

# Finding out about the ARROS PLACE Program: Supporting young people with cognitive disability and experiences of child protection &/or youth justice involvement



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We would like to thank the young people who shared their stories and experiences with us. Your voices have provided clear guidance on how practitioners, services and systems can all be improved to better support young people with cognitive disability in their transitions to adulthood.

We hope that the knowledge generated by this study helps to enhance the capacity of practitioners and other key stakeholders to work alongside young people with cognitive disability who have experiences of statutory child protection and/or youth justice systems to support their transitions into adulthood.

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We acknowledge the Traditional Custodians of the lands on which we all live and work. We pay respect to their Elders past, present and emerging. We acknowledge that sovereignty has never been ceded.

## Research Team

Dr Jemma Venables

Dr Kathy Ellem

Dr Caitlin Nathanson

Johnny Choi

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## Abbreviations

<b>ARROS PLACE</b>	ARROS Peer Led Advocacy and Community Engagement
<b>CLA</b>	Community Living Association
<b>CSO</b>	Child Safety Officer
<b>DRC</b>	Disability Royal Commission
<b>DSP</b>	Disability Support Pension
<b>ILC</b>	Information, Linkage and Capacity building grant
<b>LGBTIAQ+</b>	Lesbian, Gay, Bisexual, Transgender, Intersex, Asexual, Queer/Questioning
<b>NDIS</b>	National Disability Insurance Scheme
<b>OOHC</b>	out-of-home care
<b>SPER</b>	State Penalties Enforcement Registry

# 1. EXECUTIVE SUMMARY

## 1.1 Context

ARROS Peer Led Advocacy and Community Engagement (ARROS PLACE) is a two-year project (2020-2022) federally funded by an Information, Linkage and Capacity-building (ILC) grant. The project targets young people aged 15- 25 years with cognitive disability who:

- live North of the Brisbane River to Caboolture (including Moreton Region),
- are homeless or at risk of experiencing homelessness,
- have an experience of the statutory child protection and/or youth justice system, and
- who may or may not be eligible for funds under the National Disability Insurance Scheme (NDIS).

It is delivered by ARROS which is a service within the Community Living Association (CLA). ARROS applied for the ILC grant in recognition of the fact that group work and targeted support around employment and skill development with this cohort of young people was challenging to do when many young people were in crisis and only had limited and/or rigid supports provided via individualised funding packages. ARROS PLACE work with participants in small groups to support them to:

- Develop and maintain a peer led support/learning group — where young people lead activities focused on building skills for employment, micro- business and community contribution.
- Develop skills to speak up and advocate for change. Participants are supported to talk about their experiences, understand their rights, and speak up about the systems and social issues that have impacted their lives and the lives of their peers

ARROS PLACE currently runs two small groups per week. These have been focused on providing a paid opportunity for young people to cook meals for themselves and other members of the ARROS community. The group also focuses on developing young people's life skills (eg. goal setting and achieving, budgeting, household routines, communication, etc.) and physical health and wellbeing through peer knowledge sharing.

## 1.2 Research purpose

The study sought to increase the capacity of ARROS PLACE to meet the needs of young people with cognitive disability who are exiting statutory child protection and/or youth justice systems by

building knowledge of: the support needs of the young people; how the young people experience service provision from ARROS PLACE and how the service responds to their needs via the ARROS PLACE services.

By capturing the perspectives of young people who had accessed ARROS PLACE and the practitioners responsible for implementing ARROS PLACE services, the study sought to address the following research questions:

- What are the support needs of young people with cognitive disability who are exiting statutory child protection and/or youth justice systems from the perspective of young people themselves and the ARROS practitioners who support them?
- How do practitioners involved in the delivery of ARROS PLACE respond to the needs of young people with cognitive disability who are exiting statutory child protection and/or youth justice systems?
- How do young people with cognitive disability who are exiting statutory child protection and/or youth justice experience the service response provided by ARROS PLACE?

### **1.3 Research design**

A mixed method design was employed to explore the perspectives of young people and practitioners regarding their experiences and perspectives of the ARROS PLACE project which supports young people with cognitive disability and care and/or youth justice experience. The study comprised four phases: 1) interviews with young people; 2) interviews with practitioners; 3) case file review (group session notes and individual casefiles); and 4) a focus group with practitioners.

### **1.4 Summary of key findings and recommendations**

The findings demonstrated that the young people with cognitive disability transitioning from statutory child protection and/or youth justice systems had varied, complex and dynamic and at times crisis-driven needs. These needs included those in relation to: personal relationships; identity and culture; mental health; physical health; disability; accommodation; income; legal issues; navigating services; life skills; education and employment; fundamental needs of everyday living and other needs. The young people and the ARROS PLACE practitioners perceived that the role of ARROS PLACE was to 'bridge the gap' in support during their transitions from the statutory child protection and/or youth justice systems and emerging adulthood.

ARROS PLACE practitioners engaged in relationship-based practice. This was framed by overarching theories of harm-minimisation, trauma-informed practice, anti-oppressive practice and a strengths perspective. Their approach involved engaging young people by: being young-person-centred; using gently and respectfully persistent outreach; and maintaining engagement and responding to needs using a holistic, flexible, responsive, intensive and continuous service approach. In supporting young people, the practitioners undertook a variety of tasks including but not limited to: outreach; drop-in support; building skills; building relationships; building resources; providing emotional support; advocacy; stakeholder meetings and communication; referral to other services and support navigating these services; and other support.

The findings indicate there are certain qualities that ARROS PLACE practitioners possess that are beneficial to engage with young people with cognitive disability who have had a care and/or youth justice experience. Qualities identified by the young people were: passion and commitment, fairness, genuineness and being valued as an individual. Further qualities identified by the practitioners were their: non-judgmental and accepting attitude; authenticity; gentle persistence; and non-authoritarian and creative and fun style. Young people reported that the practice approach adopted by ARROS PLACE and the qualities of the practitioners helped them to engage, made them feel valued and supported, and facilitated the development of relationships, skills and confidence.

Overall, the young people perceived that they were receiving the help and support necessary to address their individual needs via ARROS PLACE as they transitioned from statutory child protection and/or youth justice systems. The success of the program was underpinned by a commitment to being responsive to the individual needs of each young person both during and outside of the group environment. This dual process enabled the creation of a safe and responsive environment in which young people could build skills, receive support and work towards their goals.

An abridged selection of the recommendations emerging from the findings of this study are outlined below:

- That ARROS PLACE continue to be funded to support young people with cognitive disability who are transitioning to adulthood within the context of statutory child protection and/or youth justice system experiences. The program should continue to comprise of

integrated individual and group work processes and recognise transport as a key element of the program.

- That ARROS PLACE practices continue to be underpinned by relationship-based practices that incorporate trauma-informed, harm-minimisation and strengths-based approaches.
- ARROS PLACE should consider including the delivery of training to other stakeholders regarding their practice approach to engaging and supporting this cohort of young people. This will help to provide a unified approach to supporting young people and facilitate their engagement and connection with a broader formal and informal support network.
- The recent changes for extending care in Queensland provides an opportunity to review and enhance existing transition planning and supports provided to young people with cognitive disability who are under child protection orders. Funding should be made available for ARROS PLACE workers to act as liaison officers to the Department of Children, Youth Justice and Multicultural Affairs in providing guidance during transition planning for young people with cognitive disabilities.
- There is also a need for greater flexibility within the NDIS in terms of funding supports that are young-person-centred, reducing the complexity of navigating the system, and extending the eligibility criteria to include young people with so-called “borderline” intellectual disability

## 1.5 Conclusion

This study has developed an understanding of the needs of young people with cognitive disability who are transitioning from statutory child protection and/or youth justice systems. It has enriched understanding of the responses of ARROS PLACE practitioners to young people’s needs in the ARROS PLACE groups. It has provided compelling evidence that the relationship-based practice framework employed by ARROS PLACE practitioners via their combined individual and group work produced a range of positive outcomes. ARROS PLACE practitioners effectively engaged young people who were previously isolated and lacking formal supports and labelled ‘disengaged’ to build their skills, self-esteem, networks of support, and empowered them to mentor other young people in like circumstances.



## 2. INTRODUCTION

Young people with cognitive disability, particularly those with previous contact with the statutory child protection system and/or youth justice system are identified as a particularly vulnerable group. According to the Australian Bureau of Statistics (2014), approximately 2.9% of the total population have an intellectual disability (these figures include those with a cognitive impairment caused by brain injury and dementia). In contrast, it is estimated that between 11% and 17% of young people in Australian youth justice systems have a cognitive disability (Atkinson, 2018). Children with cognitive disability also have a greater risk of experiencing maltreatment than children without disability (Maclean et al., 2017).

The term “cognitive disability” refers to several conditions where a young person has ongoing challenges in intellectual functioning (including reasoning, problem solving and learning) and in adaptive skills (i.e. everyday social and practical abilities) (Schalock et al., 2010). The term refers to intellectual impairment (particularly in the borderline, and mild range (World Health Organisation, 2017)), autism spectrum disorder (Crane et al., 2016) and acquired brain injury (including Foetal Alcohol Spectrum Disorder) (Gralton, 2014). The causal nature of cognitive difficulties may be unclear, and for many young people there may be co-occurring mental illness, which can further complicate diagnosis (Baldry et al., 2013). In this report we use the broader term of ‘cognitive disability’.

Compared with their same-aged peers, young people with cognitive disability are more likely to have poor health (Allerton et al., 2011); are at greater risk of poverty (Emerson & Spencer, 2015); are subject to greater stigmatisation and violence (Larkin et al., 2012); and are more likely to have poor educational and future employment outcomes (Young-Southward et al., 2016). Their lives may be further complicated by mental illness, problematic substance and alcohol use, and in the case of Indigenous Australian young people, entrenched racism and discrimination (Baldry et al., 2016). They are often socially isolated and lack both formal and informal support systems. These factors are exacerbated for young people who have been in contact with the statutory child protection system and/or youth justice system, creating further barriers and challenges for their transition to adulthood.

This research project is intended to build knowledge that will support a vulnerable cohort of young people living on the fringes of society build capacity and autonomy over their lives, while supporting them to speak out and contribute to positive social change. A brief overview of the ARROS PLACE program is outlined below to provide detail of the research context for this study.

## 2.1 Overview of ARROS and ARROS PLACE program

ARROS PLACE is a 2-year pilot program delivered by Community Living Association's ARROS service. ARROS supports young people with intellectual or cognitive disability who have experienced many complex circumstances, including: homelessness or risk of homelessness; interaction with youth justice and/or the criminal justice system; involvement with statutory child protection systems, often with an out-of-home care (OOHC) experience (eg. foster/kinship or residential care); poor mental health or substance use issues. Young people who are supported by ARROS often have a history of trauma and social disadvantage which can result in complex behaviours that isolate them further from society. This can impact their access to mainstream and specialist supports as well as their ability to maintain relationships that provide informal support. ARROS delivers several programs:

1. NDIS funded support (individualised funding packages)
2. Transitions and Post-Care support for people leaving OOHC
3. ARROS PLACE

This research project relates specifically to 'ARROS PLACE'. Details of the program are outlined below.

**ARROS PLACE** is Federally funded via a two-year Department of Social Services' Information, Linkages and Capacity Building (ILC) grant. The project supports young people with cognitive disability and an experience of child protection involvement, including placement in OOHC and/or involvement with the youth justice system, who are at risk of or experiencing homelessness. It aims to support young people to "identify and start working towards their goals around employment, community participation, and advocacy" (CLA, nd). ARROS applied for the ILC grant in recognition of the fact that group work and targeted support around employment and skill development was challenging to do when working with young people in crisis and/or within the constraints of individualised NDIS funding packages.

## 2.2 Purpose of the research

There is a dearth of knowledge regarding what models of support/services are most effective in supporting young people with cognitive disability who are exiting statutory child protection and/or youth justice systems to develop skills for successful transitions to adulthood. This type of information is critical to improving the outcomes of this group of young people as it has the potential to reduce the likelihood of ongoing contact with mandatory systems. This exploratory study aimed to build knowledge that will enhance service responses to, and outcomes for this cohort of young people. It used a mixed method design to explore the perspectives of young people and practitioners regarding their experiences of the ARROS PLACE project, which supports young people with cognitive disability and statutory child protection and/or youth justice system experience. Expected outcomes of the study include: building knowledge of the needs of this cohort and effective models of service delivery which will enable the young people to build capacity and autonomy over their lives, while supporting them to speak out and contribute to positive social change.

## 2.3 Structure of the report

This report will first provide a brief review of the literature on the needs of young people with cognitive disability who are transitioning from statutory child protection and/or youth justice systems. The research approach and methodology will then be discussed. Following this, the research findings are presented and then discussed in relation to the three research questions and extant literature. Finally, the report concludes with key learnings and recommendations for future practice.

## 3. LITERATURE REVIEW

This section provides a brief overview of the literature related to the needs of young people with cognitive disability who are exiting statutory child protection and/or youth justice systems, their experiences of transition and the service responses provided. The themes within the literature regarding the core needs of young people and the features of effective supports provide a useful benchmark against which the services provided by ARROS PLACE can be understood.

### 3.1 Defining complex support needs

Young people with cognitive disability who are exiting statutory child protection and/or youth justice systems are the specific focus of this report. These young people experience 'complex support needs' (Dowse et al., 2014) in that they have multiple and interrelated conditions or factors which contribute to the intensity of their support needs. Compounding from early childhood, these conditions and factors can include: multiple disabilities and impairments; poverty; disadvantaged family backgrounds; poor quality and/or unstable housing or homelessness; trauma and abuse and criminal involvement (Baldry 2014; 2017; Baldry & Dowse 2013; Baldry et al., 2018; Dowse et al., 2014; Ellem et al., 2020). These young people have often moved between various support and care services, including educational settings, child protection and supported accommodation settings, health, mental health and disability services, and youth justice, all of which tend to respond as siloed services addressing single conditions (Baldry et al., 2018). This cohort of young people are vulnerable to experiencing cumulative disadvantage across the life span. This is often a result of their complex support needs, in concert with the lack of appropriate support and wrap-around services, and the use of the child protection and youth justice system as the default response to managing them, compounding their life issues (Baldry et al., 2018; Dowse et al., 2014).

The transitions experienced by young people with cognitive disability are complex, intersecting, non-linear and ongoing (Smith & Dowse, 2019). Their transition to emerging adulthood is non-normative and extended (Pearson et al., 2020) and is occurring at the same time as they are transitioning from youth justice and/or statutory child protection systems and in a broader context of multiple, interlocking and overlapping forms of cumulating disadvantage (Ellem et al., 2020; Smith & Dowse, 2019). This study seeks to understand the needs of young people with cognitive disability and responses to them within the context of these interconnected transitions.

## 3.2 'Transitions' and the experiences of young people with cognitive disability

The traditional markers of 'successful' transitions reflect cultural values and assumptions about adulthood. The privileging of markers such as finding fulltime work, achieving independence, marriage and parenthood has been criticised within the literature as being unhelpful to young people in that they do not account for the diversity and complexity of youth experiences (Pearson et al., 2021). A key critique is that these imposed cultural values position young people as individual actors who aspire to meet an 'idealised' adulthood, rather than understanding the individual young person, their goals and own aspirations (Pearson et al., 2021).

For young people, becoming an adult is not a linear, staged process with a predetermined end (Smith & Dowse, 2019). Instead, it is often a change in role or status which can occur within multiple contexts and involve movement across and within various social structures (Strnadova & Cumming, 2016). Thus, the application of simplistic and 'normative' frameworks to transition is problematic for all young people; especially for those with cognitive disability due to the compounding disadvantages experienced over their life course (Ellem et al., 2019). As such, the dominant narrative of 'successful transition' fails to account for the impact of cognitive disability on young people's ability to achieve 'independence'. For example, young people with cognitive disability may: be dependent on others for daily care needs (Jacobs et al., 2020); experience difficulties in organising activities and setting goals (Schalock et al., 2010); require support with social interaction (American Psychiatric Association, 2013); and may have co-occurring medical and psychiatric conditions which inhibit community involvement (Wisner-Carlson et al., 2020). For this cohort of young people, their individual difficulties related to their impairments are further compounded by structural inequalities in society, which in turn positions young people with cognitive disability as 'defective' and unable to achieve the imposed ideals of successful adulthood. These challenges are further compounded for First Nations and LGBTIAQ+ young people with cognitive disability.

### 3.2.1 Transition experiences of First Nations young people with cognitive disability

There is a dearth of knowledge regarding the transition experiences of First Nations young people with cognitive disability and little is known about how many Aboriginal and/or Torres Strait Islander young people have a cognitive disability. According to the 2014-2015 National Aboriginal and Torres Strait Islander Social Survey the majority of First Nations people who completed the self-report survey did not have a disability, however, 20% (n=13, 500) young people did report having an intellectual disability (AIHW, 2018). It is suggested that many First Nations young people with

cognitive disability may never have had their disability appropriately diagnosed or recognised (McCausland & Dowse, 2020). This may be due to young people being unable or unwilling to identify with having a disability, as the diagnostic procedures and associated labels may appear culturally inappropriate (McCausland & Dowse, 2020). A consequence of this is that without a formal diagnosis, many First Nations young people may be unable to receive disability support payments and services (McCausland & Dowse, 2020). Those who do receive disability support may experience a system and individual providers that lack cultural awareness and sensitivity (Green et al., 2018).

Having a cognitive disability may compound the existing challenges associated with intergenerational trauma, systemic racism and socioeconomic disadvantage that many First Nations young people face in their transition to adulthood. For example, First Nations young people: are over-represented in youth justice and child protection systems; have poorer health outcomes and higher rates of suicide than other groups of Australian young people; are disproportionately exposed to risk factors such as discrimination, grief and loss; may experience poorer access to education, income and food security; and are at a greater risk of exploitation, abuse and neglect (AIHW, 2018; Cuervo et al., 2015). As such, First Nations young people with cognitive disability are likely to experience a multitude of practical and structural barriers to receiving the services and supports they require to support their transition to adulthood (McCausland & Dowse, 2020).

### 3.2.2 Transition experiences of LGBTIAQ+ young people with cognitive disability

The acronym LGBTIAQ+ (lesbian, gay, bisexual, transgender, intersex, asexual and queer/questioning) is an inclusive term that aims to acknowledge the diversity of people's gender, sex and sexuality identities. There is limited information about the number of LGBTIAQ+ young people who have a cognitive disability in Australia. However, a 2019 online self-report survey of LGBTIAQ+ young people aged 14-21 years in Australia (n=6,418) found that 39% of the sample (n=2500) identified as having a disability or a long-term health condition (Hill et al., 2021). In the survey, 6.6% of participants self-identified as having neurodiversity/autism (n=422), 0.1% identified as having an intellectual disability (n=10), and 2.1% identified as having an acquired brain injury (n=132). This data comes from a non-representative sample and can therefore not be compared to general population. This highlights the need for further prevalence studies in the Australian context.

Historically, many young people with cognitive disability have been regarded as non-sexual, incapable or uninterested in sex (Toft et al., 2019). These social attitudes have implications for whether or not young peoples needs and identities in relation to gender, sex and sexuality are recognised and valued by others. The negotiation of one's identity is a key task of the transition to adulthood and this can be particularly challenging for LGBTIAQ+ young people, especially for those with a cognitive disability (Toft et al., 2019). Acceptance and support to develop a positive self-image is required for a safe transition to adulthood for this cohort (Bates, 2020). Young people may need to consider their safety and the response of others when deciding to 'come out' about their gender, sex and sexuality identities (Dinwoodie et al., 2020). The literature suggests that disability service providers may be less likely to support the sexuality of LGBTIAQ+ young people with cognitive disability that for their heterosexual peers (Wilson et al., 2018). As such, this group of young people may struggle to belong in disability services, yet also feel unsupported in LGBTIAQ+ services (Dinwoodie et al., 2020).

