responses to self-placing was also identified by the executive respondents as posing a significant barrier to the development of practice guidelines. This lack of formal guidelines led to practitioners developing their own approaches.

Approaches to practice

Three general approaches to practice, underpinned by different conceptualisations of self-placing and risk, were identified. These and their associated sub-themes are discussed below.

A risk-averse approach to managing an 'invalid' living arrangement

Whilst all participants spoke of risk, this theme is distinguished by an emphasis on compliance with procedures to reduce the risk of blame being placed on the SCPP. This risk-averse approach was acknowledged by the executive participants, who commented:

> … that anxiety that our staff have about if anything really goes wrong that they will get blamed for it. So, they're constantly trying to pull kids back to places where they don't and won't be any way, it's really built into the way some of our staff practice, which probably repels the young people more. (FG7_Executive_3)

Risk-averse practices were most prevalent in the data from frontline and local leaders in the outer urban and regional locations. Notably, these are areas with limited access to other support services. However, a few participants in other geographical areas also reported adopting this approach if the person self-placing was very young or particularly vulnerable.

Participants described a dominant practice culture where self-placing was framed as an illegitimate option, not to be endorsed. For example, sharing that self-placing is currently 'the thing you don't support young people to do… it's seen as this thing that you do because you have to until you can get them into a placement' (FG7_Executive_4). Participants' assessment of safety tended to focus on the physical safety perceived to arise from a legislatively sanctioned and supervised placement, rather than on the young person's felt emotional or relational safety when in these locations. This narrow view of safety and focus on compliance as a risk-management strategy contributed to practices that prioritised returning young people to an approved placement and regularly 'sighting' a young person who continues to self-place.

Downloaded from https://academic.oup.com/bjsw/article/55/1/141/7730225 by UQ Library user on 25 February 2026

Prioritising return to an approved placement Participants in FG1, FG2 and FG6 discussed that returning a young person to placement, or at least ensuring there was a record of an active placement referral, was a requirement, and thus prioritised in their practice. The executive group reflected on how SCPPs utilised the client management system to document such efforts: 'when you do see records of these young people, it's a record of everything the CSO [Child Safety Officer] did to try and get them to go to placement' (FG7_Executive_4). This illustrates how SCPPs may use reporting systems to create audit trails illustrating their attempts to move young people from self-placing to approved placements.

In some cases, participants reported engaging external services like police to help them return a young person to a placement, particularly when the risks were perceived as high. Other local leaders also reported receiving 'pressure' from external stakeholders, namely the police, to prohibit young people from self-placing and to instead return them to approved placements.

The need to 'sight' young people When unable to return young people to approved placements, front line participants reported an increased need to 'sight', or be in contact with, the young person who was self-placing. Sighting the young person was explained as a risk mitigation strategy focused on ensuring they were 'okay, they're alive' (FG4_Frontline_1). This increased need to sight was due to the practitioners' elevated concerns about the young person's safety and reinforced by no longer being able to rely on an approved carer to be responsible for monitoring the young person's whereabouts and well-being.

The frequency and mode of contact required appeared to be determined by the practitioners' assessment of risk to the young person. For example, in cases where practitioners were particularly worried about the young person, they spoke of needing to *physically* sight the young person daily, whilst in situations assessed as less risky, regular phone contact was deemed sufficient. FG4_Frontline_2 shared an example: 'She is being sighted every 24 hours. … If they don't call or don't make contact within that time then, of course, they'll have to be listed [with police] as missing'. The responsibility for complying with sighting requirements was often placed on the young person, with the consequence of police involvement if they did not maintain phone contact or meet with their SCPP. One practitioner (FG4_Frontline_5) who had worked in different service centres suggested that expectations about and frequency of sighting young people who self-place 'varies significantly' between service centres and teams. Availability of 'resources' and the attitudes of team leaders were perceived to influence what was considered an acceptable practice within different contexts.