The lack of appropriate supports for LGBTIAQ+ young people with cognitive disability is concerning given that they are at higher risk for depression, anxiety, substance abuse and suicidal ideations and attempts than other groups of young people (Miller et al., 2021). This cohort may also be at heightened risk of bullying, abuse and violence from both strangers and acquaintances, and subsequently internalise homophobic attitudes, seldom reporting matters to police (Dinwoodie et al., 2020; Stoffelen et al., 2018). The hesitancy of LGBTIAQ+ young people to report matters to police may also be due to assumptions that police will be homophobic and discriminatory if they were to disclose their experiences of violence (Dwyer, 2011).

### **3.3 'Transitions' within the context of statutory child protection and/or youth justice system involvement: The needs and experiences of young people with cognitive disability**

Young people with cognitive disability are over-represented in both the statutory child protection and youth justice systems (Cheatam et al., 2020; Dowse et al, 2021), with many experiencing contacts with both systems (Baidawi, 2020). In this section we explore the extant literature on the experiences of young people during their engagement with these systems and as they transition out of them.

#### **3.3.1 Statutory child protection and out-of-home care system**

This section focuses specifically on the needs of young people with cognitive disability who have had contact with the statutory child protection system, often with experiences of being placed in



out-of-home care (OOHC) such as foster/kinship or residential care placements. Young people with cognitive disability are over-represented in the OOHC population (Cheatam et al., 2020; Ellem et al., 2012; Macdonald, 2010; Mendes & Snow, 2014). They are a neglected group vulnerable to disadvantage whilst in care (Grieg et al., 2019; Macdonald, 2010). There is evidence of poor identification of disability within OOHC and consequently young people's behaviours may not be viewed as part of their disability and responded to as such (Ellem et al., 2012; Mendes et al., 2014). Due to these 'challenging behaviours' young people with cognitive disability may be more likely to be placed in residential care, where they are at risk of being co-housed with other young people with complex support needs and further vulnerable to manipulation and exploitation (Mendes et al., 2014). Some young people who present with complex behaviours are reportedly excluded from certain services altogether when they are perceived not to have the 'capacity to benefit' or that they may negatively 'skew the outcomes' of a program that an organisation is required to report on (Grieg et al., 2019). Further to this, there is a significant lack of services that cater specifically for those with cognitive disability, resulting in poor continuity of care (Grieg et al., 2019; Whyte, 2011).

Young people with cognitive disability in OOHC have experienced significant trauma and as a result have ongoing physical and mental health needs (Mendes, 2015). However, there is lack of attention to these needs in OOHC related services and supports (CREATE Foundation 2012; Mendes, 2015). Young people with cognitive disability in OOHC may also experience more placement instability and placement changes (CREATE Foundation, 2012; Greig et al, 2019), which are linked to poor educational engagement and outcomes (Cheatam et al, 2020), and difficulties in creating positive, lasting attachments (Mendes et al, 2014). Their life experiences, and their disability may be so poorly understood that they may also get into trouble with authorities and experience criminalisation (Baidawi, 2020).

Young people with cognitive disability in OOHC are at risk of becoming a 'cross-over' youth (Baidawi, 2020; Greig et al, 2019; Miller & Pilnik, 2021). 'Cross-over' youth are those that are under both youth justice and child safety orders (Miller & Pilnik, 2021). Young people are often not identified as having a cognitive disability and this can lead them to missing out on essential services. A lack of training of OOHC staff in assessing disability is perceived to be a significant contributing factor to the criminalisation of those in OOHC with cognitive impairment (Greig et al., 2019). People with cognitive disability may also lack insight into their impairments or may not identify as disabled (Greig et al., 2019; Macdonald, 2016). This can act as a driver of criminalisation. For instance, service providers in Grieg et al's (2019, p.929) study reported that "a criminal identity was in many ways preferable to their clients than one of disability, in that it leads to



more acceptance not to mention status and authority”. Furthermore, residential staff may be ill-equipped to understand and manage behaviours related to the underlying disability and ongoing effects of trauma. They therefore may use the police to manage ‘challenging behaviour’ leading to ‘care-criminalisation’ (Baidawi, 2020; Baldry et al., 2018; Greig et al., 2019). Overall, there is a lack of specialised, wrap-around services for this vulnerable population to address their complex needs leading to a tendency for them to be directed to and managed by the criminal justice system on an ongoing basis (Baldry et al., 2015; Ellem & Richards, 2018; Greig et al., 2019).

National OOHC standards require that planning for transition to adulthood and exiting from the child protection system should commence at 15 years of age for all young people in OOHC. Planning should actively involve the young people in defining their leaving care needs, and address core issues such as: housing, education, training and employment, financial security, living skills including budgeting, cooking, driving lessons, access to health services, therapeutic support, income support, social relationships and support networks and reconnection with family where possible. Ongoing assistance during the transition from care and after care is also recommended (FAHCSIA, 2011) with acknowledgement that support should continue to 25 years of age (Mendes & Snow, 2014). However, there is little understanding of the specific needs and experiences of young people with cognitive disability as they transition from OOHC (Macdonald et al., 2016). The few studies that do exist focus mainly on young people with disability generally, and the perspective of service providers rather than young people themselves.

The extant research on the transition from OOHC for young people with cognitive disability indicates a gap between the national standards in Australia and what happens in practice for this group (Mendes & Snow, 2014). Two studies exploring the views of practitioners on the needs and experiences of young people with disability transitioning from OOHC in Victoria provide evidence of poor practice (Broadley, 2015; Mendes & Snow, 2014). They found that transitions for this group were unplanned and led to a range of negative outcomes such as: inappropriate placement with family of origin; in aged care or Supported Residential Services and boarding houses which were at times unsafe; or young people were exited into homelessness (Broadley 2015; Mendes & Snow, 2014). A range of unmet, ongoing needs related to physical and mental health were also reported (Mendes & Snow 2014; Rahmim & Mendes, 2015).

International literature demonstrates that young people with disabilities transitioning from care are at greater risk of having negative transition outcomes compared to youth without disabilities (Kangyi & Adams, 2017). They are less likely to have completed their education and be engaged in

employment (Cheatam et al., 2020), have difficulty finding appropriate housing and have unmet physical and mental health needs (Kang-yi & Adams, 2017). Harwick, Lindstrom and Unruh (2017) captured the perceptions of seven young adults with disability transitioning from care in the United States. The young people reported unmet mental health needs and lack of disability awareness or implications of their mental health diagnosis. However, the study identified personal strengths that helped overcome those barriers including resilience, advocacy, and self-determination (Harwick et al., 2017). This suggests the utility of community programs that can assist young people with cognitive disability to develop these qualities and skills such as the one provided by ARROS PLACE.

There is very limited Australian research from the perspective of young people with cognitive disability on their specific transition from care needs (Macdonald et al., 2016). A Queensland study by Macdonald (2010) identified that the young people who were the focus of the research (n=43) had experienced a range of poor life outcomes since exiting care, including: homelessness, child protection intervention, early parenthood, were victims of crime such as sexual abuse or involved in crime themselves, had contact with mental health services, engaged in substance use and were unemployed. Macdonald et al (2016) expanded understanding of the lived experiences of young adults with mild or borderline intellectual disability exiting care in their in-depth study of six young adults. Their study revealed some of the difficulties young people had in achieving independence post care. For example, they desired independence but reported difficulties managing the increased personal responsibilities such as daily living tasks without the support they previously had in care. They also reported unmet needs such as a lack of meaningful activity or employment and ongoing psychological and emotional needs related to early experiences of abuse (Macdonald et al., 2016).

Care leavers with cognitive disability face additional barriers in their transition from care to independence (CREATE Foundation, 2012; Macdonald et al., 2016) due to systemic limitations. Those with borderline cognitive disability may be deemed ineligible for adult disability services, facing a reduced level of support when they transition to these services (Mendes & Snow, 2014) or they may exhibit behavioural responses that deem them 'too difficult' for disability services altogether (Ellem & Richards, 2018). Those that are 'cross over' youth in custody may be discharged from child protection orders and left to be managed by the youth justice system (Mendes et al., 2014). Furthermore, some care leavers may be disengaged and wish to disassociate themselves from organisations and services related to their time in care, or if they do wish to engage, the services may be inaccessible to them in terms of their eligibility and service delivery models (Malvaso et al., 2016).

Limited post-care support, lack of secure attachments and lack of engagement in meaningful activity, education or employment for young people with cognitive disability may contribute to offending during their transition from care (Mendes et al., 2014). Young people leaving care may become caught up in ongoing cycle of involvement and management by the youth and then the adult justice system (Ellem & Richards, 2018; Greig et al., 2019). It is therefore important to understand their specific needs as they transition from youth justice and the service responses that seek to break this cycle of offending and reengage them in prosocial and meaningful occupations within the community.

### 3.3.2 Youth justice system

Young people with cognitive disability are disproportionately represented in youth justice and adult correction facilities (Baldry et al., 2015; Dowse et al., 2014; Dowse et al., 2021; Ellem & Richards, 2018; Miller et al., 2019). While there is no nationally consistent data on the prevalence of young people with cognitive disability in custody, state-based data indicates that rates are extremely high. For example, Haysom et al (2014) describe the prevalence of possible intellectual disability and borderline intellectual functioning (BIF) in young people in NSW custody (N=295) reporting almost half (45.8%) of young people had borderline or lower intellectual functioning (by IQ assessment), and 14% had an IQ in the extremely low range (FSIQ < 70), indicating a possible intellectual disability.

Young people with cognitive disability may have some behavioural characteristics associated with their impairment that lead to increased attention by the police (Ellem & Richards, 2018). They may be socially naïve and therefore easily manipulated by others, have difficulty responding to changes in routine (particularly if the young person has some autistic traits), struggle with emotional regulation and moral reasoning and have poor insight into the implications of their behaviour (King & Murphy, 2014). The presence of psychiatric comorbidity and problematic substance use can compound these issues (Baldry et al., 2016).

When a young person with cognitive disability comes into contact with the police, communication difficulties can arise. They may have difficulty understanding events and have a limited knowledge of legal rights (Brown et al., 2016). Young people with cognitive disability may be more likely to confess, acquiesce to police demands and fail to accurately recall important information (Bowles & Sharman, 2014). In addition, the young person may not disclose their disability to the police in order to avoid any stigmatising consequences (Scior et al., 2013).

In most jurisdictions in Australia, police are legally required to adapt procedures and protocols to accommodate individuals with impaired cognitive capacity. However, police are insufficiently trained to recognise disability and therefore may not take into account communication and behaviour differences as being part of disability and instead may interpret these as criminal (Baldry et al., 2018; Dowse et al., 2021; Ellem & Richards, 2018). Police may also fail to follow best-practice communication guidelines when interviewing young people with cognitive disability (Agnew et al., 2006) and may engage in ‘hypersurveillance’ of young people (MacGillivray & Baldry, 2013) and even ‘targeting’. For instance, youth justice practitioners in Baldry et al’s study (2018, p. 642) reported “following initial contact with the police such young people become marked and subsequent, repeated and increasingly frequent contact often becomes routine. It follows that ongoing negative interactions and inadequate police responses to disability-related behaviours have the effect of propelling young people deeper into the youth justice system”.

While transition from the youth justice system is defined as “successful movement from a correctional program setting to post-incarceration activities” (Brock et al., 2008, p. 3) the authors’ practice experience suggests that young people with cognitive disability may cycle in and out of the justice system on an ongoing basis (Ellem & Richards, 2018). However, there is limited literature focused specifically on the needs of young people with cognitive disability transitioning from youth justice settings (Ellem & Richards, 2018). The bulk of the literature that does exist is based on the perspective of service providers and focuses on transition programs provided to young people with disabilities generally and delivered within youth detention centres in the United States (see Griller-Clark et al., 2011; Griller-Clark & Mathur, 2015; Mathur et al., 2021; Unruh et al., 2021). It is evident from these studies that young people with disabilities have poorer outcomes than their non-disabled peers in relation to recidivism, school completion and employment (Miller et al., 2019; Powers et al., 2012).

### **3.4 Service responses to young people with cognitive disability transitioning from statutory child protection and/or youth justice systems**

A number of evidence-based transition principles and practices that reduce recidivism and support successful reintegration for young people with disabilities as a general group have been identified in the literature:

- (i) individualised and person-centred transition planning focused on self-determination and goal setting (Cumming et al., 2018; Griller-Clark & Unruh, 2010; Mathur et al., 2021; Miller & Therrien, 2018);
- (ii) the use of a Transition Specialist (TS) to facilitate the self-determination of young people's re-entry goals and ensure communication between and collaboration with outside agencies to enable continuity of post-release services (Griller-Clark, 2011; Mathur et al., 2021; Mendes et al., 2016; Unruh et al., 2021);
- (iii) skill development programs focused on improving self-regulation, decision-making and self-determination skills (Griller-Clark & Mathur, 2015; Powers et al., 2012);
- (iv) timely re-engagement in education and/or vocational programming (Griller-Clark & Unruh, 2010; Hirschfield, 2014; Mathur & Griller-Clark, 2014);
- (v) Pro-social network development: including family involvement & peer mentorship (Griller-Clark & Unruh, 2010; Ochoa 2016; Powers et al., 2012).
- (vi) Inter-agency collaboration and provision of wrap-around services in the community (Cumming et al., 2018; Griller-Clark & Unruh, 2010; Mendes et al., 2014; Unruh et al., 2021).

Few studies have examined transition from youth justice in the Australian context and none were identified that focused specifically on young people with cognitive disability. A single Australian study by Cumming et al (2018) identified transition planning processes for school-aged youth without disabilities serving custodial sentences in New South Wales (NSW), and established the extent to which these reflected current evidence-based transition practices. Cumming et al (2018) found that although a number of evidence-based practices were being used, there was a need for more involvement of the families of incarcerated youth and support for the self-determination of the young people in custody. There was also a reported lack of wrap-around community engagement (Cumming et al., 2018). These findings are concerning when considering the complex and intersecting needs faced by young people with cognitive disability who are transitioning from the youth justice system in Australia. The nature of their complex needs necessitates an even greater need for a coordinated, wrap-around approach to service delivery (Mendes et al., 2014). However, research by Grieg et al (2019) into service provider perceptions of the factors contributing to the criminalisation of young people with cognitive impairment in OOHHC suggest this is not occurring. Grieg et al (2019) report that once in the community there is a lack of specialised services for young people with cognitive disability, young people are not always linked in with these limited services, and services continue to operate in a siloed approach (Grieg et al., 2019). It is therefore important to study community programs such as ARROS PLACE that seek to be responsive to the

complex needs of young people with cognitive impairment who are transitioning from statutory child protection and/or youth justice systems and to include young people's own perceptions of these programs.

The literature is scant on community social work practice with young people with cognitive disability exiting state care and/or youth justice (Macdonald et al., 2016). The limited available research suggests a range of barriers to young people's service engagement. These include: those presented by their cognitive disability, their ongoing mental health needs often resulting from childhood trauma (Macdonald et al., 2016), their ongoing exposure to negative family and peer influences and drug use and involvement in criminal activity (Mathur et al., 2020), and their unstable and sometimes unsafe living arrangements. There are other practical barriers to contend with such as lack of transport and difficulty learning practical living skills (Macdonald et al., 2016). Furthermore, young people are all individual and some may be more likely to productively engage than others based on having more personal resources (Mathur et al., 2020). Positive attitudes towards overcoming barriers to re-entry and self-determination, advocacy and resilience have been linked to productive engagement (Harwick et al., 2017; Mathur et al., 2020).

Inaccessible service structures present another barrier to service engagement (Malvaso & Delfabbro, 2015). Young people with cognitive disability are likely to need access to multiple services such as disability, mental health, education, child safety and youth justice and navigating these services is complex, especially when they are poorly coordinated and operate in silos (Ungar et al., 2014). Some services may also be inflexible with Malvaso et al (2016, p.133) noting that "services tend to be conditional or structured, so that young people (with often chaotic or unstable lives) would be expected to keep appointments, be available on certain days or live up to certain organisations' expectations". All of these findings indicate that young people with cognitive disability require a supported environment that provides flexible service delivery and is attuned and responsive to their complex and individual needs (Malvaso et al., 2016; Ungar et al., 2014). This is the direct focus of this report: social work practice in the community at ARROS PLACE that is aimed at connecting young people with services, building the skills and capacities of these young people to advocate for themselves and re-engage as productive citizens as well as building their networks of support.

Research incorporating practitioner perspectives has led to an emerging understanding of the practices that support these young people in the community. Ellem (2012; 2020) and Macdonald (et al, 2016) emphasise the need for relationship-based practice which involves taking time to get



to know the individual, is developmentally appropriate and flexible in responding to needs as they arise (see also Mendes & Purtell, 2021; Purtell & Mendes, 2019). Ellem et al (2012) explored community workers' perspectives on their practice which included the need for a "gentle and respectful pace of work" with "relationships at the heart" and a focus on building resources, knowledge, relationships and decision-making as well as physical and mental wellbeing, safety and security and self-esteem. The literature evaluating service approaches to young people with complex needs (eg. Malvaso et al., 2016; Ungar et al., 2014; Sandu, 2019) provides similar recommendations and can further inform understandings about attuned services responsive to the needs of young people with cognitive disability. Malvaso et al (2016) suggest that service engagement can be improved by providing: flexible and persistent services; creative, indirect and person-centred approaches to engagement that emphasise the importance of building the relationship with workers and with other peer and family relationships and developing adaptive life-skills. Ungar et al (2014, pp.675-6) contend services that are: "(i) multi-level, (ii) coordinated, (iii) continuous over time, (iv) negotiated with users, (v) provided along a continuum from least to most intrusive and (vi) shown to be effective are more likely to meet the long-term needs of youth facing the cumulative disadvantages of family, community, school and individual challenges".

Despite calls for incorporating the perspectives of young people with cognitive disability in research (Mendes & Snow, 2014) there are few studies that have captured young people's perceptions and experiences of service delivery following a statutory child protection and/or youth justice system experience. Macdonald et al (2016) captured young people's voices on leaving care during their transition to adulthood and found that they expressed a desire for continuity in their relationships with professional staff with the same staff following them across services and life spans. Continuity in relationships is likely to be restorative for young people whose relationships have previously been characterised by instability and trauma. Ellem et al (2020, p. 109) explored the perspectives of young people with complex support needs in transition and reported "helpful and trusting paid relationships could serve as an anchor to young people during complex transitions and other highly turbulent life periods. These relationships were contingent on a deep and non-judgmental knowing of the young person, contributed constructive outcomes and stability in young people's lives, and for some young people, had 'life-saving' effects".

The present study builds on the earlier work of Ellem et al (2012; 2020) and Macdonald et al (2016) to explore both the perspectives of young people and practitioners regarding their experiences and perspectives of the ARROS PLACE project which supports young people with cognitive disability and statutory child protection and/or youth justice experience. This study will

extend the knowledge base around practice with this group of young people, including how to optimise the young person-worker relationship while simultaneously managing risks associated with this work and delivering the outcomes required by funding bodies (Ellem et al., 2020).



## 4. ABOUT THIS RESEARCH

The study sought to understand how the ARROS PLACE program is implemented and the outcomes it achieves from the perspective of young people and the practitioners involved in service delivery. This section outlines the study design and its limitations.