Downloaded from https://academic.oup.com/bjsw/article/55/1/141/7730225 by UQ Library user on 25 February 2026

Strategic use of resource provision To help meet their obligation to sight young people who were self-placing, participants spoke of strategically using resources as 'bargaining chips' so 'then you can sight them' (FG2_Frontline_1). They described leveraging their provision of a variety of immediate and/or practical supports such as phones, phone credit, food/vouchers, transport cards and clothing vouchers to entice young people to meet them in person. One worker shared, 'You just hang a voucher in front of them and they're like, 'Okay, we'll just jump through these hoops for you. We'll come see you' (FG3_Frontline_2). In this way, whilst SCPPs were providing young people with basic resources to which they were entitled, the means of doing so could be driven by the workers' need to meet their own obligations regarding sighting the young person and being able to document this.

Fostering 'independence' for young people who have 'chosen' to leave approved placements

This theme encompasses a perception that young people who self-place are seeking independence from the OOHC system. Whilst noting 'interdependence' is the preferred term in transition from OOHC literature (e.g. Storø, 2018), we use the term independence here as it reflects the terminology used by participants. Those who made comments consistent with this theme were more willing to support young people's self-placing arrangements. A local leader discussed the need to reframe the act of self-placing by discussing with the young person, 'You're going to be an adult soon… making all your own choices, so you're starting early or you're getting a head start on that' (FG4_LocalLeader_6).

A shift from a risk-based narrative about self-placing, to conceptualising it as an act of early independence and transition from OOHC, re-positions the SCPPs' role to supporting young people's development of independent living skills. Usually, support for developing skills for the transition to adulthood is provided by carers. But, as one respondent noted, this responsibility 'falls quite heavily on the CSO [child safety officer] to do that work [as] there's no residential placement or carer who's providing that support' (FG4_Frontline_3) when a young person is self-placing.

Front line participants described prioritising transition planning tasks, such as applications for social security payments, housing, disability insurance and Australia's universal health care in their work with young people. However, they also acknowledged that the crisis-driven nature of many self-placing arrangements could impede transition-to-adulthood work. One SCPP (FG4_Frontline_5) explained, 'If they're self-placing in really unsafe places, we will spend years doing work which is only focused around ensuring their immediate safety'. Prioritising the young person's immediate safety could mean the young person had no formal

Downloaded from https://academic.oup.com/bjsw/article/55/1/141/7730225 by UQ Library user on 25 February 2026

plan when exiting OOHC. Within this theme of fostering independence, two sub-themes emerged.

With freedom comes responsibility This sub-theme captures the view that young people need to take responsibility for the consequences arising from their decision to self-place. One participant commented, 'If you're looking out for yourself, then you've got to really do that, look out for yourself' (FG4_Frontline_6). This sub-theme was particularly evident when participants described supporting older young people, especially those with increased access to financial resources from social security payments or employment. As one front line participant shared, 'under 16 is hard because they've got none of their own income through Centrelink [social security]. Over 16 is a bit easier and a bit more easy to stomach for risk' (FG4_Frontline_4).

Decreasing 'Department reliance' This sub-theme related to practices which impelled young people to access community agencies to meet their basic needs, rather than relying on their SCPP to provide resources. This approach is illustrated by the statement:

> I have a young person that the only thing she wants from the Department is grocery cards, and that's the one thing I'm refusing to give her … because she can access [service] with her income statement from Centrelink [social security agency] and they will give her a pantry pack, they will give her a fridge and freezer pack … There's all these other services that are community-based that decrease the dependence on Child Safety that she can go and do. (FG1_Frontline_1)

This front line participant describes purposefully working to decrease the young person's reliance on the child protection authority, rationalised as helping the young person to develop the networks and skills needed for independence. Notably, this practice of needing to avoid 'creat[ing] Department reliance' was only noted in FG1 data, where all front line participants were from the same service centre located in a regional town.

A relational approach to supporting young people who 'don't fit in the system'

This theme relates to practices that privilege building relationships with young people and responsively partnering with them to address *their* identified goals and needs, rather than system-driven goals and requirements. As this local leader commented:

> If they've left a placement and then they're self-placing … they see that the Department doesn't really add much value in their life … So then, for our CSOs [child safety officers] on the ground who are then trying to

Downloaded from https://academic.oup.com/bjsw/article/55/1/141/7730225 by UQ Library user on 25 February 2026

> engage them, I'm a big believer in, at that point of engagement, you've got to meet that young person where they're at. (FG5_LocalLeader_1)

Whilst this theme was evident across the data from all focus groups, it was particularly strong in the executive (FG7) and one of the local leadership groups (FG5). Three sub-themes emerged.