### 4.1 Research aims and questions

This exploratory study aimed to build knowledge that can be used to enhance service responses to, and outcomes for, young people with cognitive disability who are exiting statutory child protection, including OOHC, and/or youth justice systems. It contributes to addressing a gap in current knowledge regarding: 1) the needs of this cohort of young people as they transition to adulthood following contact with child protection and/or youth justice systems; and 2) which models of support and service delivery are perceived by young people to support their transitions.

The research questions that guided the study were:

- What are the support needs of young people with cognitive disability who are exiting statutory child protection and/or youth justice systems from the perspective of young people themselves and the ARROS PLACE practitioners who support them?
- How do practitioners involved in the delivery of ARROS PLACE respond to the needs of young people with cognitive disability who are exiting statutory child protection and/or youth justice systems?
- How do young people with cognitive disability who are exiting statutory child protection and/or youth justice systems experience the service response provided by ARROS PLACE?

### 4.2 Research design

This exploratory study utilised a mixed method design to explore the perspectives of young people and practitioners regarding their experiences and perspectives of the ARROS PLACE project which supports young people with cognitive disability and statutory child protection and/or youth justice system experiences. As shown in Figure 1, the study involved four phases. Ethics approval for Phases One (interviews with young people), Two (interviews with practitioners) and Three (Case file review) was received from the University of Queensland Human Research Ethics Committee (Ref No: 2021/HE002144) in November 2021. The amendment to include Phase 4 (practitioner focus group) was approved in May 2022.

**Figure 1**

*Overview of study phases*



The approach to recruitment, data collection and analysis used in each phase is outlined in more detail below.

#### 4.2.1 Phase One: Interviews with young people

The purpose of Phase One was to capture the perspective of young people in relation to their support needs and experiences of service responses from ARROS PLACE.

##### 4.2.1.1 Recruitment and participants

Recruitment and data collection occurred between December 2021 and April 2022. ARROS PLACE practitioners acted as gatekeepers and distributed the recruitment materials (see Appendix 1) to young people. Members of the research team also attended two group sessions in order to explain the research to young people and answer any questions about the study. The recruitment period was protracted due to the ongoing impacts of COVID-19 (including lockdowns), the Christmas/New Year holiday period and a natural disaster event (flooding) in south-east Queensland.

In total, a purposive sample of four young people who were currently engaged with ARROS PLACE were recruited. They were born between 1997 and 2004. Two of the interviewees identified as female and two identified as male. Two interviewees were Aboriginal and/or Torres Strait Islander. Given the small number of participants, to protect their anonymity the participants have been given gender neutral pseudonyms and will not be matched with their demographic data.

**Table 1**

*Young people: Participant pseudonyms used in this report*

Participant number	Pseudonym
Young person 1	Alex
Young person 2	Bailey
Young person 3	Casey
Young person 4	Darcy

The research team had originally aimed to also recruit a snowball sample of supporters/family members of the young people to share their views on the ARROS PLACE program and the needs of the young person. However, none of the young people identified a person they wanted to participate in the study.

#### **4.2.1.2 Data collection and analysis**

Individual interviews with young people were conducted either face-to-face (n=3) or via zoom (n=1) by a member of the research team. The interviews ranged from 30 to 60 minutes in length and were audio recorded with the consent of the young person.

Interviews were semi-structured so to allow a set outline of topics to be covered, whilst providing the flexibility to explore additional topics raised by the young person. The interview guide (see Appendix 2) was co-designed with ARROS PLACE practitioners and informed by interview guides used in previous research with young people transitioning from OOHC (Venables, 2019; Venables et al., 2017). The interviews explored the perspective of young people regarding:

- The factors that led to their involvement with ARROS PLACE
- Their experience of accessing and working with the service
- If and how the service met their needs
- Their overall opinion of the service

The interview recordings were transcribed. The de-identified transcripts were entered into the qualitative data management software, NVIVO and analysed thematically.

#### **4.2.2 Phase Two: Interviews with practitioners**

The purpose of Phase Two was to capture the perspectives and experiences of practitioners involved in the delivery of the ARROS PLACE program regarding the needs of young people and the ways in which the program supported them.

##### **4.2.2.1 Recruitment and participants**

Recruitment and data collection occurred between November and December 2021. A purposive sample of six practitioners were recruited from the ARROS PLACE program and its governing organisation, Community Living Association. These practitioners were targeted due to their unique knowledge and understanding of the ARROS PLACE program. Recruitment material, including participant information sheet and consent form (see Appendix 3), was distributed to practitioners by

the organisation's gatekeeper. The characteristics of our practitioner sample is listed below in Table 2.

**Table 2**

*Participant characteristics: Practitioners*

<b>Characteristic</b>	<b>Total</b>
Gender	Female (n=5) Male (n=1)
Age	18-25yrs (n=2) 26-45yrs (n=2) 46yrs+ (n=2)
Role	Frontline service delivery (n=4) Manager (n=2)
Qualification	Bachelor Social Work (n=5) Other (n=1)
Experience in social services sector	0-10yrs (n=3) 10-20yrs (n=1) 20yrs+ (n=2)

#### **4.2.2.2 Data collection and analysis**

The primary method of data collection in Phase Two was interviews. Four participants took place in individual interviews, whilst two participated in a joint interview. The interviews were conducted face-to-face by a member of the research team. They lasted 40 to 50 minutes and were audio-recorded with the permission of the participants. Interviews were semi-structured (see Appendix 4) to allow a set outline of topics to be covered, whilst providing the flexibility to explore additional topics raised by the participant. The interviews explored:

- Their role and associated tasks in service delivery
- The types of issues that they support young people with
- The extent to which the program meets the needs of young people
- Intra and inter-agency relationships associated with service delivery
- The strengths and weaknesses of the service delivery model

The interview recordings were transcribed, and the de-identified transcripts entered into the qualitative data management software, NVIVO. The transcripts were then analysed thematically.

### 4.2.3 Phase Three: Case note review

The purpose of the case file review was to gain further insights into the service delivery of ARROS PLACE and how it was documented. The research team reviewed both individual case notes and the group session notes.

#### 4.2.3.1 Sample

Three young people (n=3) consented to the review of their individual case notes. The group session notes from January to October 2021 were also reviewed. In accordance with the conditions of the study's ethical clearance all files were deidentified by ARROS PLACE practitioners before they were given to the research team.

#### 4.2.3.2 Data collection and analysis

The technique of clinical data mining was used – this is the practice of using existing agency data for practice-based research purposes (Epstein, 2010). The focus of the review component was to identify: 1) the needs of young people and how they were identified; 2) the service delivery approach, including tasks/activities, skills and guiding principles used by practitioners to respond to the presenting needs of young people.

### 4.2.4 Phase Four: Focus group with practitioners

The purpose of the practitioner focus group was to use specific practice examples to help illuminate the practice principles and framework used in delivering the ARROS PLACE program.

#### 4.2.4.1 Recruitment and participants

A purposive sample of the four practitioners currently involved in the service delivery and management of the ARROS PLACE program were recruited (see Appendix 5). These participants were also involved in Phase Two of the study.

#### 4.2.4.2 Data collection and analysis

The data collection method for Phase Four was one focus group lasting approximately 50 minutes. It was held in July 2022 via zoom and was facilitated by two members of the research team. With consent, it was audio and video recorded using zoom; however, only the audio was used for transcription purposes. Drawing on examples from the case file review of individual and group

notes (Phase Three), the focus group explored the practitioners perspectives on: 1) guiding practice principles; 2) the purpose of group case notes; and 3) an exploration of how the practitioners handled key events during the group sessions and the factors that informed their approach to engaging and supporting the young people in those examples.

The focus group recording was transcribed, and the de-identified transcript was entered into the qualitative data management software, NVIVO and analysed thematically.

### **4.3 Research limitations**

Due to the lack of specialist services to support this cohort of young people, it is possible that our purposive sample of young people and practitioners had a vested interest in the program being viewed positively by the researchers. This limitation is compounded by the small sample size and a reliance on self-report data. However, despite these limitations, the sample allowed for those best positioned to comment on the program to be recruited, allowing for the research questions to be addressed. The researchers have also taken care to report both positive and negative perceptions of the service that were expressed by the young people and the practitioners.

## 5. FINDINGS

This section presents the integrated findings from the four phases of the study. First, we present data related to the program structure, including the impetus for the program. Second, we explore the young people's context in relation to their individual historical experiences of service systems and their current needs and goals. Third, we present findings associated with the practices of ARROS PLACE program and how the service supports and responds to individual young people. Fourth, we explore young people's experience of ARROS PLACE services and support. Fifth, we discuss the approach to group work undertaken by ARROS PLACE. Finally, we outline perceived outcomes for young people who have participated in the ARROS PLACE program.

### 5.1 Program operations and context

The main data source for this section was the practitioner interviews. This section outlines: the impetus for setting up the ARROS PLACE program; eligibility and referral pathways; how the program was staffed and the group composition; how the program focus evolved over time.

#### 5.1.1 Impetus for setting up the ARROS PLACE program

The ARROS PLACE program is a pilot project funded via a Federal Government Information, Linkage and Capacity-building (ILC) grant. ARROS applied for the ILC grant in recognition of the fact that group work and targeted support around employment and skill development was challenging to do when working with crisis, and individualised funding packages. They were motivated to provide a more flexible service model and recognised that young people with a cognitive disability and an experience of the statutory child protection and/or youth justice system were missing out on access to formal supports to support their transition.

I think the reason it sat with this group, it was just those particular young people and seeing the need for the people that access ARROS. So, young people with intellectual disability, as well as like a care or a youth justice experience and at risk of homelessness were often missing out on this kind of stuff. ...So it was kind of a bit more of a flexible way of doing that and also acknowledging that lot of young people that ARROS work with don't have an NDIS plan and so they don't have access to those groups or to that kind of flexible support structure. So, that block funding is really useful to kind of do this small, long term developmental work, I think. (Practitioner 1 – individual interview)

The design of the program was influenced by the interest that a group of young people involved in another ARROS program had in advocacy and peer mentoring, which was uncovered during a project about developing a submission based on their experiences to the DRC.

I guess leading up to the ARROS PLACE project, we were doing the transition to employment [program via ARROS]... And through that project, we had a couple of group sessions where we tried to talk about people's experience of preparing for employment. And part of that was preparing a submission for the Royal Commission. And through that process and through a couple of sessions with the young people, there seemed to be a lot of motivation around advocacy and around discussing their shared experience and wanting to make some kind of movement or do something about it. So, there was a lot of young people who were really passionate about that. And so through that, we decided to apply for further grant funding to kind of create more of a group space to do that kind of work.  
(Practitioner 1 – individual interview)

The ARROS PLACE project was designed to build on the experiences outlined in the excerpt above, by supporting this group in developing their confidence, knowledge about their rights and advocacy skills. ARROS PLACE sought to achieve changes to not only the knowledge and confidence of the young people in their community but to increase the capacity of stakeholders to support their transition to adulthood. The name of the program, ARROS PLACE, was inspired by these goals for the group:

But initially I guess at the point of us writing the grant and what we had hoped for it, is PLACE is an abbreviation. So, it was Peer-Led Advocacy, Capacity-building, and Education, I think is what we went for. So yeah, the PLACE part is an abbreviation. So, we wanted to have this element of skill building and skill development, because unemployment was a huge issue for young people. And then also this element of advocacy, where people could come together, share their concerns and their issues, and we could support people to empower each other to either problem solve in their own lives or come together for systemic change was the intention. (Practitioner 2 – individual interview)

In designing the group, the role of transport was a key consideration. There was recognition of the young person's context and the barriers that they face to engagement in terms of resources and confidence catching transport. There was also recognition that transport was a preparation phase of the group itself. It also enabled debriefing and was a touchpoint for individual work to occur before and after groups (this is discussed in more detail in section 5.4.2.4).



### 5.1.2 Eligibility and referral pathways

The primary target group for the ARROS PLACE program is young people aged 15-25 years with cognitive disability and an experience of statutory child protection and/or youth justice systems, who are at risk of, or experiencing homelessness. However, practitioners suggested that having ILC grant funding allowed the ARROS PLACE program to be flexible regarding eligibility, when compared with other programs within the organisation:

I think our eligibility is 15 to 25 and at risk of homelessness. And through ARROS's experience, what we've learnt is people who are at high risk of homelessness are people who've had Child Safety or youth justice experiences. And particularly the transition out of those systems is when they fall through the gaps, and especially people with intellectual and cognitive disabilities. So that's where we sit. So there are some young people that we work with who don't necessarily have a Child Safety experience or an out of home care experience, which is how the transitions outreach team works. Because we're bulk funded, we're funded by a grant, we have the ability to be a bit more flexible, which is great, because it means when there are other vulnerable people who don't necessarily have those experiences, we can still support them. (Practitioner 2 – individual interview)

As highlighted in the excerpt above, grant funding – rather than individual funding, allowed ARROS PLACE to have more flexible eligibility criteria. Priority was given to those who had an experience of statutory child protection and/or youth justice involvement, but these were not mandatory criteria for eligibility. Practitioners also suggested that ARROS PLACE prioritised referrals of young people who had been connected to the 'Transition to Employment' project as many of them did not have transition support in place such as NDIS funding. The practitioners perceived this enabled continuity for the young people as they were able to continue accessing support via ARROS PLACE services and could then be supported to obtain formal supports such as NDIS.

The ARROS PLACE program was marketed internally within CLA and via engagement with other services to gain referrals:

And we went to so many organisations, community organisations, state funded places, to talk about our [ARROS PLACE] project and get referrals...We went out and we said, "Hello, this is what we're doing. If you have someone who you think fits this program, please reach

out to us.” And we got heaps of referrals. ...I think we really underestimated the community’s need for that. (Practitioner 2 – individual interview)

Through their engagement with community stakeholders, they found that the sector also agreed that there was significant need for the program. Practitioners reported that they received referrals from a variety of sources including other ARROS/CLA programs, youth justice, schools, flexi schools and self-referrals.

### 5.1.3 Staffing the ARROS PLACE program and group composition

Practitioners reported that the program was initially staffed by two key project workers from ARROS:

So, at the time it was [practitioner] and [practitioner] who were the project workers. [They] each kind of had [their] own caseload, I suppose, that [they] provided individual support to, and then would do the groups together. (Practitioner 2 – individual interview)

Staffing was then supplemented by social work students who rotated through the service on placement.

At the time of data collection, ARROS PLACE included 14 young people in total. Practitioners reported that they were flexible in terms of the total number of young people able to engage in the program. However, they were conscious that the groups could become unwieldy if the numbers were too high since the young people may have support needs requiring one-on-one support:

There was no rules in place of, if you don’t come a certain amount of times, you’re out. There was nothing like that. It’s just it’s open for whoever wants to come in. But also just being mindful of the amount of workers we had available and the amount of support that young people were needing in that space. So, we didn’t want it to get to a point where it was so big. ...We didn’t want it to be too worker heavy. But also acknowledging that some of the young people did really need one-on-one support in the space. (Practitioner 1 – individual interview)

### 5.1.4 Evolution of the group purpose and format over time

As discussed, the initial purpose of the group was inspired by the interest in advocacy that a core group of young people involved in the ARROS Transition to Employment project had. However, the group composition and subsequent focus evolved over time:

So, in the next group, they kind of weren't as big of a presence. And I think on reflection, they were the one's really pushing that advocacy stuff. And so when we transitioned into the ARROS PLACE group, I feel like that motivation kind of slipped back a little bit and it was more about social connection and wanting to learn new skills. So we tried to keep the advocacy stuff going and get people thinking about it...And so, at the start, we thought that would be the main focus and we would get something going and we would support groups to come out to events, like the Create Transition to Adulthood events or some other advocacy spaces where we could go and maybe give a talk or a presentation. But I felt like, once we started ARROS PLACE, that became less of the young people's focus and more of our focus. So we kind of had to rejig it a little bit. (Practitioner 1 – individual interview)

Practitioners indicated that there were some young people who raised hesitations about being in a group focused on advocacy and their past child protection system experiences:

There were some young people who were really apprehensive about advocacy. They were really scared to share their experiences. Bringing young people together to say, "Hey, let's do advocacy about Child Safety. What experiences have you had?" and people have horrific experiences. Of course they don't feel comfortable sharing that. So, I remember having a conversation and a young woman was like, "I don't actually want to come if we're talking about this sort of stuff. (Practitioner 2 – individual interview)

Practitioners were responsive to adapting to the changing needs of the young people and ensuring the group remained young-person centred:

And it became more about young people really just wanting that space to socially connect, learn new skills. Specifically, a lot of them were really interested in cooking and I think it became people wanting to cook and just sit down together and share a meal. So there were a lot of people who lived alone in public housing or lived with family where there was a lot of tension. And so they didn't really have people to connect with and share a meal with. So it was about trying to build some skills around that. And then, through that process, the plan was the advocacy stuff hopefully coming on later on in the project. So just trying to build a bit of safety in the group as well and social connections, everyone felt comfortable with each other. they needed to kind of have, potentially, a cognitive or intellectual disability plus care or youth justice. (Practitioner 1 – individual interview)

In its current form, the group is primarily focused on social connection and cooking. Food cooked in the group is provided to other young people engaged with ARROS. This has enabled the group to be framed as a form of work, so that young people can be compensated for their time and efforts.

And we set this up as if we cook and we all sit down and have dinner and the leftovers we container up and we freeze and we can provide them other young people who don't have access to food, we can make this a paid experience. We kind of framed it as work, like supported workplace, but I think it's also just a bit like paid work placement even, something like that. So, even though people get paid, and when you're living in poverty, getting 20 bucks a week is a huge draw card. (Practitioner 2 – individual interview)

The program structure evolved further following COVID-19 restrictions, as the groups were required to be split into smaller groups to allow social distancing.

## 5.2 The young people: Their historical context, needs and goals

The main data sources for this section were the individual case files (n=3), as well as the interviews with young people (n=4) and practitioners (n=6). This section addresses the first research question:

- What are the support needs of young people with cognitive disability who are exiting statutory child protection and/or youth justice systems from the perspective of young people themselves and the ARROS PLACE practitioners who support them?

We first present a composite case study that illustrates the social context of young people engaged in the ARROS PLACE Program. We then explore why the young people decided to join ARROS PLACE. The section concludes with an exploration of the needs of this cohort of young people.

### 5.2.1 Composite case study

The limited available previous research highlighted that young people with cognitive disability in transition report experiencing multiple, intersecting issues such as: homelessness, child protection intervention, early parenthood, being victims and/or perpetrators of crime, mental health issues, substance use and unemployment (Ellem et al, 2022; Macdonald et al, 2016). Due to the small sample who participated in this research there would be a high likelihood of identification if a young person's life history was reported. Therefore, the research team has developed a composite case study to illustrate the social context of the young people who participated. The case study is not illustrative of any one young person. The case study is designed to reflect the key presenting issues and needs of a young person engaged in the ARROS PLACE program.

## Sam's Story

Sam is a 20-year-old male who identifies as Aboriginal. As a child Sam grew up in a home where there was domestic violence, mental health issues and drug use. Sam was removed from his home at the age of 9 and placed in OOHC. Sam has had previous involvement with youth justice. Sam was excluded from school at 15. Sam has a diagnosed cognitive impairment. Since transitioning from care at 18 Sam has been couch surfing at friend's houses. Sam is introduced to ARROS PLACE by a friend. Sam hopes to have support to get his licence, obtain a job and learn to cook and live.

This case study highlights some of the core presenting issues and needs faced by young people with a cognitive disability in transition. It illustrates the corrosive social disadvantage these young people experience across multiple social and service contexts, as well as a common desire to achieve independence, employment and stability as an emerging adult. This example of a young person's history provides a framework for understanding the rest of the research findings.