Rethinking risk and safety Those who made comments aligned with this sub-theme tended to regard self-placing as a consequence of the OOHC system's rigidity and associated inability to adequately meet the young person's needs. For example, one front line participant shared:

> This [self-placing] is because the system doesn't provide a service that fits their needs, so they're sort of creatively making a system that is meeting their needs and occasionally that works for the best… So, the ones who don't fit in the system, and by forcing the system on them, we're sort of forcing them to be at more risk and avoiding us and being homeless. (FG4_Frontline_4)

This excerpt suggests adopting a system-driven approach only serves to impede relationships with young people, decreasing their safety whilst self-placing. In contrast to those practitioners who adopted a 'risk-averse' approach, these practitioners did not equate approved placements with safety, suggesting that 'having a placement open for a young person who hasn't set foot in it, or only sporadically stays in that placement, doesn't actually provide any level of meaningful safety for that young person' (FG5_LocalLeader_1). Instead, they highlighted the importance of working with the young person's choices and adopting a harm-minimisation approach:

> Resign yourself to the fact that this young person has individual agency and choice and that despite our desperate want for them to be somewhere that we know is safe, you can't just stick your head in the sand and pretend that that would keep them safe if that bed is available there for them to sleep in. (FG5_LocalLeader_1)

Those aligned with this approach appeared more comfortable sitting with risk and were able to acknowledge potential benefits of self-placing for young people, if they were supported and resourced appropriately. As one participant shared:

> There's a level of motivation and self-determination that young people can discover… when they sort of go out on their own and say, 'Okay, well I'm going to self-place, I'm going to try and be a bit more responsible for myself.' You can capitalise on that and you can, with the right support and the right resources, you can channel that in a really—when I say "productive", like not productive for us, but productive for the young person. (FG5_LocalLeader_1)

Downloaded from https://academic.oup.com/bjsw/article/55/1/141/7730225 by UQ Library user on 25 February 2026

Responsive and relationship-driven practice In this approach, relationships with young people were prioritised and considered to be an integral part of support and safety planning. This is exemplified by an executive participant:

> We would see a young person allowing and having regular contact with our staff as a real safety measure… If we are applying the pressure… for them to leave a [self-placing] property, they may, in fact, leave that property, but they're less likely to tell us where they're going… so, we've gone from an unsafe known risk environment to an unknown risk environment, which is rarely better. (FG7_Executive_4)

Here, it is suggested that honouring and working with the young person's decision to self-place can in fact enhance their safety, as it allows them to remain connected to their SCPP. They also indicated that encouraging young people to build trusting relationships with other services, as well as or instead of the SCPP, could also help to build safety for the young person when self-placing, suggesting: 'It's the recognition of their own ability to make safe decisions about agreeing to have contact with [specialist support service] that increases our confidence in their being able to make better decisions for themselves too' (FG7_Executive_4). Here, the young person's decision to connect with a specialist support service instead of the statutory authority is seen as a strength rather than a problem.

Communication and responsiveness were also noted as key practice elements for building trusting relationships with young people who self-place. As one practitioner shared: 'Being guided by them… that could change weekly, what we're actually doing, what our goal is… it's based on that communication… that rapport that we can have with the young people' (FG2_Frontline_1). This front line participant describes centring, and being responsive to, young people's dynamic context, views and wishes. These practices aimed to support the young person's developing agency through building safety via connection.

Practitioners who shared this set of beliefs saw themselves as responsible for building connection—rather than expecting the young person to drive contact. For example, a small group of front line participants discussed the importance of visiting young people in their self-placing locations rather than expecting the young person to come to them. Participants who purported using a relational approach reflected on how it brought about more beneficial practice outcomes than other approaches. For example:

> The reason I think it's vastly different comes down to relationships… when you are committed and you actually do regular visits with your kids, see them, communicate with them, know what their want and needs are…, So if they are self-placing, you're able to advocate why

Downloaded from https://academic.oup.com/bjsw/article/55/1/141/7730225 by UQ Library user on 25 February 2026

> that's beneficial for them … And I think if you don't have that foundational level, you are screwed. (FG1_Frontline_1)

Here, the practitioner asserts that 'strong' relationships with young people who are self-placing provide a greater understanding of the young person and their reasons for self-placing. This then positions the practitioner as an ally for the young person who can then advocate for meeting their needs and wishes within the OOHC system.