### 5.2.2 Previous experiences of the young people

In their interviews the young people commented on their past life experiences. These comments revealed that prior to joining ARROS PLACE they were experiencing a lot of uncertainty, a lack of informal or formal support and it was evident that they lived with complex disadvantage:

Mental health. I wasn't medicated, I was erratic, I would blow my money, which at that time, I didn't even have DSP [Disability Support Pension] at that point. I was living on \$540 a fortnight, but paying rent through Youth Housing Project, which I was lucky to have, majority don't get that. They have to pay private rent. Okay. I was running a car as well. And then on top of that I had bipolar. I was manic. I didn't have lithium. I was living in circles. I was spiralling. I had no support. And I almost died so many times. No one will ever understand because no one ever gets to that point. (Alex)

This excerpt demonstrates the range of unmet needs the young people were experiencing due to not being linked in with formal supports – in this example the DSP and mental health services. Despite the difficulties facing this young person, there was a level of awareness that their life could be much worse if they did not have access to subsidised rent.

In the interviews all of the young people reported a past history of involvement with Child Safety, but did not report on their involvement in the youth justice system. However, youth justice involvement was noted in the case files. Child Safety involvement ended at 18 and all of the young people spoke negatively of their previous experience with Child Safety. For example:

I've been with Child Safety. They've known me since I was pretty much like three-and-a-half because of family issues and all that... But I don't talk to Child Safety at all no more because they said my court case, the case was closed because I was 18...I don't really like Child Safety because I just got - So Mum had 13 kids, and half of them kind of went to Child Safety because Mum couldn't really look after herself and look after a baby at the same time. So Mum gave them to Child Safety. And then when I finally got to see my sisters, when they grew up, in Child Safety, when they moved out of there, two of them kind of tell me it's bad, but the other ones would say, "Oh no, they were nice people." My younger sister would say they're rude. (Bailey)

Young people described the uncertainty that they experienced when they 'aged out' of Child Safety and their perception of feeling lost and not knowing where to turn for transition support:

To describe it is, the uncertainty. You don't feel there's stable support around you. You feel that you could be dropped at any point. And then alongside with what you're already going through, which is, in some situations, like unfortunately in my situation, at such a young age and being so vulnerable -especially in foster care and having no one that's close to me, it is quite scary because you don't know who you can rely on. There's also, how are you going to motivate yourself to trust someone and build a rapport with them if you know that the funding's unstable. This is before I got the NDIS [National Disability Insurance Scheme], for example. So I was going through after-care funding. And, as you can imagine, that's not very certain. (Alex)

For this young person, they questioned whether they should invest their energy into attempting to form a trusting relationship with Child Safety practitioners considering there was uncertainty that the funding and the relationship would continue. Often young people with an OOHC experience have had to share and reshare their traumatic histories with numerous practitioners over the years and this is an exhausting and potentially retraumatizing process. It is therefore understandable that it may be more self-protective for them to not engage with practitioners. This is especially so if they

are aware the practitioners already perceive them to be disengaged and the practitioners do not have a range of strategies for engaging young people effectively (Smyth, 2017).

ARROS PLACE practitioners confirmed these young people were “falling through gaps” due to being labelled as disengaged and were being discharged from Child Safety without adequate transition planning such as an NDIS plan. They viewed the role of ARROS PLACE as existing in this transition space to bridge the gap:

Since I've been a part of ARROS, it's been people who have been exited from the system and unsupported and just missing every gap and then us being like, “How can we support you? And how has Child Safety let you do down?” Which is a really hard space to be in. But yeah, I think a lot of the young people we work with are seen as disengaged. When you have an intellectual cognitive disability, when you're living in poverty and you are experiencing homelessness, your ability to remember appointment times, to get from point A to B, to legally get somewhere that isn't train hopping and getting caught, it's so challenging to meet these requirements. And we've had CSOs [Child Safety Officers] say, “Oh, this young person is 17 now. It's their responsibility to reach out to us.” And it's like, “You are discounting the fact that this person has a disability, and how is that impacting them?” And then just deciding that those young people are too hard to engage. We're not going to support them because they're not reaching out for help... it means Child Safety is exiting young people with disabilities without NDIS plans. (Practitioner 2 – individual interview)

This excerpt highlights a perception that the impacts of young people's cognitive disability were not being considered by Child Safety practitioners. Furthermore, because the young people had not engaged with Child Safety practitioners or had been deemed ‘too hard to engage’, the young people were then exited from Child Safety without transition supports such as NDIS plans. This then left them without support and with a range of ongoing unmet needs.

ARROS PLACE practitioners reported that the young people also had some negative past experiences of exclusion from groups and school. The practitioners did not report which services these groups were through. In light of this, ARROS PLACE practitioners wanted to ensure ARROS PLACE groups were more responsive to young people's lived experiences and remained inclusive:



...we wrote the grant for this project, which is why we focused on group work and bringing people together in a supportive space, because we were hearing all these stories about young people who couldn't engage in school because the school couldn't meet their needs, or went to groups, but because of their challenging behaviours were kicked out. And how could we create a space that accepted all of that? (Practitioner 2 – individual interview)

These examples demonstrate that in both Child Safety, group and school contexts the young people's needs were not being met and there was a perceived failure of workers within these systems to effectively engage them to address these unmet needs.

### 5.2.3 How and why young people decided to join ARROS PLACE

The young people reported that they found out about ARROS PLACE through various means which included: flexi school, friends, and through the broader services of CLA. Several young people emphasised that they had made an active choice to join ARROS PLACE. For example:

"I had to. I needed [to]. I had to survive. I was trying to seek help because I didn't know how. I couldn't control my life. I didn't know what to do" (Alex).

This example demonstrates that the young people were looking for support and anchor to help them survive. This quote also illustrates the sense of lacking control over their own life. Like Alex, all of the young people felt that ARROS PLACE was one of the only places where they could receive this type of guidance and support to help address their unmet needs.

### 5.2.4 Young people's perceptions of their needs

In their interviews the young people expressed goals for their lives which reflected the stage of life they were in - emerging adulthood. They discussed goals such as: to get a job, a car, obtain their drivers licence and their hopes to improve their living skills. For example:

I already live by myself, so, I guess, whilst I have the support, making or growing my life skills would be a crucial part of this time... So, I appreciate all the help that I get. I think, at the moment, just trying to figure out licence stuff and everything like that, so soon I can transport myself other places... like general house maintenance skills, meal prep, which ARROS Place has been great for, and time management and stuff like that. So, it's just a lot of crucial skills you have to learn to be able to function as an independent adult. (Darcy)



One young person expressed needs in relation to developing an adult identity, navigating peer relationships and finding peers whom they could trust:

I think the biggest worry would be the uncertainty, trying to find your direction and your path. Also trying to... [manage] connections, like social groups, people who you should be around, learning how to, I guess, blend in and find where you need to be and surround yourself with people who are right. And just being able to learn and be able to be mature enough to know what's going on around you at all times. And being able to know who you can trust and things like that is a bit of vulnerability for a few years going into adulthood. (Alex)

One young person identified that they transport needs, highlighting unfamiliarity with the Brisbane area and challenges in navigating the public transport system:

Because I'm from the country, like I'm from [Rural Location 1], that area, and I've only lived up here from when I was 13, and I'm 19 now, and I don't really know my way around or like anything like that, around big, massive places like the city. So I was kind of like frustrated. I didn't know who could help me. I couldn't really ask anyone else for help. I was pretty much stuck. If I had to go somewhere, like in the south side, I couldn't go because I would have no one to take me. Because all my family don't have a car and they just catch transport... And if I need help with transport getting somewhere. Because I'm not really familiar with trains and buses. I'm a person that could get lost so easy and not know where to go from there. (Bailey)

Bailey's comments also highlight the sense of isolation and not having a network of support to assist them, that was common to the stories of other young people.

Overall, the young people identified a need for guidance and some support to navigate access to services:

You think about it. You hop in someone's shoes, okay, of coming out of foster care and you go, "All right, I'm out of foster care. Okay, I have mild autism, I have mental health and things like that," and you get shut down by the mental health system all the time, which is a common occurrence, and people jump off buildings all the time because of that unfortunately, and that's truth, and then you're trying and get yourself out of the shit. You just need support. You need a support worker to help guide you and be able to sort of liaise and help with typing and things. (Alex)

These examples demonstrate the potential vulnerabilities and multiple disadvantages of the young people. They also indicate young people's desire to develop trusting relationships with practitioners

who can provide them with guidance and support and build their independent living skills during transition. This contests the young people's identities as 'disengaged' and instead suggests they are willing to engage but need practitioners who can follow their lead to effectively engage them.

### 5.2.5 Practitioner views on the young people's needs and goals

The individual case file review and the practitioner interviews provided insight into the practitioners' views of young people's needs and goals, as well as how these were identified and discussed with the young people in practice. In discussing the needs of young people, practitioners identified that the young people accessing ARROS PLACE experienced past and ongoing trauma, were isolated and lacking formal and informal supports.

They'd come from Child Safety, they'd come from potentially trauma backgrounds, they didn't necessarily have any adults [who] were supportive, they might connect with family of origin enough and that didn't work terribly well. They were poor, housing instability and homelessness, unemployed, relationship issues, early parenting for young women and young men, domestic violence issues. So, all of those issues. So, there was lots of crisis, connection with the criminal justice system. (Practitioner 5 – individual interview)

As illustrated in this quote, practitioners reported that young people were either living alone in public housing or with family where there was a lot of tension and safety issues. They also highlighted the issue of food insecurity. Despite these common needs and experiences, the practitioners also acknowledged the diversity of needs of the young people participating in ARROS PLACE and that the young people's level of insight into their needs varied:

I think we had very different - the young people [who] we were working with had very different needs and different connections with CLA and with the NDIS supports. So, there was a big variety in terms of young people who had awareness and understanding and insight into their disability and their support needs, their day-to-day safety and goal planning, as well as wanting to come to the groups. (Practitioner 1 – individual interview)

We now turn to discuss the approach that practitioners used to identify needs and goals with young people. We then report on the needs that were identified by the practitioners in their work with young people.

#### 5.2.5.1 Approach to identifying needs and goals

ARROS PLACE practitioners identified the initial needs of each young person at an intake meeting. The young people were asked about their goals in an informal setting, such as while driving in the

car, and these were then recorded in the case notes. However, it is not clear from the notes the exact inclusive practices that were used to discuss goals with young people. These intake meetings sometimes involved another ARROS practitioner if they were already supporting the young person.

The case files also indicate that ARROS PLACE practitioners engaged in 'team meeting reflections' where the ARROS team met and identified other areas of need that the young person did not appear to have articulated themselves. For example, mental health and disability assessment and funding and the need for social supports. They then raised these additional needs with the young person when they next engaged with them. They inquired whether these might be areas that the young person perceived they required support with and were guided by the young person's priorities/goals. Furthermore, in these 'team meeting reflections' the ARROS PLACE practitioners also reflected on any goals that the young person had initially identified at intake but were not yet being realised. For example, one young person's goal was to obtain their drivers licence, but they had not taken driving lessons in the several months since intake. The practitioners attempted to identify what obstacles might be preventing this and how they could further support the young person to achieve their goal.

The review of case notes indicated that the practitioners continued to engage in frequent and ongoing discussions with young people about their needs and goals. These discussions appeared to be informal and carried out in a variety of contexts including during outreach visits or during transport. The case file review indicated that these discussions related to not only needs explicitly identified by young people, but also to needs that practitioners observed, or thought may be relevant. For example, all of the files reviewed contained examples of practitioners finding critical moments to engage young people in discussions about issues that were impacting on their lives. In one instance a young person described their conflict with their neighbour in their Department of Housing accommodation. In these cases, the practitioners appeared to be responsive to and respectful of the young people's wishes in relation to working on these issues. They remained led by the young people and focused on maintaining their relationship with the young people so they could continue to support them.

#### **5.2.5.2 Types of needs documented in individual case files**

The review of individual case files (n=3) provided insight into the needs of young people engaged in the ARROS PLACE program, as documented by the practitioners. The case files highlight the diverse needs of young people. However, it is important to note that the case management notes

are more likely to only reflect needs that were addressed by the ARROS PLACE practitioners in some way. As such, areas of unmet and unassessed needs may be underrepresented within the dataset described below.

***Personal relationship needs:*** Needs related to negotiating relationships with partners, peers and immediate family were referred to in all case files. History of abuse by family members was noted in all files and had been discussed in the context of the young people's participation in the DRC. The current impacts of this childhood trauma were evident in all the files and will be discussed in more detail in relation to mental health needs. Grief and loss issues were evident in two cases. In one case the young person's mother and other family members were deceased and in the other case a death of a friend triggered a grief reaction. Another young person identified difficulty negotiating a safe relationship with healthy boundaries with their father while the father was an active drug user and past perpetrator of abuse. One young person wanted to increase contact with their siblings.

Needs in negotiating peer relationships within the ARROS PLACE groups were noted in two files. Difficulties in intimate partner relationships were noted in two of the files, with one young person applying for a domestic violence order. ARROS PLACE practitioners, along with the young person's support worker, assisted this young person to apply for the domestic violence order.

***Identity and cultural needs:*** Two case files specifically identified support needs associated with culture, with both young people identifying as Aboriginal or Torres Strait Islander. In both instances, it was reported that the young people wished to connect with their culture and understand their history.

An LGBTIAQ+ identity was raised in one case, but it was reported that the young person was not involved in their LGBTIAQ+ community. In seeking to support this young person with their identity an ARROS PLACE practitioner registered to attend an event to hear from community advocates working in the LGBTIAQ+ field and invited the young person to become involved in some leadership/advocacy training. The young person did not wish to participate at the time due to other crisis needs impacting on them.

***Mental health needs:*** Mental health concerns were noted in all case files. Reference to mental health within the case notes included documentation about: one young person's suicidal ideation; all young people reported difficulty sleeping and flashbacks and/or nightmares and this was noted as being a PTSD symptom of past abuse; young people's engagement with or referrals to mental

health agencies, and young people discussing and practicing coping and de-escalation strategies with their ARROS PLACE practitioner.

**Physical health needs:** Physical health needs were identified in all the case files. Reference to physical health within the case notes included: how fatigue and ill-health had decreased the attendance of one young person in the ARROS Place groups; another noted dental health needs. A third young person noted a lack in appetite due to anxiety. Education around personal hygiene and use of personal protective equipment in the context of COVID-19 lockdowns was also noted in the files.

**Disability needs:** All files noted the young people had been assessed for intellectual impairment at some stage. One young person was noted to have a diagnosed speech and language impairment. One young person referred to their autism. One file noted the speech and language and psychological assessments that took place to support the young person's NDIS application. All the files noted that the young people were being supported to apply for DSP and NDIS. The files noted that not all the young people identified with having a disability. The practitioners documented their need to use language that the young person did identify with such as 'learning challenges' when supporting them.

**Education and training needs:** Two out of three case files referenced educational needs. In both cases the young people attended flexible education programs. One young person remained engaged, while the other was excluded and went on to access a traineeship.

**Employment needs:** Support needs related to employment were present in two of the case files reviewed. The third young person was currently attending school and reportedly did not want to explore employment at that time. One young person needed assistance navigating employment service expectations and applying for a Blue Card. The impact of their disability was noted in their employment needs, for example the young person needed employment that accommodated their disability by offering a slower pace and a supported environment. The young person was able to access supported employment through CLA.

**Accommodation needs:** All files identified the need for stable and safe accommodation for the young person. Two of the young people were in shared housing – one with family members and one living with a friend's parent, but reportedly expressed a desire to live independently at some point. The third young person was in Department of Housing accommodation and had ongoing safety concerns in their housing due to its location in inner city and ongoing disputes with the neighbour that resulted in police action against both parties. The young person obtained support

from ARROS PLACE to negotiate with the Department of Housing and was seeking alternative accommodation and was on a waiting list.

**Life skill needs:** Support needs related to life skills were present in all the files. One young person wanted support to get their learners licence and engage in driving lessons. Support with meal preparation were common across the casefiles with all the young people participating in the ARROS PLACE cooking group. In one case support with clothes washing was provided regularly to a young person prior to or following the groups.

**Income needs:** A lack of financial resources was identified in all cases. A State Penalties Enforcement Registry (SPER) debt was identified in two cases and the young people were paying off their SPER debt via their involvement with ARROS PLACE as per CLA's agreement with SPER. All of the young people were being supported by ARROS PLACE practitioners to apply for a DSP through Centrelink.

**Navigating service system needs:** The need for help with navigating service systems was noted across all the case files. For all young people this help was required across multiple domains, such as: accessing safe housing through the Department of Housing; applying for a DSP through Centrelink; applying for NDIS; paying off SPER debt and navigating legal issues with police and Legal Aid. The case files documented ARROS PLACE practitioners providing assistance with these needs.

**Legal needs:** Current justice issues were identified in two of the case files. Primarily, this related to young people being charged with criminal offences. One young person reported mistreatment by the police in their file. Support related to legal issues included: keeping track of court appointments; transport of young person to legal appointments; attending court; and liaison with Legal Aid. One young person was the complainant in a Queensland Civil and Administrative Tribunal case. Previous youth justice involvement was noted in all of the files.

**Fundamental needs of everyday living:** Fundamental needs in relation to safety, food and transport were noted in all the files.

**Other needs:** In two of the files the young people had leadership and advocacy goals. These included speaking at CLA events, becoming involved in the youth co-op and participating in research.

The review of the case files highlights the multiple, complex, dynamic and compounding needs of young people over time. The way in which ARROS PLACE responded to these needs is discussed in the next section.

### 5.3 ARROS PLACE in practice: Supporting and responding to the individual needs of young people

This section outlines findings across all data sources and focuses on the experiences of service delivery and outcomes achieved from the perspective of young people and practitioners. It addresses the following research questions:

- How do practitioners involved in the delivery of ARROS PLACE respond to the needs of young people with cognitive disability who are exiting statutory child protection and/or youth justice systems?
- How do young people with cognitive disability who are exiting statutory child protection and/or youth justice systems experience the service response provided by ARROS PLACE?

Firstly, it describes the types of supports/responses provided by the practitioners in their work with the young people at ARROS PLACE based on the individual and group case file notes and practitioners' perspectives from their individual interviews. Secondly, it focuses specifically on young people's perceptions of practitioner responses to their needs based on their interviews.

#### 5.3.1 A relationship-based practice framework

The support and responses provided by ARROS PLACE practitioners were all underpinned by a relationship-based practice framework. This framework was informed by theories of harm-minimisation, anti-oppressive practice, strengths-based approaches and trauma-informed care:

...working at CLA and working with ARROS, I learnt so much about trauma-informed practise and how to respond to people and how to understand people's behaviour based on trauma experiences - insight into disability and knowledge about disability. I knew nothing before. And yes, trauma disability, I think I've learned so much from CLA, and relationship-based practise. I think that really is something that is valued so much in this organisation and is really fostered in workers. (Practitioner 2 – individual interview)

This excerpt indicates that practitioners felt that the organisational culture of ARROS PLACE and CLA more broadly, encouraged the adoption of a relationship-based approach to practice.



All of the practitioners described the organisational support for, and emphasis on, relationship-based practice. This involved meeting young people where they were at, walking alongside them with a non-judgmental attitude, and recognising their self-determination:

I mean, obviously harm management and risk management is a huge part of our work, but doing that in a way that is respectful of young people and their intelligence is super important. Just because you have an intellectual disability doesn't mean you don't know this is harmful. So if someone being like, "Oh, you don't care if I smoke?" I'm like, "Of course not. You know the risks. Yeah. You're making informed consent." "I have no issue with that. Do what you want." Yeah, I think that's part of my practice a lot. It's like, if you understand the risk, who am I to stop you? (Practitioner 2 – individual interview)

The above excerpt demonstrates harm-minimisation in practice and how the practitioner recognised the young persons' right to self-determination in decision-making and that this should not be diminished just because the young person had a cognitive disability. There was a recognition that young people with intellectual/cognitive disability, with appropriate support, have the intelligence to assess risk. The case file review also documented a harm-minimisation approach to practice. For example, practitioners documented that they encouraged young people to think through the potential consequences of risky actions. In doing so, practitioners also documented the need to continue building a "safe relationship" with the young people in order to continue to have these types of conversations about minimising risk.

In the individual case notes, a "safe relationship" was conceptualised by practitioners as more than just the relationship between the practitioner, individual young person, and the ARROS PLACE group. Practitioners recognised the importance of extending the reach of their relationship work to include other key stakeholders in a young person's life. The notes indicated that multiple practitioners collaborated from within ARROS PLACE and the broader CLA service. They engaged in group meetings which included multiple practitioners and the young person and sometimes outside stakeholders to address support needs. For example, when a young person's Department of Housing accommodation became unsafe, an ARROS PLACE practitioner, ARROS practitioner, the young person, the young person's partner and the Department of Housing officer met to discuss new accommodation options. This highlights the multitude of relationships that ARROS PLACE practitioners engaged in to support young people and to help build their network of support.

In building relationships with young people, practitioners respected young people's independence and acknowledged their resilience:

...just really remembering that I'm a worker in all of this. I'm not integral to a young person's life. The people we work with are incredibly resilient. They are not dependent on me at all. I'm just someone that's popped up in their lives and if they want something, have a chat, but I'm not here to save anyone. That's not where I'm at. (Practitioner 2 – individual interview)

Practitioners expected young people to test the boundaries of the relationship and prioritised maintaining the relationship:

...I love the work that I do and the work with the young people. That is never an issue. ...And I've had young people swear in my face and have bad days and all of those. I'm a human, I understand having a shit day. That absolutely makes sense to me. We have a relationship, we can rebuild. (Practitioner 2 – individual interview)

They also sought to understand young people within their ecological context and used a strengths-based approach to build not only their skills, but their self-esteem:

I think having that holistic kind of mindset with young people, trying to understand the whole picture of what's going on for them, and then drawing out some of their strengths or the strengths-based stuff, not just in terms of how to prepare a meal, but engaging in relationships and trying to sow some seeds of what I've noticed. So, providing lots of feedback or letting them know that, "Other young people have noticed this about you and that's really awesome." ...And then unconditional positive regard, so whatever's going on with the young people. Even if they've done something that maybe isn't great, maybe is against the law, but yeah, just not trying to focus on the negatives. (Practitioner 1 – individual interview)

This excerpt highlights the role of providing young people with feedback about their strengths and capacities. It also shows how unconditional positive regard was central to practice. This involved recognising the young people as human beings doing the best they could within a broader system that disadvantaged them:

...I think part of my personal values is this sense of humanness and that we're all human and that we all seek connection, and I think that that is - And I think non-judgmental comes into that as well. It doesn't matter who you are or what you've done, you're still a human being and human rights and social justice comes into all of that. And I think that's probably something that I just am, and through social work I'm coming to realise. And then in terms of what social work has taught me, I think uni, really relating to person-centred practice and being really critical of systems and critical of social work, understanding how systems disadvantage people, yeah, I think power and understanding power is a huge part of how I perceive my work (Practitioner 2 – individual interview).

This example demonstrates how practitioners drew on social work theory and values to frame their understandings of young people's experiences and their practice approach. This included seeking to minimise power differentials between themselves and the young people.

Nearly all of the practitioners reported that the values and the way they practiced were part of their underlying personal values and identity. Practitioners perceived their personal qualities further influenced how they formed effective relationships with the young people. They highlighted the importance of needing to be: "*fun, relaxed, very authentic and real*" (Practitioner 1 – individual interview), suggesting that young people would quickly recognise if they were not being authentic.

Overall, the data provided in this section highlight the importance of multiple spheres of influence on relationship-based practice: the organisational practice culture, social work theories, and the personal values, identity and qualities of each practitioner.

### 5.3.2 How ARROS PLACE practitioners provided individual support

The review of the individual case management files provided a comprehensive overview of the varied types of support provided by practitioners in their work with the young people at ARROS PLACE. What was evident throughout the individual case files and interview data was that the practitioners were responsive to the emerging needs of the young people and responded to crisis needs as they arose. As one practitioner described it, "*everyone's work is so different. It's driven by the needs of young people*" (Practitioner 2 – individual interview). The various types of interrelated supports provided and practitioner perceptions of their practice approach are described below.

**Proactive outreach:** All of the practitioners raised "proactive outreach" as being central to ARROS PLACE practice and a key ingredient for building relationships with the young people. They suggested that they were "*always checking in*" rather than just "*sit[ting] back and waiting for young people to come to*" them (Practitioner 1 – individual interview). In all the individual case files

reviewed, the practitioners participated in outreach to initially engage the young people. This occurred in a range of settings such as flexi school or while at traineeship and involved repeated visits. Practitioners documented activities such as this in the case notes using the term “proactive outreach”.

Practitioners reported that during outreach visits they engaged in “*gentle persistence*” (practitioner 2) and “*respectful persistence*” (practitioner 3). This practice involved slowly introducing themselves to a young person over a number of weeks by entering a safe space of the young person. The intention was to alleviate power differentials and demonstrate to the young person that they were invested in building a relationship with them and would exercise patience. One practitioner described her repeated visits to a young person’s flexi school:

We were very gentle. So, she went to a school that we have quite a good connection with. So the school was really happy with us, as workers, to come in and meet the young people there, which is always super positive because it’s like, “This is your space. You’re safe here, and I’m entering into your space.” And I think it alleviates a bit of a power dynamic and things like that. And just every week we went, I’d say hi to her, I’d wave and say, “Hey, how are you?” And she’d either walk away or she wouldn’t - And I remember, probably after like five or six weeks, I went up to her and I was just like, “Hey, do you reckon you want to have a chat today and we can talk about some of this work?” and she was like, “Oh, maybe. I’ll go have a smoke first.” I was like, “Go have a smoke. Cool. I’ll see you when you come back.” She was like, “Oh, you don’t mind if I smoke? And I was like, “Of course not.” It’s like gentle persistence, which, I mean, how many services do that? If you don’t want to be a part of this – And, I mean, also respecting her choice. If she didn’t actively want to be a part of it, I would’ve backed away. But yeah, just making sure that you’re setting yourself up with this presence of like, “I am committing to this.” Every week I’d be like, “Hey, not up to it? I’ll see you next week,” and setting this expectation that I’ll be here and I’m not going to leave. (Practitioner 2 – individual interview)

This example highlights the young-person centred practice that ARROS PLACE practitioners engaged in and how they perceived this approach differed from other service providers. It also demonstrates the practitioners’ commitment to building and maintaining the relationship with young people, as well as establishing relationships with other key stakeholders, like the school.

As part of proactive outreach practitioners also reported providing regular transport from outreach locations to the ARROS PLACE groups.

**Drop-in support:** The individual case files recorded that the young people dropped in at ARROS to engage with ARROS PLACE practitioners or to seek resources like food or loans or help with clothes washing. Practitioners documented that they made themselves available to address these immediate and fundamental needs of everyday living. This availability to young people may have also set the foundation for practitioners to respond to any crisis a young person was experiencing at the time of contact.

**Building skills:** In all cases the practitioners focused on building the skills of the young people. The young people all participated in the ARROS PLACE groups which provided life skills and advocacy and peer leadership skills. Practitioners recognised that young people's skills varied and were responsive to meeting each young person where they were at to develop their individual skills in the groups:

I know there are some young people where the idea of skill development could be more focused on the actual physical skills around chopping and preparing and making a meal. Whereas other young people, that's a skill they have, so it's more skills to do with social skills within the group and interacting with other young people. So, I guess the idea of skill development is super broad and specific to young people, acknowledging that everyone's different and there's not going to be like a one size. (Practitioner 3 – individual interview)

In the group practitioners were involved in helping young people identify their needs and how services could better support these, and encouraged young people to understand the systemic barriers they faced and to advocate for themselves and other young people with disabilities:

I think what we have really tried to focus on was just opening up space to talk about what kinds of issues young people are facing and what they're passionate about and what they're doing already. So, I think a lot of young people are already doing a bit of advocacy, but they just don't know it. So it was kind of trying to break that down a little bit and just simplify it and find out what people were already doing in their lives. So, one young person had taken it upon herself to go to the council and pick up one of those garbage bags and little picker-thing so that when she was coming to the groups she'd go around and she'd pick up rubbish and she'd talk to the group about why the environment was important to her. So we were kind of like, "That's advocacy. How are you doing that? And why is it important to you? And what other avenues could we, as a group, kind of take this to? (Practitioner 1 – individual interview)

This example demonstrates that some of the young people were in fact already engaging in advocacy and practitioners sought to draw attention to, and build on, these skills in the young people. Their focus was on what was most important to the young people.

***Building relationships:*** Practitioners engaged in relationship-based practice. They pro-actively sought to build a relationship with each young person and to maintain this connection. As one practitioner described:

We usually, and it's a process of getting to know the young person, of starting to build a relationship with the young person, of finding out what's important to them, about communicating with them (Practitioner 5 – individual interview).

As discussed above, the term “proactive engagement” was regularly noted in the case files and linked to the process of building trusting relationships with young people. Engagement with the young people was regular, in most cases almost daily and was captured over a twelve-month period in the notes reviewed. Multiple practitioners recorded notes on working with each young person. The practitioners documented providing advance warning if they were leaving their role and a new practitioner would be commencing with a young person.

Practitioners described building relationships as a long process that involved: being patient, not labelling the young people as ‘hard to engage’, and “walking alongside them” at their pace.

I don't think I've ever thought that a young person was sort of challenging or hard to engage with. I think it's more, again, that relationship building phase...it was about me then forming relationships with young people. So, I guess I've seen relationships forming over time. It's a super long process. (Practitioner 3 – individual interview)

Practitioners perceived that once young people were comfortable in the relationship they could raise their support needs with them:

I guess just being there, walking alongside them during that time, I'm reaching out, and then, I guess, young people feeling comfortable to raise whatever it is, whether it's something sort of more individual that they'd like to explore and want some support to do that. (Practitioner 3 – individual interview)

Practitioners recognised that building relationships and increasing connections involved multiple levels and supported the goal of building each young person's networks:

I think definitely relationship is really key. So, not only our relationship as workers with young people and with each other, but the young people's relationship to the other young people and their relationships with other people in their life, because it has such a huge impact on how they can relate to others, and [how] they can participate in the group (Practitioner 1 – individual interview).

Practitioners recognised how these broader relationships had the potential to impact on young people's capacity to participate in the groups and therefore sought to communicate with young people's families, where they were involved, and encouraged connections at multiple levels:

So, I had one young person, I would often go to her house and we'd have conversations with her nan and her pop, her uncle. On one occasion I took her up to [regional town] to visit with her mum and sister, because she would never get there on her own on the train, it was too hard. So little things like that to try and encourage that other connection with family. Another young person connecting in a lot with his boyfriend at the time, and he was coming to groups sometimes as well to support that young person to engage. All that kind of thing. Sometimes it was with their employers or their teachers. But yeah, often family and other friends in their life. Some young people had support workers from other organisations, so it was a bit of liaising with them and their support coordinators to figure out what we were doing and then supporting them to get to groups. And also, young people engaging in the group and then doing certain things with me, but bringing up other stuff that maybe sits outside my role or is something that I don't have capacity with, supporting them to kind of, "Who else, can we, in your network, go to about this, they can support you with?" There was a lot of that kind of stuff (Practitioner 1 – individual interview).

This example demonstrates how relationship-based practice involved collaboration with other service providers to ensure the young people were supported. Practitioners acknowledged that in some cases the young people already had other services involved and they liaised with these. Other times they did not, and the practitioners' role was to refer young people to external services and supports, for example NDIS. By connecting to and collaborating with other supports outside ARROS PLACE, practitioners sought to build longer-term resources for young people outside of the program.



Practitioners also identified social opportunities for the young people to participate in such as: ARROS PLACE groups; the Youth co-op and other ARROS events such as movie night and the DRC artwork event. It appears from the notes that young people participated in these opportunities. Practitioners also identified broader community events that the young people might be interested in engaging in, such as an LGBTIAQ+ advocacy event in the case of a young person who identified as such. Practitioners supported young people to build peer relationships with other young people in the ARROS PLACE groups and assisted them to negotiate conflict with peers and support their peers if they were dysregulated or experiencing a crisis.

**Providing emotional support:** Emotional support was provided to young people in all of the cases reviewed. This involved skills such as: listening to and acknowledging young people's worries and frustrations and empathising with these; helping young people to problem solve and consider the consequences of their actions; providing time-out from group and exploring de-escalation, emotional regulation skills and self-care strategies; as well as discussing topics such as healthy relationships and grief and loss. Trauma-informed practice was noted to be guiding practitioner understandings of young people's dysregulated behaviours and relationship issues and their responses to these:

Majority of young people we were supporting in that group had an experience of trauma and a lot of them had ongoing trauma. So, how does that impact their brain? How does that impact their relationships and their perception of the world - their hypersensitivity? So, knowing that some people are going to be 10 steps ahead, and just really, really sensitive to some things, or how they're presenting. You kind of get to know young people and how they're presenting in every sort of situation. So, just being really on top of what might be happening, what might be some strategies we can use (Practitioner 1 – individual interview).

This example demonstrates the attunement of the practitioners to each young person as an individual, including their history of trauma and how they may behave if triggered in the group. This knowledge then enabled them to sensitively support the young people at these times.

**Building resources:** In all of the individual case files reviewed the practitioners pro-actively sought to build the resources of the young people by assisting with finding employment and volunteering, offering CLA loans when requested, assisting with Centrelink applications and ongoing access to Centrelink and assisting with clearing SPER debt via the CLA partnership with SPER.

**Advocacy:** In all of the individual case files reviewed practitioners undertook advocacy tasks with or on behalf of the young person. The most commonly identified form of advocacy was attending meetings as a support person and using a disability and trauma-informed lens to advocate for the young person's needs. Advocacy involved arguing for the disability to be considered in relation to institutional responses to young people's behaviours. For example, practitioners were able to educate others about the young person's disability in one instance where a young person was being excluded from school and in another instance where a young person had ongoing involvement with the police and legal aid.

There were many services and systems where advocacy was warranted for young people. For example:

One of the young people I support had some issues with school, so I was going to meetings with him and supporting that, supporting people to get on DSP, writing support letters so people can get on NDIS. Yeah, sometimes it's housing stuff that comes up, relationship conflict. So much. (Practitioner 2 – individual interview)

This example demonstrates the diversity of areas in which young people required, and were provided with, advocacy support by ARROS PLACE practitioners.

**Stakeholder meetings and communication:** All of the reviewed case files identified that practitioners participated in stakeholder meetings and communication via phone and email about the young people. This involved both internal meetings where practitioners liaised with ARROS transition workers in support planning and dividing their responsibilities for the young person, and externally when practitioners attended meetings as a support person. Often times these meetings were attended alongside other CLA practitioners. Practitioners regularly wrote support letters to support applications for funding from various government departments. Practitioners liaised with other service providers, for example the flexi school to divide support responsibilities and make support plans that reflected the young person's goals. Practitioners reported they engaged in relationship-building with stakeholders and 'gentle' advocacy to encourage service providers to better serve the needs of the young people:

I think in relationship-based practise we talk a lot about the individual relationship with young people, but it's also maintaining these professional relationships where people may be making really shitty decisions that we disagree with, but they hold power over the young people. So, how can we facilitate this? How can we support them to better support young

people? ...And I think oftentimes, social work in disability is really undervalued, so we have to be really careful and gentle in providing a little bit of psychoeducation, but not wanting to harm anyone's ego. (Practitioner 2 – individual interview)

This gentle approach involved recognising the capacity for change in other professionals who supported young people and looking for opportunities to build collaboration and coordinated care around the young person.

There were many services that were communicated with including: the Department of Housing, employment services, Legal Aid and police. Practitioners also reported they were involved in educating other community stakeholders about general aspects of disability:

So, working in this space, I am constantly talking to other stakeholders. Today I went to a training and was meeting with other community members and just explaining how varied disability is and how it can impact people's lives. (Practitioner 2 – individual interview)

These examples demonstrate ARROS PLACE practitioners' awareness of the power that statutory providers had over the young people's access to resources. Recognising this, they deftly negotiated with these service providers, sought to strengthen relationships with them and to gently educate them about the impacts of disability. This was in the service of improving the holistic supports that were being provided to each young person to address their complex needs.

***Referral to other services and support navigating these services:*** In all case files reviewed, practitioners made referrals to other external services. Practitioners also coordinated appointments on young peoples' behalf and reminded young people of appointments via text. This tailored support to young people was in recognition of the complexity of young people's lives, and to assist young people who may have difficulties with memory and accessing transport. Practitioners also referred young people to other parts of the CLA service, for example to the community project team's youth co-op or to be on the CLA committee. These connections could help young people to feel a sense of belonging to the broader agency and to become further involved in the CLA community.

Practitioners acknowledged that sometimes referrals couldn't be made, or were not successfully taken up, due to inaccessible service models that differed from the relationship-based approach employed at ARROS PLACE:

And I think also, because ARROS and CLA work from a relationship-based practise perspective, which is quite different to other services, young people respond really well to that, or young people in this cohort respond quite well to that. So, referring out isn't necessarily an option. Or we try to refer out and that doesn't lift off because those organisations aren't able to be as flexible as we are (Practitioner 2 – individual interview).

Where referrals were possible, the most common were applications for DSP and NDIS. In their interviews practitioners acknowledged the access barriers for the young people which included: the intrusiveness of the assessment process, the cost of assessment; and the eligibility requirement that young people identify as having a disability. Practitioners reported they sought to overcome these barriers and obtain access for young people:

I supported a young person to get an assessment and it was \$2,500, and we had the funding to be able to pay for that. That's the advantage of having grant funding, is we can support people to get these assessments they otherwise couldn't get, to get onto [the] NDIS. ...we were having conversations with young people about NDIS and they were saying, "I don't identify as having a disability." ...I'm thinking specifically of a young man I work with who's 18 now. I only started working with him when he was 17, and his sense of self is completely destroyed by the idea of having a disability. For him, how he is interpreted by the world is so important. He needs to be big and strong and a caretaker. And there's so much stigma around disability and so much self-stigma and, "If I have a disability there's something wrong with me" (Practitioner 2 – individual interview).

In one case, the inflexibility of eligibility criteria for DSP meant a young person could not gain access due to her 'borderline' IQ score:

We had a young person whose IQ was 71, which means she's not eligible for DSP. Just one number. Yeah. And this young woman, she has a health condition, which her disability will progress over time. So she's just like: "I just have to wait until my IQ drops so I can be tested again" (Practitioner 2 – individual interview).

These examples demonstrate that even when ARROS PLACE support was in place and practitioners were identifying, referring and supporting the young people to obtain external supports, the systemic access barriers remained. In two cases, these eligibility barriers prevented young people from accessing needed resources such as an NDIS package and the DSP.