Workforce stability and composition Several local leaders in FG5 stressed the importance of trusting and continuous relationships between young people and SCPPs for building connection and safety for those who self-place. They explained how high workforce turnover disrupted relationships with young people, disconnecting them from support. These local leaders indicated that workforce stability was enhanced when self-placing cases were allocated to practitioners with certain personal characteristics and professional skills:

> They're the workers who … thrive in that grey space as opposed to really depending on the black and white, they're flexible, they're open to seeing things from a different perspective, they're not super attached to the idea of being able to tick off a young person as being safe, because that means something very, very different to these kids than it does to us (FG5_LocalLeader_1)

The local leader suggests that practitioners who are flexible, responsive to the views and needs of young people and have a nuanced, and young person-informed, understanding of safety may be better positioned to work relationally with young people.

Some front line participants indicated that the nature of their caseload, particularly the age of those they supported, could impact their ability to work in a responsive and relationship-driven manner. Those with adolescent-only caseloads felt better able to be responsive to the dynamic needs of young people who self-place, compared to their colleagues who held mixed-aged caseloads. They hypothesised that having adolescent-only caseloads enabled a consolidation of 'people with a niche area of expertise' that 'know the best protocols and know who to go to and how they can best support' a young person self-placing (FG1_Frontline_1). They also indicated that working only with adolescents allowed for greater flexibility in their schedules as they did not need to manage competing demands associated with younger children such as liaising with carers and birth parents, supervising contact visits and ensuring childhood vaccinations occurred. As such, many of the front line workers were supportive of having adolescent-only caseloads. However, one front line participant (FG1_Frontline_1) indicated that their team leader would not approve the establishment of such a team as it would prevent staff from learning how to manage other case types,

Downloaded from https://academic.oup.com/bjsw/article/55/1/141/7730225 by UQ Library user on 25 February 2026

resulting in one team carrying significant risk. This illustrates how local leaders' beliefs shape team structures and caseload allocations within different service centres.

Discussion

Whilst limited, literature on *responses* to self-placing has primarily examined interventions to prevent or decrease 'runaway behaviour' (e.g. Crosland *et al.*, 2020) rather than exploring practices used to support the young person *whilst* they are staying away from approved OOHC placements. This article has extended prior studies on self-placing by focusing specifically on the experiences and practices of SCPPs. Participants in this study described supporting young people who are self-placing as an uncertain and high-risk area of practice, as the young person's living arrangements were unsanctioned and there was no allocated carer to supervise them. Yet, despite self-placing arrangements being unapproved they are a reality of practice with a subset of young people in OOHC. As such, identifying the factors that make it challenging for practitioners to feel 'safe' practising in this context is crucial (Munro, 2019).

Participants identified increased safety concerns for this cohort, aligned with previous studies which have established that self-placing brings increased risk of sexual exploitation and abuse, involvement in criminal activity and drug and alcohol exposure (Attar-Schwartz, 2013). Whilst all participants were concerned about risks to the young person, some also reported concerns about risk of *blame* to the practitioner and/or statutory child protection authority if a young person incurred harm whilst self-placing. In our study, participants discussed the competing risks of (i) being blamed for *allowing* or *enabling* young people to self-place by providing them with too many supports, versus (ii) being blamed for *failure to provide adequate support*. This speaks to the tension associated with self-placing being an unapproved arrangement within the highly bureaucratic, regulated and legislated practice context of child protection.

This tension was reinforced by broader system-level factors. For example, there is no officially endorsed term in Queensland for the phenomenon; a factor recognised as contributing to ambiguity about appropriate practice responses (QFCC, 2016). Further, executive participants highlighted how the client data management system contributes to self-placing being viewed as not only unapproved, but 'invalid', because the system cannot register a self-placing arrangement as a placement location. Previous research has also highlighted how client data management systems can have unintended consequences that can undermine front line practice by restricting the kinds of information that practitioners engage with in their work (Munro, 2011).

Downloaded from https://academic.oup.com/bjsw/article/55/1/141/7730225 by UQ Library user on 25 February 2026

Our findings indicate that when practitioners viewed self-placing as an invalid option, it legitimised more risk-averse and protectionist responses that prioritised efforts to 'sight' young people and/or return them to approved placements. Like existing literature, front line practitioners in our study documented their efforts in case records as 'a form of pre-emptive exoneration to protect themselves from blame should decisions later turn out badly' (Cooper and Whittaker, 2014, p. 255). This can move focus away from the young person, as practice becomes about describing and justifying practitioners' actions rather than describing the young person's experiences (Cooper and Whittaker, 2014). Arguably, such practices can also shift risk-of-blame onto the young person, framing *them* as the problem for not remaining in approved locations. This potentially constrains the scope of practice with young people by focusing on their deficits rather than strengths and wishes, positioning them as subjects to be monitored for compliance.

Practitioners' concerns regarding self-placing were compounded by a lack of formal policy and practice guidance for working with this cohort. A lack of empirical research to inform the development of such guidelines was noted by the executive participants. Within this context, our findings highlight how SCPPs are 'on-the-ground' policymakers, as they use their discretion and develop various mechanisms to manage their work with young people who self-place, including 'decisions regarding who receives services and/or sanctions' (Shipe *et al.*, 2022, p. 109). Thus, Lipsky's (1980) street-level bureaucracy (SLB) theory provides a useful framework for understanding the different ways in which SCPPs adapt to and manage the complex task of supporting this cohort.

Reflective on other international child welfare studies adopting an SLB framework (e.g. Baviskat and Winter, 2017; Shipe *et al.*, 2022), our findings indicate that SCPP decision-making and practices were influenced not only by the organisational context and local practice culture, but also by individual caseworker attitudes. Underpinning the SCPPs' diverse practices were different conceptualisations of, and attitudes towards, risk and self-placing. For example, not all practitioners reported viewing self-placing as an invalid arrangement warranting a risk-averse practice approach. Indeed, several practitioners conceptualised self-placing as an early act of 'independence', requiring them to help the young person to take responsibility for themselves and to reduce their 'reliance' on the Department. This may reflect political pressures placed on child protection systems to ensure that care leavers are enabled to 'become self-reliant, to emancipate themselves from helping systems and to be economically self-sufficient' (Storø, 2018, p. 104). However, evidence indicates that transition planning and support should be about fostering young people's ***interdependence*** via relational practices (Mendes and Purtell, 2020), rather than independence (Storø, 2018).

Downloaded from https://academic.oup.com/bjsw/article/55/1/141/7730225 by UQ Library user on 25 February 2026

In our study, the SCPPs who adopted a relational approach reported providing more responsive support and safety planning than their colleagues based on more accurate understanding of young people's needs, goals and whereabouts. As in Broadhurst *et al.*'s (2010) study on the informal logic of risk management, these SCPPs' risk management strategies were (i) embedded in their *social relations* with the young person; (ii) *contingent* on the young person's unique circumstances; and (iii) informed by a *multiplicity of relationalities* including virtues of empathy and compassion. However, like existing literature (Toros, 2021), our findings also indicate that workforce stability and composition, as well as caseload size and composition, mediated SCPPs' ability to work in relational and responsive ways. The practitioners who reported adopting relational approaches to working with young people tended to work in teams with an adolescent/transition-to-adulthood caseload and to conceptualise self-placing as a failure of the statutory OOHC system to adequately meet young people's needs.

Previous research by Venables (2023) has shown that young people who self-place value relational, trauma-informed and harm-minimisation approaches to support that acknowledge and support their agency. Whilst that study focused on young people's views of voluntary service providers rather than SCPPs, it showed that such an approach facilitates trusting relationships in which young people feel able to share their hopes, worries and needs. This, in turn, facilitates more responsive service provision that enhances their safety, connection and well-being. In the absence of formal guidelines for supporting this cohort, a harm-minimisation approach may be a useful framework as it 'permits practitioners to develop interventions that promote children and young people's rights to health, well-being and safety even if a young person is in the midst of… engaging in unsafe behaviour' (Hickle and Hallett, 2016, p. 307).