**Practical support:** The case file review highlighted the large amount of practical support that ARROS PLACE practitioners provided outside of the ARROS PLACE groups. Practical support took a number of forms (as previously mentioned) including: transport and support to attend appointments such as Centrelink and helping organise documents for applications to access services such as Centrelink and NDIS. Other practical supports provided were: food; help with clothes washing; other physical resources or financial loans; providing information about services and how to navigate them; reminders about ARROS PLACE groups and other appointments; and providing psychoeducation aimed at harm minimisation.

**Other support:** A variety of other support tasks were identified in the case management file review. These included: celebrating successes such as flexi school graduation in one case and special occasions such as birthdays:

So, whichever week someone had a birthday we would develop a little party or celebration, something they wanted to do. For one person it was going to KFC, for another young person it was having a rainbow party and a green party. So, just trying to make it fun. Yeah, so some young people had said to us, "I've never had a birthday party and I'm about to be 22. So, I now have a group of people who care and maybe want to be here for my party and maybe want to celebrate, so this is what I want to do" (Practitioner 1 – individual interview).

This example highlights how young person-centred the practitioners were in practice. It also demonstrates the connections the young people developed at ARROS PLACE and the opportunities they had to celebrate personal milestones such as birthdays. This was significant as in some cases they had never had this opportunity before. The young people's interviews confirmed the significance of this personalised approach in terms of fostering a sense of belonging.

Practitioners also documented supporting the participation of the young people in research such as the DRC. This research had a focus on making positive changes for young people with cognitive disability and offered young people an opportunity to make an indirect contribution to improving the lives of others with similar experiences.

### 5.3.3 Young people's experience of the ARROS PLACE service response to their individual needs

This section draws on the young people's interviews to discuss their perceptions of the ARROS PLACE practitioners' responses to their individual needs. The young people commented that practitioners were proactive in asking them about their needs, but they also felt they could approach the practitioners to ask for help with their individual needs. This indicates there was a

partnership between young people and practitioners, and this is consistent with how practitioners described the relationship in their interviews.

One young person commented on how the practitioners took on a 'guardian' role to help them make life-decisions and access needed support to improve their quality of life. They described a partnership where they felt confident to speak up about their needs:

Because these guys are like the middle man to basically be able to direct yourself to go left down death or right towards bettering yourself and getting a job and being able to settle down and learn how to interact with good people not bad people and trust right people... And these people are sort of like your guardians that you've never had. And you can rely on them, so you can feel confident to ask questions. You go, 'Hey, I'm struggling with more mental illness and things. Am I able to get more counselling?' (Alex).

This young person described how they had previously lacked a support system and perceived that the support ARROS PLACE offered enabled them to have a more positive sense of hope for their life moving forward, even though they had experienced trauma in the past:

You've got to realise, these [young] people, when they go home, they've got no one. Okay? They've got no one to go, "Oh, what do you reckon about this?" All these things that people take for granted. They don't have anyone to fact check, follow up or go, "What do you reckon? Oh, I'm really sick today. Are you able to drive me to the doctor?" All these little things. You know what I mean? And you add that onto trauma and that's a dark cloud over anyone. When you have a support worker who's like, "All right, I'm going to step in. I'm going to help you. You're going to see results," and they start seeing the results and it starts making their dark cloud disappear and where they're like, "Yes, shit. Everything's still kind of shit, but I'm moving away from it and learning to just accept it" (Alex).

These examples demonstrate the social isolation that these young people experienced when they transitioned from the statutory child protection and/or youth justice system and how meaningful it was to then get connected to support through ARROS PLACE – it was a lifeline for them that could facilitate hope in their lives.

All of the young people identified their need to learn life skills and valued learning these skills at ARROS PLACE:

I can't really read that much, so they help me with the reading and stuff and they help me with all my other stuff, like Centrelink and stuff. (Casey).

[Practitioner 1] has asked me if I wanted to go for my learners, like go for a learner's test or some. She was going to support me in that. And just cooking and just being around new people and sharing stories and, yeah, just learning something each time I come to ARROS [PLACE] (Bailey).

To basically, to have help getting out of the rut and being able to be shown how to do simple things. Be able to write support letters, write resumes, being able to cook a decent meal, shown how to do things quickly and easily that you didn't get shown in a system that's not individual. Being able to get linked and referred to psychiatry and counselling and things like that. Where you couldn't do that (Alex).

These quotes demonstrate the gaps in young people's life skills after transitioning from statutory child protection and/or youth justice systems. During this transition, the ARROS PLACE practitioners acted as guides to the young people. They referred them to external services where necessary. The young people perceived they may not have been able to access these services themselves due to systemic access barriers. Therefore, several of the young people commented on how they valued the advice and referrals that practitioners had made on their behalf:

With their knowledge of multiple connections, yeah. Yeah. We've got to realise that the only way you're going to sort of be able to better yourself is get help and find out...And support agencies are, for example, with ARROS PLACE, are the ones that are most connected to and can refer, which is really, really crucial (Alex).

There were specific types of help that young people valued. For example, the young people appreciated the help they received with emotional regulation which was a difficulty for some:

Because I have really bad anger issues and stuff, so I really can't deal with people...They teach me how to do stuff. Because if I don't know how to do something, I'm just sitting down and I don't know how to do it, I get really frustrated and then just storm out. (Casey)

The young people also perceived they were getting help with building relationships:

I think [practitioner]'s focused on making sure that even though I'm living by myself, that I get the interaction I need and stuff like that. (Darcy)



Having access to food and being able to take leftovers home from group was also acknowledged by the young people as meeting a fundamental need:

Then we can take all the leftovers home. So we make sure we eat. Do you see what I'm saying? It works really well. (Alex)

Overall, the young people perceived that they were receiving the help and support necessary to address their individual needs and they had all recommended ARROS PLACE to their friends because “[t]hey’re there whenever you probably need support” (Bailey) and “[i]t’s like they help you with literally anything” (Casey).

These examples illustrate the holistic support that was provided at ARROS PLACE to address young people’s needs. The flexibility and responsiveness of practitioners enabled young people to develop confidence, navigate resources and build trust in others.

## 5.4 ARROS PLACE in practice: The group process

In this section particular attention is paid to the group processes used and the extent which young people felt their needs were responded to during the groups. While there was not a specific research question about the group process itself, the data provided rich information about the process. This is important to explore as there is very limited literature on group work process with young people with cognitive disability.

In this section we first explore perceptions of the group’s purpose and how the focus of the group was negotiated with young people. We then turn to discuss how practitioners facilitated the engagement of young people in the group. The section concludes with an overview of the barriers to young people’s engagement in the groups.

### 5.4.1 Perceptions of the group purpose and the goals for the group

When asked about the purpose of the group the young people all referred to learning life skills that were transferrable to home. For example:

It’s cool to have new techniques in a place around ARROS [PLACE], because they show you great techniques. Like cooking, home skill. It’s a home skill. So it’s really good for them to make up an activity for two days a week for people to learn how to cook at home (Bailey).

One young person spoke more broadly about the group bridging the gap between childhood and adulthood when Child Safety contact had ended at age 18 during their transition to adulthood.

They perceived the group provided not only an opportunity to learn practical life skills, but also peer to peer connection and mentoring:

For example, with ARROS PLACE, what they do, okay, is where Child Safety failed to finish off, okay, is getting these people, these young ones, these youths, young adults, to a point where they're comfortably able to sort of step out, and they're ready, they're not thrown out. There's a difference. And with ARROS [PLACE], they do it in a way where we do cooking groups. You can actually learn about nutrition and be able to eat and come together as a socialisation. Okay? But that's not all. There's also, it's sort of encouraging each other to sort of uplift each other and to be more social, to not sort of isolate and get on drugs. Do you know what I'm saying? Or soothe, yep. Other things, for example, it is just knowing you have someone to speak to, where you can't call Child Safety anymore. (Alex)

This quote once again highlights the systemic barriers. In this case - that supports associated with being in OOHC ended at 18 when the young person was in the middle of their transition to adulthood and did not yet have the skills to live independently. This particular young person had not been supported to access NDIS at the time and had then become homeless. It was not until they engaged with ARROS and ARROS PLACE that they obtained NDIS supports.

Two other young people commented that they were at the group to meet new people. One of these young people, Bailey, was eager to meet others:

It's really cool. I like meeting new people. It's nice to know where people come, like where people are from, like if they've had bad times or what's up with them or whatever. It's good for them to come out and share stuff (Bailey).

In contrast to Bailey, the other young person, Casey, was more reluctant about meeting others, but recognised the importance of it:

Probably meeting new people... I don't really like meeting new people, but you still have to do it. Especially when you're in your life, you're going to meet new people' (Casey).

Despite their different motivations, both Bailey and Casey reported that they valued being in a group with peers who had similar lived experiences and sharing these during the group.

Practitioner perceptions of the group purpose aligned with those expressed by the young people – building skills and social connection and enabling peer-to-peer mentoring:

I think the main one was just social connection. Really wanting some friends, relationship, getting to know other people, getting out of the house I think was a big part of it, and I think as well learning new skills. So, not just cooking and sitting around a table together, but developing a bit of a recipe or looking up recipes, figuring out how to do that. Writing a shopping list, going grocery shopping. Having to budget and kind of thinking about what your budget is for that week, how much food can we afford, how many people do we have to feed, how is this going to spread, and then how do we divide up all the chores? So, there's six people wanting to cook, so who's going to do this, who's going to do that, and then how do we do this and how do we do that? So, they're all supporting each other with all of those little micro skills along the way that some of us would take for granted in cooking a meal (Practitioner 1 – individual interview).

There's still definitely peer mentorship within the group, it's just not, I think, as rigid as potentially it was planned to be with a peer mentor and then mentees. Instead, it sort of takes more the form of just young people in the group, within discussions. There have been two young people [who have] been having a discussion about things like drivers licences. And one young person [who] talks about, "This is how you can get your licence. This is you can do this, you can do this." So mentor, that sort of peer mentorship role in just discussions within the group rather than sort of a set up peer mentor (Practitioner 3 – individual interview).

These examples indicate the practitioners' flexibility to evolve the group's focus over time and how the group enabled broader skill development than was initially envisaged. Practitioners commented on how their facilitator role evolved over time from being more active initially to the young people eventually feeling a sense of ownership and taking the lead in discussions and mentoring. They perceived this was a positive outcome of the group:

...it started out a little rocky, but then got to a place where I felt like I could just step back. I didn't even have to facilitate the discussion, it was just happening, and it was really nice to see people who had talked about feeling isolated for so long or feeling alone... then coming into that space and then looking forward to seeing each other... So they were giving each other feedback. And it was just really, really nice to see that happening and to see them connecting outside of the group a little bit... then to have people come into the space and feeling really anxious and nervous, not really wanting to do anything, and then a couple of months later taking the lead (Practitioner 1 – individual interview).

This excerpt highlights the shift in the young person-practitioner and peer-to-peer relationships over time and the implications of this for the group dynamics. It also highlights how the group environment enabled young people to receive positive feedback about themselves from peers.

#### 5.4.1.1 Negotiating group agreements and the focus of the group

Practitioners worked collaboratively with each other and with the young people to develop an initial group agreement. They acknowledged it took time and individual work with the young people to develop and be put into practice:

So, in group work, you would always start with a group agreement. But for this group of young people, sitting together in a group is really, really difficult for half an hour. It's very difficult for them to sit down and for all of them to be able to participate in that process. So, being able to find creative ways to support staff to navigate that and to put in some group work processes. ...So, it's really important to have a group agreement. That's actually a foundation for a safe group environment, but actually, to get six young people to sit down and have a discussion, that kind of processing isn't going to work for everyone and won't allow everyone to contribute. So, in that example, it's about actually, "Okay, that doesn't work." It's about having gentle conversations over a three-week period with individual young people, "What do you want to get out of the group? What would be important? What's a no-go in the group? How do you show respect?". And then actually bringing that stuff back to the group and seeing if they agree on all the individuals' input. Because having the group discussion, it takes about two minutes for one or two of the young people to totally disengage because they're maybe not understanding what's going on, it's too overwhelming having five people try and talk about something serious like that. (Practitioner 4- individual interview).

This excerpt draws attention to the iterative and integrated nature of the individual and group work involved in the ARROS PLACE program. It indicates that individual work outside of the group environment is required to facilitate engagement in and safety during the group sessions.

In the focus group practitioners described the principles of the group agreement:

It's quite a simplified, like listening to young people's stories and simplifying it into some really core, like three core principles that are like: Safety. ...Respect. Teamwork. But within that you might have everyone participating, contributing in young people's language or being safe... There's practical stuff, but there's also emotional safety. But then there's also an agreement, if you struggle with any of these things, you go and talk to [Practitioners]. But there's an understanding built into that group agreement (Practitioner 4- focus group).

This quote highlights the collaborative and supportive emphasis within the group agreement. The young people perceived they collaborated and negotiated with the practitioners on an ongoing basis to determine the evolving group agreement and the focus of the group:

We've made a new group agreement. Well, we're in the process of making a new group agreement and stuff like that. We've outlined what skills that we're going to want to achieve by the end of the year. We've had a pretty good conversation about other stuff like, "If not cooking, what else can we do? What else are you guys interested in?" (Darcy)

The individual case file and group notes data, as well as the practitioner interview data also provided examples of the collaborative approach to negotiating the focus of the groups and identified when the workers had spoken to the young people about what they wanted:

So, we would kind of get to a space where we'd have a meal and we'd all be sitting down together and then we'd be thinking about, "Okay, what are we going to cook next week?" So kind of all kind of deciding and negotiating together and talking about what they like and what they don't like and being aware of each other, what they want and what they don't want, and trying to navigate all those different wants and needs and coming up with something that everyone's going to be happy with and having options. So, there was vegetarian options and gluten free options (Practitioner 1 – individual interview).

Whilst not captured in the group case notes, practitioners reported that they engaged in an ongoing reflective process to ensure the groups were adapting to the evolving needs of the young people. For example:

I'd have to say it's been a real process over 18 months trying to figure out how that's going to best work for this cohort. So, it's been based on reflection within the group and what's working for those young people and what's not, and try to adapt to that, to what their needs are. (Practitioner 4- Focus group)

These examples illustrate the willingness of the practitioners to: work collaboratively with each other and the young people; to engage in ongoing reflection; and practice flexibly in response to the dynamic needs of the young people.

## 5.4.2 Facilitating the engagement of young people in the group

Both the interviews with young people and practitioners identified factors that facilitated the engagement of the young people in ARROS PLACE groups. The main themes within the data were: relationship-building and proactive engagement; dual process of individual and group work; creating physical and felt safety; transport; adequate staffing; and individual practitioner qualities and skills. These themes are explored in more detail below.

### 5.4.2.1 Relationship-building and proactive engagement

Practitioners acknowledged that proactive engagement and relationship-building was needed initially to form connections with the young people:

The importance of building that relationship with young people. I think without workers proactively reaching out to young people and building that connection. So that's probably the individual part of it (Practitioner 2- Focus group).

This involved proactive outreach with each young person prior to the group to understand their individual needs:

Before we started the groups we had made space to have some individual outreaches with each young person who was interested in the group, so we could kind of understand what they might need in that space. But it's really only through developing relationship that you get that stuff. ...We can't sit down with a young person who wants to come to the group and say, "What's your trauma?" (Practitioner 1 – individual interview).

Interviews with the young people confirmed the proactive approach of practitioners made them feel welcome at ARROS PLACE and encouraged them to engage:

I feel like ARROS is a place where everyone's welcome, like everyone's one. So I feel comfortable coming here. I feel like I'm invited and – Yeah. There's no negative here... Just welcoming me, like asking me if I want to join something. If it was tomorrow, next week, I'd get an invite or they would ask me if I want to go (Bailey).

They commented on the positive relationships they had formed with the practitioners, suggesting that they are *"kind of like teachers at one stage and then you can still have a good laugh with them, so you're kind of like friends"* (Casey).

There were certain features of the relationship that were valued by young people – that the practitioners got to know them individually, were committed to their role, cared about them and treated them equitably. For example:

They made us Christmas cards with their photo in them, all in Christmas attire, and they wrote letters. They wrote little blurbs specific to each of us. So, it's not just, "Hi, Merry Christmas. Thank you for being a cool young person. See you after the holidays." No, there were beautiful, tailored little messages in there and it was lovely. It was awesome. I very much appreciated that, that they definitely take what they do very seriously and with a lot of heart with what they do. (Darcy)

Practitioners also acknowledged that they prioritised the relationship. They also sought to engage the young people by being creative and making the group fun:

I don't think you can have a group, especially for young people without the fun... it needed to be fun so they would keep coming back. So, I think just trying to make the space really fun and engaging for everybody (Practitioner 1 – individual interview).

Young people also valued that the practitioners set up a routine and were fair in distributing tasks during the group sessions:

When we get here we pretty much assign tasks to each of us. And it works really well because we're spreading the workload. No one's given everything. And we always clean, like split the dishes. So there's not like the cook never cleans. No. It's really fair. And we always write down and then we cross it off. So it's a routine (Alex).

#### **5.4.2.2 Dual process of individual and group work**

Ongoing engagement in the group was facilitated by a dual process of individual and group work:

We've been having conversations around how to really enable the group work to happen. Lots of those conversations around expectations, safety within the group, that kind of thing actually happen on an individual basis outside of the group. ...It's very difficult to process that kind of thing within group space. So it's almost like there's this continuum, don't know if that's the right word I'm looking for, from individual to group, where it actually takes both processes to enable the group to happen. ... Some of those normal group processes around, say, group agreements, a lot of that stuff needs to be processed individually and then taken to the group space to enable young people to engage in it (Practitioner 4 – focus group).



One young person acknowledged this dual process when they commented about how the group simultaneously addressed individual and collective needs:

A contribution of everyone coming together to uplift each other and individualise each person's direction. Everyone's different. But these groups are basically great because it's everything, everyone's included, but you're individual (Alex).

The data suggests practitioners had a deep understanding of the young people, the impact of trauma and their disabilities. They were attuned to their needs to ensure young people were being 'met where they were at'. Their response involved 'slow developmental work' both individually and in the groups and creative thinking:

And I think there's a real challenge where young people have - I think nearly all of the young people in ARROS PLACE have pretty significant trauma, which impacts on their ability to self-regulate, as we were talking about, and in a group space that can look really different to other group work, and there are challenges that come with that. So being able to find creative ways to respond (Practitioner 4 – individual interview).

I think definitely the long term, slow developmental kind of stuff, knowing where people are at... So while on the outside it might seem like everything's fine for them, it's not fine, so what's going on? And they're not trying to unpack that in the group, but, as I said, during that individual stuff so they're not bringing all of that into a group and maybe triggering each other. So, it was a lot of that kind of slow developmental work outside and inside the group. (Practitioner 1 – individual interview)

When needed, practitioners worked individually with young people to ensure young people understood the intentions behind practitioner's actions in the group. The goal of this individual work was enabling young people to remain engaged in the group. A practitioner described this process:

... one of the challenges that have come up is where a young person identifies as being autistic... Group, for her, there's a very set expectation around there are group rules ...So, if we had these conversations as a group, there's some really different experiences with group agreements... So, even having the conversation, the very process itself could be distressing for that young person. So, having workers have those individual conversations is really helpful to process how they feel about how the group works and to use language that fits for them so that there's an awareness of how they're going to process that in a group space. (Practitioner 4- focus group)

This quote highlights how the unique needs of the young person were addressed with an individualised approach from the practitioner.

While young people were being supported individually, the other practitioner often used the time as an opportunity to teach the other young people how they could support their peers when they were dysregulated:

They know what's happening, they know if someone's upset, and they're worried and they want to go and respond, but maybe that's not useful. So, trying to support people to build a bit of understanding about how to support someone when they're upset or support someone when they're angry or give people space and not take things personally (Practitioner 1 – individual interview).

In the focus group the practitioners acknowledged the skills the young people had developed in negotiating group contexts with peers and managing their emotional regulation:

The group started as like a life skills, not started, but a lot of it's based on life skills, and part of that is about being able to be in a space with other people that aren't your best mates, but you're going to have differences with, and how do you hold that? How do you move through that in a way that doesn't erupt into conflict? Which for some of the young people we work with, that's their experience in life, is how do you deal with stuff. You might yell or avoid or whatever that particular young person's strategy is (Practitioner 4 – focus group).

Practitioners commented that the individual work provided the space and processing time that young people needed in order to re-engage in the group context. It also provided practitioners with insight into the individual's needs - this then enabled them to remain responsive to these when that young person re-entered the group dynamic. To remain responsive required a lot of skill on the part of practitioners. For example:

I think it's helpful because the conversation's already been raised, so young people have time to actually think about it and process it in what their thoughts are around it, to be able to then bring it into the group. I think it also means we have an idea of what young people's thoughts are on it, so we can hold those when talking about it in a group setting (Practitioner 3 – focus group).

Data from the young people's interviews supported the utility of the dual process and how this could facilitate a safe space for participating in groups:

So if one of us is upset or had a bit of an incident or maybe if we've rocked up to ARROS PLACE upset, they'll always check on you or let you know that, "We're here. We're happy to talk to you." Even if you might have to miss the first bit or if you want to do something at the end or whatever else, there's always little spots that are available for - I don't smoke, but the others do, so there's little spaces, just smoke breaks, breathers, having a drink, just sit down and cooling down (Darcy).

The flexible approach to the group was acknowledged by the young people as helpful and different to previous statutory organisations:

They're willing to be more flexible than any other organisation because they're willing to try and step out of their comfort zone to try things, trial and error. Where other agencies are just clear cut, straight down line, follow legislation... You can still bend it and still be on the book. You know what I mean? Yeah, you're not breaking the rules if you just do it a little bit more individually (Alex).

From the practitioner perspective the intention of adopting this dual process was also about creating safety for the young people.

#### **5.4.2.3 Creating safety and managing risk**

The practitioner and young person data highlighted the ways in which the practitioners sought to create both physical and felt safety for the young people during the group sessions. They acknowledged the diversity of the young people in the group, the need to remain young person-centred when implementing strategies to manage risk.

Practitioners recognised the potential for conflict between group members and were proactive in safety planning for this:

And every young person has a very different personality, a very different approach and perspective of the world. So, bringing all of those together, sometimes was really positive and really great and a lot of fun, but sometimes it was actually really triggering for other young people. So, we just had to be really mindful of what was going on for people, what they might be bringing into the space, who else was there. So, kind of proactive safety planning and exit strategies for people if something went wrong (Practitioner 1 – individual interview).

Practitioners also acknowledged the potential for young people to feel shame about certain behaviours due to past trauma. Using a trauma-informed approach they worked with young people individually to attempt to ensure that they did not feel shame in the group:

...a lot of responding to conflict is finding ways that are trauma-informed and supportive for young people and really trying to alleviate shame. Because I think that's a huge experience for them of previous groups, is being shamed for their behaviours. So yeah, I think in that example that [Practitioner 4] was giving, it was hearing what that young person, what their experience was, and then responding to it individually by going and speaking to the other young people individually, rather than coming back into a group and all being like, "Let's talk about this," because that can feel really blamey and shameful for some young people... I think trying to hold those conversations in a group space, or this cohort, potentially ends up with their voices not being heard because it's not a safe space for them (Practitioner 2 – focus group).

This example highlights how practitioners perceived their approach differed from previous organisations. At ARROS PLACE the priority was being young person centred and ensuring the young people could remain engaged.

A young person confirmed how they appreciated practitioners flexible and collaborative approach to managing their trauma-related behaviour in the group. They remarked on the practitioners' commitment to maintaining the relationship and connection, rather than having a rigid adherence to rules and consequences:

Like yesterday I got a little bit upset, so I run off to the swings just to go breathe, try and rekindle my childhood that I've lost and just gone on the swing, and [Practitioner3] comes up and she goes, "You okay?" I'm just like, "Yeah." So she jumped on the swing next me, even though it was a baby seat... She would sit there and if I wanted to talk she'd listen. There's no forced conversations unless you, not unless, but if you maybe don't uphold [the knife] agreement or an incident happened or was close to happening, it's not to a point – You're just pulled aside for a little conversation about, "Hey, what was that? Are you okay? We know that we shouldn't do that, whatever else. And it's to the point where we could pick our own consequence or anything like that. For example, it's like, "Okay, so what do you think we should do about this?" There's no, "You're banned from ARROS [PLACE] for two weeks." No. And so it's not like things happen and then they force stop your connections with ARROS [PLACE]. (Darcy).

Managing this dual process was not without challenge for the practitioners who had to maintain boundaries and the safety of all group members:

So, there'd be a lot going on outside of that, and then they would come to the group and just have to tell me or update me about this stuff while there's other young people around, which maybe wasn't appropriate. Or maybe whatever that was going on, they'd come into the group really escalated and wanting one-on-one support, but knowing that there's only one worker and there's seven people in the group, then there's two people fighting and there's one with a knife...so that was quite a lot to manage. Yeah, so we just had to be careful about that. And I think that's why I was always open to responding outside of the group to those things so that they had space to talk about that, process it, make a plan, before then coming to the group. We could say, "Actually we had that conversation. Remember this. Let's try and focus (Practitioner 1 – individual interview).

Practitioners managed safety issues by working individually with the young people and by drawing upon extra staff members such as the team leader. This enabled the key worker relationships with the young people to remain in-tact:

[team leader] know[s] all the young people that attend ARROS PLACE and [team leader] will go to some of the groups and support the workers in facilitating those groups. Sometimes [team leader] step in...the ARROS [PLACE] workers will use [team leader] as someone that's a bit removed, and they talk about that team leader role as holding a bit of authority so they can use me to maybe set some boundaries that might need to be a bit firmer. So, say when something's happened, that needs to be directly addressed, it preserves the workers relationships with young people if they get [team leader] to step in and do that. (Practitioner 4 – individual interview).

Practitioners also created safety by being responsive to resolving conflict between group members to ensure the group dynamic remained stable. This involved changing the format of the group, which was also a response to COVID:

It's more just like trying to do it in a timely manner before the next group, because we're trying to ensure young people's safety and that these issues will be resolved. And I think really, part of the response is strategically responding to complex relationships. So, since COVID, we had to make some practical choices... and now we kind of operate in two smaller groups and there are some relationships that we are aware can create conflict, so we try and mitigate that by just keeping those young people separate. Just alleviating. I guess that's harm minimisation in the context of emotional safety (Practitioner 2- Focus group).

The practitioners described 'sitting with risk' and using this as an opportunity to engage the young people. They reported that the young people engaged in boundary testing by talking about risk. The practitioners recognised that they were not actually at risk and what was beneath it was the young person testing the trust in the relationship. Practitioners ensured that their responses built trust, and created safety by emphasising the dependability of the relationship:

A lot of times in these conversations about having an agreement or group rules, young people are really seeking this, "But would I be kicked out? If I do this, will I be kicked out? Will I be excluded?" and really wanting to know where the line is for us, which is really, really challenging. Because ultimately, we don't want to have a line where we say, "If you do this, you will be excluded," because that defeats the whole purpose of this group. We're trying to create a space where young people can engage in a group context where they won't be faced with that sort of penalty (Practitioner 2 – focus group).

A young person confirmed how this responsive approach had made them feel safe to return to groups knowing that the practitioners were committed to maintaining their relationship:

We all have our moments. ARROS [PLACE] workers here hold no grudges. And if they do, it's definitely not visible because they show up and they give you the same enthusiasm that they do every time you see them. So, it's lovely. (Darcy)

In these boundary-testing conversations practitioners 'sat with risk' in the group and used it as an opportunity to educate young people about risk-taking behaviour. It also enabled opportunities for peer-to-peer mentoring to occur and identified where further individual work with a young person was needed:

...how the workers facilitate the group in a way that sits with risk...So, there will be expressions of substance use, smoking within the group, not inside, but leaving the room to have a cigarette, or talking about rolling people or stealing cars and that kind of thing. And I think this idea of sitting with risk, yes, it's harm minimisation having these conversations, but often there's risk stuff happening in young people's lives that gets brought into the group space and workers needing to sit with that risk. I think in other groups, young people have experiences of where they may have been banned from the group for a period of time. Things like that shouldn't be talked about in the group space. But acknowledging that actually this is part of these young people's lives, they're going to talk about it in the group setting and it's really useful for them to be talking about it, because then they can get that feedback from workers and having conversations with peers in a safe space where they're going to get role modelling and open up conversations to understand what's behind that, like the talk about rolling people or whatever it might be, substance use, and then opens up opportunities for individual work around some of the risk stuff that's happening for those young people (Practitioner 4 – focus group).

The practitioners used risk as an opportunity to challenge young people to think about the consequences of engaging in these risky behaviours outside of the group context such as justice consequences. They did this informally during breaks and focused on maintaining the relationship during these conversations. For example:

...trying to build their awareness of, what is it going to be like to have cops like harassing you, or what might be the justice consequences as well, but in a very relational kind of a way, and really waiting for those opportunities where they're ready. That particular opportunity was we were standing outside and they were having a cigarette (Practitioner 4 – focus group).

#### 5.4.2.4 Transport

Transport was identified as playing a key role in facilitating the engagement of young people. As well as its practical benefit of enabling young people to physically get to the group, the time in transit was also used to build connection and provide space for debriefs.

Practitioners used their knowledge of the given risk at any time to be strategic about which young people they paired together to transport home. They were also flexible about providing one-on-one transport where it was needed. They then used the time to de-brief the young person about incidents that had happened in the group or to address individual needs that had been raised in group breaks:



That transporting space is often an opportunity. That's the opportunity to debrief what's come up in the group. So, I think when you're talking about what do you do to promote safety, there are conversations, that it's negotiated with young people around how they'll get transported home. So, we'll pair up two young people that feel safe and comfortable to be in the car together and enable conversations between themselves and the worker. There are some people that will transport individually because we know they need individual space to either get ready for the group and to come into the group space or to debrief afterwards. So, that's actually a really active process that you both do. (Practitioner 4- focus group)

And I think being flexible with that as well, that if we've noticed during group, like if two people were transported in together, but something's happened at group, being able to acknowledge that and then split them off so they can have individual conversations with workers on the way home. Throughout the group, which actually since this case note, something that [practitioner 4] and I are really good at doing, is being able to have these like really micro check-ins during the group to respond to different people's needs and things like transport, or if a young person's having a smoke and I go to check-in with them and then we end up having a conversation about mental health and suicidality being like, "Hey, I actually think I need to just take this person home one-on-one," or something like that. (Practitioner 2- focus group)

A young person also acknowledged how transport provided an opportunity for practitioners to be responsive to her individual needs. She perceived practitioners sensitively engaged the young people during transport:

For example, let's say Person 1 needed to have a chat with one of the workers at the end of yesterday, so we made it a way that someone, because that said person was someone I usually get driven home with, they go first and then I do. But I think [young person] may have been experiencing something or needing to talk with someone so they made it a way that everyone still got home, but we just switched around the chairs a little bit so that person got to have a one-on-one talk with this worker. And it was really nice. (Darcy)

These quotes demonstrate how transport enabled practitioners to engage in relationship-based practice, but also further opportunities for the young people to build relationships with each other. On a practical level, both practitioners and the young people acknowledged that transport enabled

the young people to attend the groups and to safely return home or to the community after the group.

#### 5.4.2.5 Adequate staffing

Adequate staffing was another factor that enabled practitioners to be responsive to individual needs within the group environment. Having multiple staff enabled one practitioner to be able to step out of the group to respond individually to young person while the group could continue running:

Which I think is something that we've tried to build into like how we run the groups is, I guess maybe it's around a risk assessment that we've done, is ensuring that there's enough workers to be able to respond. So, usually we have a student involved so that there's able to be two workers, or a worker and a student, in the space facilitating the group. And if someone does escalate or just needs to remove themselves from the space, which young people are really, really great at doing and have identified that they're struggling for whatever reason, that's usually supported for them. But there's capacity for a worker to step out and process that with them in that moment. (Practitioner 2 – focus group)

Having multiple practitioners facilitating the group had another impact - the young people perceived they had developed relationships with more than one practitioner and could ask for help from any of these. Young people also reported that if their key worker was away that they tried to ensure someone was available to help in their absence:

Even when [Practitioner 1] was away or something like that, or if it's not a day that [Practitioner 1]'s in, [Practitioner 2] will come over maybe with a meal or two, or something like that' (Darcy).

The review of individual case notes also confirmed this practice. Entries were noted in which the practitioners advised young people when they would be away or have limited capacity and who they could contact for support instead.

#### 5.4.2.6 Individual practitioner qualities and skills

Another facilitator identified by the young people was the personalities and qualities of the practitioners. For one young person, the commitment, enthusiasm and compassion and understanding offered by practitioners appeared to be the most important facilitator for their engagement:

She's so lovely. Absolutely. No, she went above and beyond on for absolutely - Actually, every task that she was set, she'd find all the recipes and stuff like that, she'd make sure if there's any jobs that no one wanted to do or - She's so lovely. She'd be willing to cut onions for us. (Darcy)

The responsiveness of practitioners to young peoples' evolving needs and wishes was also valued by the young people:

They just pick us up and then they already have all the groceries. But yeah. But if I probably asked them, they'll probably take me with them to pick out the groceries. (Casey)

This section has demonstrated the range of factors that facilitated the engagement of the young people in the groups and the resources that were needed to support the group functioning. It has provided compelling evidence that relationship-based approaches are possible in a group context.

### 5.4.3 Barriers to the engagement of young people in the group

Data from interviews with the young people and the practitioners identified barriers to the engagement of the young people in ARROS PLACE groups. Two particular barriers to engagement were noted by the young people. One young person commented on how the group sizes had decreased during COVID and how this impacted their opportunities for peer socialisation, which was one of their goals for participating in the group. In contrast, another young person expressed some difficulties being with peers in a group:

It's like when everyone else knows each other and you're just like, "Oh, hi." And then, I don't know, if you do something or say something that they don't like, and everyone else already knows about it, you very much feel like an outlier. (Darcy)

These examples highlight the diversity of needs and experiences of the young people.

One young person expressed concern about how staff members addressed knife safety in the group and reported this made them feel unsafe:

Especially with the knife safety stuff... They're just like, 'Oh, we'll have a talk to you. No assurance that you're not going to do again, but okay. Bye. Continue.' Unfortunately, no one's ever learnt like that. Not saying we're calling for anything severe or major, never, but no one's ever learnt like that. But it's to the point where you have to think about your other young people that are in there at the same time. So, it's not to say nothing's been done. It's just making sure that even the other young people [who] have to be in there with them are feeling safe as well. (Darcy)

This suggests that for this young person, more could have been done by practitioners to reassure them about safety. While this young person expressed these concerns in their interview, overall, they were positive about their experience of the group and reported that they wanted to continue participating in it.

Other barriers to participation that were noted by practitioners included the memory difficulties of young people and transport. As previously mentioned, a review of the case files indicates that practitioners sought to overcome these barriers by sending reminder texts to the young people and offering to transport them to and from the groups.

Adequate staffing was another barrier reported by the practitioners. It was acknowledged that the group required the knowledge of the two key ARROS PLACE group facilitators and there was a perception that the group could not be facilitated if they were absent:

Yeah. Well, I guess it comes into if [practitioner] and [practitioner] are unable to do the group, we won't have it in person, just acknowledging that - that having two people, like one project worker and then two people [who] aren't familiar with the group space. We've seen it not play out fantastically in the past as well. (Practitioner 3- focus group)

The group case notes provided descriptive accounts of the sessions, but often did not report on goals, intentions, and decision-making. This kind of detail would assist if other practitioners needed to step in as facilitators. Practitioners also perceived that the group should be facilitated by experienced staff, and not solely by a social work student at times when they stepped out to provide individual support. This was in order to ensure the safety of the staff and the young people who were participating:

So, some of it's about having a third facilitator as a social work student. So, acknowledging that being left facilitating a group when the two workers, that sometimes that can be too much to expect for the social work student to hold, and for their safety and the young people's safety. (Practitioner 4 -focus group)

One practitioner acknowledged the intensity of the support needs of one young person in crisis and how she perceived it was difficult to maintain boundaries of group support versus individual support:

I think a big challenge for me was within the groups when there was conflict between young people. I found that really challenging to try and work through that with them in a safe way. Often it was challenging when young people had crisis going on. I had one young person reaching out to me daily, wanting a lot of support, needing support to get to court. Their NDIS supports were very rigid. So, their other worker was only available on this day, in this one hour period, which didn't really fit for his needs. And so, because I was a bit more flexible, I was able to respond a little bit more. And because we had worked in the previous project together, we had kind of developed good rapport, good relationship. But I felt like it was really hard to maintain boundaries with some young people when there's such big need and there's such crisis going on. I think I found it really hard to kind of maintain that boundary, but also knowing they're not going to feel safe in the group and they're not going to come to the group if they're not supported to get this stuff taken care of. So, it's a lot of liaising with their other supports to try and figure that out, but also just having to respond sometimes. (Practitioner 1 – individual interview).

This example highlights the complexity of the needs of the young people and that even once they had regular support through ARROS PLACE crises still arose and impacted their participation in the group. The intensity of needs during these crisis points was difficult to manage, even for skilled practitioners. Ensuring practitioners obtain regular supervision is one way the organisation sought to manage these tensions and to support practitioners:

Because they do one on one work obviously, and also the group work, they [key ARROS PLACE practitioners] both have individual supervision and they'll raise any concerns, celebrations, things they're struggling with in individual supervision. We also have a group meeting (Practitioner 4 – individual interview).

It was evident from the case file review that group meetings provided a space for reflection and opportunity for advice and collaboration from other practitioners.

Overall, ARROS PLACE practitioners were flexible, creative and reflective in their approach to engaging the young people. Perceptions of the outcomes of participation in ARROS PLACE provide evidence that this was effective.

## 5.5 Perceptions of the outcomes of participating in the ARROS PLACE program

All four young people spoke positively about their participation in ARROS PLACE. They reported that there were no improvements that could be made to the program and they wanted the program to continue:

I adore the service and all the program. It's great...The program's closing down at the end of the year, and I just hope that mightn't happen. Things have to end, all good things come to an end, but I hope the successes of this group might inspire something else or another program for other young people. (Darcy)

The young people perceived that they had contributed positively to the group and this appeared to be a source of self-esteem for them. For example, Bailey felt that their personal qualities enhanced the group:

They like me. I don't know. I make everyone laugh and they like me being in this group because I just make everyone the other way, like I just make everyone all bubbly and stuff. (Bailey)

In contrast, Alex drew self-confidence from feeling like they had played a role in creative thinking about and shaping the direction of the group:

I'm sort of helping implement the groups...I sort of think out of the box and go, "What else can we do that's still reasonable, that works, that we're allowed to?" (Alex)

The young people also expressed a desire to use what they had learnt to support their peers through becoming involved in peer mentorship and advocacy:

So that's why I'm sort of going in to do peer mentorship next year, to sort of be in between [Practitioner 1] and ARROS and the group, because I'm sort of stepping back. But also, I want to be doing advocacy eventually. (Alex)

Overall, the young people expressed a sense of personal achievement at the progress they had made with the guidance of ARROS PLACE practitioners. They acknowledged how their quality of life had improved:

And it's helped me a lot. [Practitioners 1, 2, and 3] have helped me so much....I feel like a different person...So before I met the three of them I just didn't know where I was at. I felt lost and I felt stressed because I didn't know what I was going to do if I needed help getting somewhere. Or if I needed support in anything, I didn't have it at the time. But because I have [Practitioners 1, 2, and 3] , they've given me so much support... And I just feel more on top of everything now, since I've gotten support. (Bailey)

My original worker, who's no longer here, I was very lucky. She was great. She's like, "All right, this is what we need to do. We need to get your mental health sorted, we need to get you on the DSP so you have more money, and we need to help you get yourself healthy and fit and into supported work." And that's what we did. For example, with [Practitioner 1] and things like that, a lot of the same things, but once a door closes on a goal and you've done it, you feel like you're going to ... And then when you do that in an individual sense, you're more likely to see the progress because they're now more motivated because you gave them that time, but they're seeing results. And they feel like they're slightly uplifted because they're not completely doing it on their own, but they're shown how to do it. But they're still doing it. That's what's needed. It's just guidance, general guidance. (Alex)

These examples demonstrate a stark contrast in the young people's perceptions of their lives prior to, and then after, receiving support from ARROS PLACE. Specifically, the young people perceived they were now more connected to stable supports to address their needs. More than this, the young people's perceptions of themselves had changed. The way ARROS PLACE practitioners supported them through collaborative partnership led them to feel more positive about themselves.