Strengths and limitations

This study contributes to addressing the dearth of knowledge regarding the approach SCPPs adopt when supporting young people in OOHC who self-place. Our use of focus groups resulted in rich and detailed accounts of practice across eleven different service centres in South-East Queensland. However, the reliance on self-report data and our recruitment strategy, which required executives within the child protection authority to act as gatekeepers to participants, may be viewed as limitations. Whilst it is possible that respondents were impacted by social desirability bias and shared only *espoused* rather than *actual* practices—the data did reflect a diverse set of attitudes and practices, including critiques of practice cultures. Future research should prioritise reporting on

Downloaded from https://academic.oup.com/bjsw/article/55/1/141/7730225 by UQ Library user on 25 February 2026

actual SCPP practice, by including observations and accounts of others impacted by SCPP practice, such as young people themselves and other key stakeholders. This research should be conducted not only in metropolitan areas but also in regional and remote areas, and those without access to a specialist non-government support service. Further, the absence of Aboriginal and/or Torres Strait Islander practitioners in our sample is a limitation, particularly given the overrepresentation of Aboriginal and/or Torres Strait Islander children in the child protection system. Future studies should be proactive in ensuring that First Nations Australian perspectives are included and thus inform the emerging knowledge base-related to this under-researched area of practice. Despite the limitations, purposive sampling allowed us to speak with those best positioned to discuss how SCPPs respond to young people who self-place in South-East Queensland. Further research that explores the utility of harm-minimisation approaches for supporting this cohort of young people is also needed.

Conclusion

This article explored the experiences and practices of SCPPs when supporting young people in OOHC who self-place. The findings reveal that despite heightened safety concerns for this cohort, there is limited formal practice guidance or empirical evidence to support their practice. Without such frameworks, it appears that SCPPs' attitudes towards self-placing and risk, mediated by local practice cultures, are key drivers of their practice with young people who self-place. To counter risk-averse practices and instead support more relational and responsive practices, we propose the adoption of a harm-minimisation approach that helps to promote young people's rights to health, well-being and safety, even when staying in unapproved locations.

Acknowledgements

We would like to thank the practitioners who participated for their time and valuable contributions to this study. We acknowledge the important in-kind contributions of the Queensland Government and the Community Living Association's Brisbane Emergency Response and Outreach Service to this project. We would also like to thank Dr Madonna Boman and Ms Juli Richmond for their excellent research assistant work.

Downloaded from https://academic.oup.com/bjsw/article/55/1/141/7730225 by UQ Library user on 25 February 2026

Funding

This work was funded by the University of Queensland under the Early Career Researcher Development: Knowledge Exchange and Translation grant scheme.

Conflict of interest statement. None declared.

References

Attar-Schwartz, S. (2013) 'Runaway behaviour among adolescents in residential care: The role of personal characteristics, victimization experiences while in care, social climate and institutional factors', *Children and Youth Services Review*, **35**(2), pp. 258–67.

Baviskar, S. and Winter, S. (2017) 'Street-level bureaucrats as individual policy-makers: The relationship between attitudes and coping behaviour towards vulnerable children and youth', *International Public Management Journal*, **20**(2), pp. 316–53.

Biehal, N. and Wade, J. (2000) 'Going missing from residential and foster care: Linking biographies and contexts', *British Journal of Social Work*, **30**(2), pp. 211–25.

Bowden, F. and Lambie, I. (2015) 'What makes youth run or stay? A review of the literature on absconding', *Aggression and Violent Behavior*, **25**, 266–79.

Branscum, C. and Richards, T. N. (2022) 'An updated examination of the predictors of running away from foster care in the United States and trends over ten years (2010–2019)', *Child Abuse & Neglect*, **129**, 105689.

Braun, V. and Clarke, V. (2013) *Successful Qualitative Research: A Practical Guide for Beginners*, Thousand Oaks, CA, SAGE.

Broadhurst, K., Hall, C., Wastell, D., White, S. and Pithouse, A. (2010) 'Risk, Instrumentalism and the humane project in social work: Identifying the *informal* logics of risk management in children's statutory services', *British Journal of Social Work*, **40**(4), pp. 1046–64.

Colvin, E., McFarlane, K., Gerard, A. and McGrath, A. (2018) 'We don't do measure and quotes': How agency responses criminalise and endanger the safety of children missing in care in NSW Australia', *The Howard Journal*, **57**(2), pp. 231–49.

Cooper, A. and Whittaker, A. (2014) 'History as tragedy, never as farce: Tracing the long cultural narrative of child protection in England', *Journal of Social Work Practice*, **28**(3), pp. 251–66.

Courtney, M., Skyles, A., Miranda, G., Zinn, A., Howard, E. and Goerge, R. (2005) *Youth Who Run Away from out of Home Care*, Chicago, IL, University of Chicago.

Crosland, K., Haynes, R. and Clarke, S. (2020) 'The Functional Assessment Interview for Runaways (FAIR): An assessment tool to assist with behaviour support plan development and to reduce runaway behaviour', *Child and Adolescent Social Work Journal*, **37**(1), pp. 73–82.

Downloaded from https://academic.oup.com/bjsw/article/55/1/141/7730225 by UQ Library user on 25 February 2026

Hickle, K. and Hallett, S. (2016) 'Mitigating harm: Considering harm reduction principles in working with sexually exploited young people', *Children & Society*, **30**(4), pp. 302–13.

Kerr, J. and Finlay, J. (2006) *Youth Running Form Residential Care: "The Push" and "the Pull"*, Valhalla, NY, Office of Child and Family Service Advocacy.

Lipsky, M. (1980) *Street-Level Bureaucracy: Dilemmas of the Individual in Public Services*, New York, NY, Russell Sage Foundation.

McDowall, J. (2020) *Transitioning to Adulthood from out-of-Home Care: Independence or Interdependence*, Tupelo, MS, CREATE Foundation.

McFarlane, K. (2021) *Children and Youth Reported Missing from Out-of-Home Care in Australia: A Review of the Literature and Analysis of Australian Police Data*, New York, NY, Kath McFarlane Consulting.

Mendes, P. and Purtell, J. (2020) 'Relationship-based models for supporting young people transitioning from out-of-home care: Two case studies from Victoria, Australia', *Institutionalised Children Explorations and Beyond*, **8**(1), pp. 120–32.

Munro, E. (2011) *The Munro Review of Child Protection: Final Report: A Child Centred System*. Department for Education.

Munro, E. (2019) 'Decision-making under uncertainty in child protection: Creating a just and learning culture', *Child & Family Social Work*, **24**(1), pp. 123–30.

Queensland Child Protection Commission of Inquiry [QCPCI]. (2013) *Taking Responsibility: A Roadmap for Queensland Child Protection*, Brisbane, QCPCI.

Queensland Family and Child Commission. (2016) *When a Child is Missing: Remembering Tiahleigh—A Report into Queensland's Children Missing from Out-of-home Care*, Brisbane, Australia, Queensland Family and Child Commission, State of Queensland.

Shipe, S., Shdaimah, C. and Cannone, M. (2022) 'Policy on the ground: Caseworker perspectives on implementing alternative response', *Journal of Public Child Welfare*, **16**(1), pp. 106–32.

Storø, J. (2018) 'To manage on one's own after leaving care? A discussion of the concepts independence versus interdependence', *Nordic Social Work Research*, **8**(1), pp. 104–15.

Toros, K. (2021) 'A systematic review of children's participation in child protection decision-making: Tokenistic presence or not', *Children & Society*, **35**(3), pp. 395–411.

Venables, J. (2023) 'Features of service delivery that young people in out-of-home care who 'self-place' and stay in unapproved placements value when accessing a specialist support service', *Child and Adolescent Social Work Journal*. https://doi.org/10.1007/s10560-023-00939-8

Downloaded from https://academic.oup.com/bjsw/article/55/1/141/7730225 by UQ Library user on 25 February 2026

© The Author(s) 2024. Published by Oxford University Press on behalf of The British Association of Social Workers.
This is an Open Access article distributed under the terms of the Creative Commons Attribution License (https://creativecommons.org/licenses/by/4.0/), which permits unrestricted reuse, distribution, and reproduction in any medium, provided the original work is properly cited.
British Journal of Social Work, 2025, 55, 141–160
https://doi.org/10.1093/bjsw/bcae131
Original article