This increased confidence produced another positive outcome - the young people provided support to each other based on their lived experience:



I think as well, in the group, once people started to feel safe and started to kind of get to know each other a little bit, then I felt like they were going to each other for things rather than to us. So, for some people, for example, one young person had transitioned to the NDIS a couple of years earlier, had a bit of insight and understanding of how that system worked, and another young person in the group had just started exploring applying for the NDIS. And so their conversations were really, really, really helpful and really powerful for that young person to then go forward and go through the planning process because another young person had been there and been through it... So, it was just so much more powerful than a worker explaining it. (Practitioner 1 – individual interview)

Peer-to-peer support provided two-way benefits – young people received advice based on the lived experience of others and experienced increased self-esteem themselves when they shared advice:

So, he was able to speak to that and speak to the impact that it had on his life and the positives that he'd gotten out of it. So, it was really helpful for the other young person to then think, "Okay, it's worth going through this process." And it was helpful for the other young person to think, "My experience is benefiting others. I'm supporting her and she's really getting a lot out of this. (Practitioner 1 – individual interview)

Practitioners also took pride in the fact that they began receiving referrals via the young people from the group. They perceived that this was an indicator that the young participants valued the support they had been receiving in the group:

Recently, a young woman that comes to the groups asked if she could bring a friend, and we always welcome for them to bring supporters into the space. And the intention of doing that was that she saw that this friend of hers needed support and brought her and asked if she could self-refer to be a part of this as well, because she, yeah, needed support. And I was like, wow, how lucky are we to be in this position where a young person says, "Yes, this is something that's really helped me. How can I get it to help my friend?" Like how many programs get referrals like that? (Practitioner 2 – individual interview)

Overall, both young people and practitioners felt that the ARROS PLACE program had created positive changes for young people via connection with others, the development of skills and self-confidence.

## 6. DISCUSSION

This research has examined the needs of young people with cognitive disability who are transitioning from statutory child protection and/or youth justice systems and the responses of ARROS PLACE to addressing these needs. This section brings together all the learnings from this research in relation to: the needs of the young people; how a relationship-based practice framework was enacted to engage the young people and respond to their needs; and finally how the group work process also facilitated engagement.

### 6.1 The needs of young people with cognitive disability transitioning from statutory child protection and/or youth justice systems

There is very little extant literature on the specific needs of young people with cognitive disability transitioning from statutory child protection and/or youth justice systems (Macdonald et al, 2016). Hence, this research sought to answer the question:

- what are the support needs of young people with cognitive disability who are exiting statutory child protection and/or youth justice systems from the perspective of young people themselves and the ARROS PLACE practitioners who support them?

The findings demonstrated that young people's needs were varied, complex and dynamic and at times crisis-driven. Needs included those in relation to: personal relationships; identity and culture; mental health; physical health; disability; accommodation; income; legal; navigating services; life skills; education and employment; fundamental needs of everyday living and other needs. The young people expressed goals for their life consistent with their stage of life: they wanted to learn how to cook, to obtain their licence and find employment. They acknowledged that they needed guidance to navigate service systems and obtain supports such as the DSP and NDIS. They wanted ARROS PLACE practitioners to 'bridge the gap' during their transitions from statutory child protection and/or youth justice systems and emerging adulthood.

The findings of this research echo earlier findings by Macdonald (2010) and Macdonald et al (2016) into the diverse and unmet needs and experiences of young adults with mild or borderline intellectual disability exiting care. In Macdonald (2010) young adults reported a range of poor life outcomes since exiting care, including: homelessness, child protection intervention, early parenthood, were victims of crime such as sexual abuse or involved in crime themselves, had contact with mental health services, engaged in substance use and were unemployed. In

Macdonald et al (2016) young adults reported unmet needs in relation to daily living tasks, lack of meaningful activity or employment and ongoing psychological and emotional needs related to early experiences of abuse. Considering the complexity and number of unmet needs identified in this previous work by Macdonald (2010) and Macdonald et al (2016) this study also focused on developing an understanding of the responses to these needs by practitioners from ARROS PLACE. It sought to answer the following research questions:

- How do practitioners involved in the delivery of ARROS PLACE respond to the needs of young people with cognitive disability who are exiting statutory child protection and/or youth justice systems?
- How do young people with cognitive disability who are exiting statutory child protection and/or youth justice systems experience the service response provided by ARROS PLACE?

The findings of this report demonstrate the necessity for a specialist service like ARROS PLACE to support young people with cognitive disability who are transitioning from child protection and/or youth justice systems. The young people who participated in the study had complex and dynamic needs, which had not been adequately addressed via their prior relationship with the statutory child protection authority, often referred to as the Department of Child Safety. The findings demonstrate that ARROS PLACE practitioners were able to effectively and respectfully engage young people who are often disengaged from other networks of support to produce positive outcomes for these young people. ARROS PLACE practitioners provided a range of supports including: outreach; drop-in support; building skills; building relationships; building resources; providing emotional support; advocacy; stakeholder meetings and communication; referral to other services and support navigating these services and other support. ARROS' guiding relationship-based practice framework facilitated the engagement of the young people both individually and in the group work of ARROS PLACE.

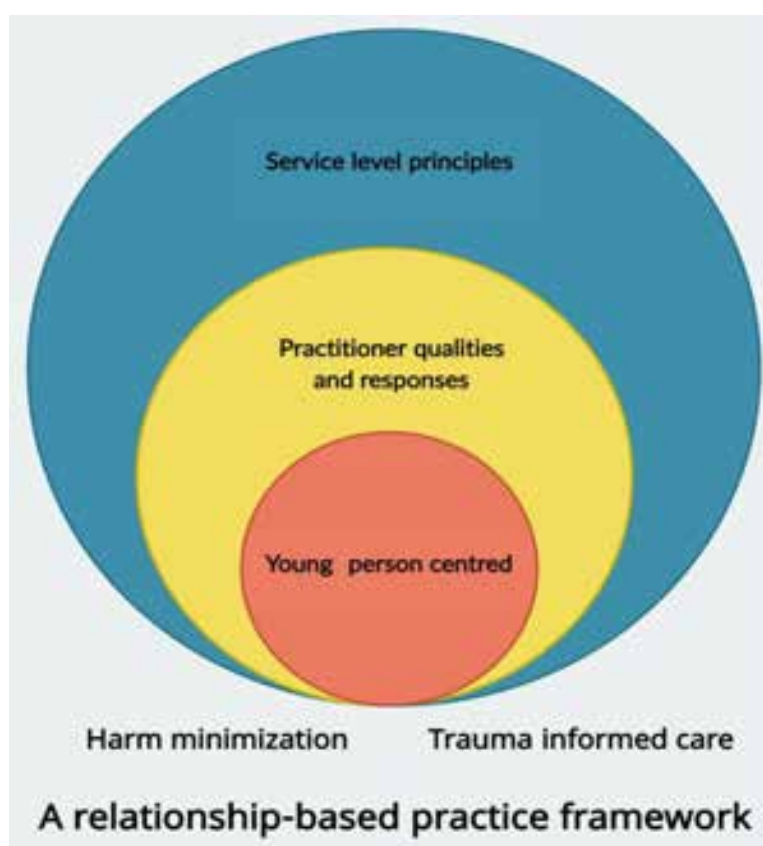
## **6.2 Enacting a relationship-based practice framework**

This research has uncovered perceptions of how ARROS PLACE practitioners enacted relationship-based practice with young people with cognitive disability transitioning from child protection and/or youth justice systems to produce positive outcomes. This 'how' includes: the values and qualities of the practitioners; the responses or actions they used to initiate engagement and build connection with young people at the individual and group level; those that supported the

sustained engagement of the young people and fostered their agency and sense of hope for positive change in their lives. Below is a visual representation (Figure 2) of the relationship-based practice approach developed from the perspectives of practitioners and the young people in this research.

**Figure 2**

*Model of the relationship-based practice approach adopted by ARROS PLACE practitioners*



As shown in Figure 2, overarching philosophies of harm minimisation, trauma-informed care and anti-oppressive, strengths-based practice framed the relationship-based practice framework of ARROS PLACE practitioners. ARROS PLACE practitioners acknowledged that risk-taking behaviours are common/expected in young people with cognitive disability who have had a statutory child protection and/or youth justice experience (Smyth, 2017). Instead of excluding young people from ARROS PLACE based on the presence of this risk, they instead practiced harm minimisation. They provided psychoeducation about the risks of behaviours and the potential consequences to others and to the young person, such as justice involvement.

The data indicates practitioners sought to balance their duty of care to ensure the safety of all the young people in the group, with the need to remain inclusive. For example, if a young person became dysregulated during the group and needed individual support then a practitioner provided this separate to the group. Harm minimisation approaches to working with young people with complex needs are recognised as good practice in the literature (See Malvaso et al., 2016; Smyth, 2017). When practicing from this approach practitioners must be critically reflective, suspending judgements about what is 'right' or 'moral' and focusing instead on "meeting young people where they are at" and respecting young peoples' autonomy in decision-making, while also seeking to minimise risk and maintain their best interests (Malvaso et al., 2016; Smyth, 2017).

ARROS PLACE practitioners acknowledged the significant and continued impact of the young people's histories of trauma and their ongoing experiences of trauma. They recognised that behaviours that emerged in the groups were related to this, and/or due to underlying disability. They refrained from framing behaviours in negative terms and sought to understand what the young person was communicating by their behaviour. Reported in the case files, and by one young person in her interview, was a recognition of trauma responses being triggered at times during the groups. It was recorded that practitioners put in place de-escalation practices which included working with individuals separate to the group and teaching them self-regulation strategies via co-regulation. Trauma-informed approaches are endorsed in the literature on relationship-based practice with young people who have experienced Adverse Childhood Experiences (ACES). Frederick et al (2021) state:

practice needs to be informed by an ethic of care which is rooted in how we understand the causes and consequences of trauma in the lives of individuals and groups. Trauma-informed care (TIC) is a practice approach in which account is taken of early adversity, offering professionals an understanding as to how such experiences influence clients' psycho-social functioning along their life course (p. 3024).

Trauma-informed care involves an understanding of how trauma impacts the brain and how relationships can be healing, as Smyth (2017) notes:

if we can truly understand this population of youth and appreciate how their traumatic experiences have shaped their brains and their relationships, we can help offer them new experiences. These can challenge the youth to see positive exceptions in people who

genuinely treat them with dignity and respect, and who help them to feel included instead of marginalized (p. 13).

Further research is needed as to how trauma-induced responses are experienced by young people with cognitive disability. This research provides some evidence in this regard and outlines important practices to support this group of young people.

The reports of the young people in this research suggest ARROS PLACE practitioners engaged in affirmative, healing relationships with young people. ARROS PLACE practitioners used an anti-oppressive, strengths-based approach which involved acknowledging their power and privilege as workers and seeking to work in partnership with the young people to empower and build their resources. The next section of this discussion describes the values, qualities and responses at the practitioner level that facilitated engagement for the young people in this research.

#### 6.2.1 Practitioner values, qualities and responses: Enabling engagement and facilitating change

This research indicates there were certain personal values and qualities that ARROS PLACE practitioners possessed that were beneficial to engage with young people with cognitive disability who have had a statutory child protection and/or youth justice system experience. The young people identified that they appreciated: passion and commitment, fairness, genuineness and being valued as an individual. Further values and qualities of practitioners identified in the data were their non-judgmental attitude, unconditional positive regard, authenticity, creativity, proactive and gentle persistence, and their approachable, non-authoritarian style. This mirrors the findings of Malvaso et al (2016) in their research on service responses to young people with complex needs from the perspective of the young people and workers. Malvaso et al (2016) unearthed characteristics of workers that were perceived to enhance engagement:

Importantly, the style of individual staff members who are consistent, creative and proactive can foster engagement amongst young people leaving care. Participants suggested that effective workers are “firm but fair”, reliable, respectful and consistent, and are imbued with characteristics such as interpersonal warmth and non-authoritarian interaction styles. These style characteristics, along with the experience of the worker, were deemed as imperative for engaging young people (p. 138).

Similarly, Gilgun and Hirschev (2017) developed a model of factors for working with families who experienced complex trauma and identified the following necessary qualities: genuineness, persistence, consistency, firmness, trustworthiness and dependability (Gilgun & Hirschev, 2017). Sandu (2019) identified eight worker qualities that facilitated change in the affective functioning of young people facing severe and multiple disadvantage: not giving up, showing interest, and listening, as well as being genuine, available, approachable, sensitive, and accepting of young people. She has further developed an understanding of how these factors exerted an influence and created change in the young people's lives. Specifically, she explored: (a) their influence on the affective functioning of young people; (b) disruptions in the young people's cognition; and (c) the agency of the young people.

It is clear that there are some common practitioner qualities that have been recognised in previous literature to positively influence engagement of young people with complex needs (Gilgun & Hirschev, 2017; Malvaso et al., 2016; Sandu, 2019). However, this study is the first to examine them in relation to young people with cognitive disability with a transition from statutory child protection and/or youth justice system experience. There is a need for more studies to take a step further and seek to understand the mechanisms through which practitioner qualities enable change to occur in order to improve outcomes for young people with complex support needs (Sandu, 2020). This research has identified a number of responses that enabled ARROS PLACE practitioners to initially engage the young people and build a relationship; and then to maintain this relationship and use it as a vehicle to facilitate change in the young people's circumstances. These are outlined in the next section.

#### **6.2.1.1 Proactive outreach: Being gently and respectfully persistent**

To begin to build a relationship with the young people ARROS PLACE practitioners engaged in what they termed "proactive outreach". They described being gently and respectfully persistent by repeatedly visiting young people at their school or home to build relationship and offer support, and messaging or calling young people to regularly check in and establish the relationship; reminding young people of the ways they could engage such as mentioning the Youth co-op, reminding them about CLP events and the ARROS PLACE groups and offering transport to and from these to enable young people's attendance. ARROS PLACE practitioners took into account young people's histories of trauma and the impact of cognitive disability and how these might influence engagement. The young people reported that this persistent and patient approach made them feel welcomed and valued by practitioners at ARROS PLACE which encouraged their engagement with the service.



Assertive outreach and persistence and patience have previously been recognised in the literature as necessary strategies for initiating and maintaining the service engagement of young people with complex support needs (Malvaso & Delfabbro, 2015; Smyth, 2017). It represents good practice to provide young people with complex support needs with multiple opportunities to engage and re-engage. This takes into account how their past trauma experiences may impact the pace of relationship development with practitioners and that their lives continue to be complex and unpredictable in nature (Smyth, 2017). It also demonstrates to the young people that practitioners can be dependable, which has not necessarily been their past experience in interactions with statutory workers (Smyth, 2017).

### **6.2.1.2 Being young person-centred**

In this research practitioners reported that their work involved “meeting young people where they’re at” and working in partnership with them. Young people were recognised as the experts in their lives and valued for their strengths. The young people ‘took the lead’ to identify their individual goals and were active in planning the goals of the groups. This involved young people identifying the goals they wanted to work on, both in the initial intake, but also raising any emerging and immediate needs. For example, the case files recorded that the young people dropped in at ARROS to engage with ARROS PLACE practitioners or to seek resources like food or loans or help with clothes washing. The files also reported that it was often the young people texting or calling to request support. The young people themselves reported they felt confident to ask for help when they required it. This confidence may reflect the safety and trust that the young people felt in their relationships with the ARROS PLACE practitioners. Confidence in directing supports is crucial for young people with cognitive disability transitioning to adulthood, who may be regarded by others as incapable of making their own decisions and be socially conditioned not to speak up about the issues that matter to them (Midjo & Aune, 2018).

Active and meaningful participation of young people produces positive outcomes, beyond meeting their immediate needs (Purtell & Mendes, 2017). This participation can be transformative by providing opportunities for young people to develop positive identities and demonstrate positive attributes (Smyth, 2017), enabling greater ownership and perceived control over their lives (Malvaso et al., 2016) and to contribute more broadly by advocating for systemic changes to the post-care system (Purtell & Mendes, 2019). In this research young people reported that their participation in ARROS PLACE, and the collaborative approach used by the practitioners within it, led to them feeling valued and experiencing increased self-esteem. They expressed the goal of mentoring other young people at ARROS PLACE. They were involved in broader inquiries such as the Royal Commission into the Violence, Abuse, Neglect and Exploitation of People with Disability

(herein referred to as the Disability Royal Commission (DRC)) and research activities that sought to better understand their experiences with the hope of bettering the lives of other young people in similar circumstances. Similar positive outcomes were reported by Purtell & Mendes (2019, p 48) in their evaluation of the Continuing Care Program which “supported young people’s rights to be active participants in program development activities, and involved in advocating for improved services for young people transitioning from care”. There is a need for further research which explores young people’s experiences of participation in service development and the impact of this participation on practitioners work and broader service responses (Purtell & Mendes, 2019).

### **6.2.1.3 Building networks of support**

Within ARROS PLACE relationship-based practice was multi-level. The focus was not solely on building the relationship at the individual level with the young people. In the files ARROS PLACE practitioners noted the goal of building each young person’s networks. They identified social opportunities for the young people to participate in CLA such as ARROS PLACE groups and the Youth co-op and other ARROS events such as movie night and the DRC artwork event. It appears from the notes that young people participated in these opportunities. Practitioners also identified broader community opportunities for the young people based on their individual needs.

Practitioners maintained a broader focus on the systemic barriers, enabling access to services by building relationships with other practitioners and services and educating them about the impacts of disability. They made referrals to these as needed to build community connections for the young people. The need to create community connections for young people leaving care, to ensure they have a network of ongoing relationships outside the service has been consistently recognised as best practice in previous literature (Frederick et al., 2021; Mendes & Purtell 2021; Purtell & Mendes 2016; Whyte, 2011). However, both the young people and the ARROS PLACE practitioners recognised that systemic barriers to access remained and in some cases prevented young people from obtaining necessary resources such as the DSP and an NDIS package. This highlights the need for systemic change to improve the transition of young people with cognitive disability and a statutory child protection and/or youth justice system experience.

### **6.2.1.4 Building skills**

In this research the young people identified that they had gaps in their living skills and valued being able to build skills in food preparation and mentoring at ARROS PLACE. Comprehensive skill development is a recognised need for young people leaving care to achieve successful transitions and become self-supporting (Malvaso et al., 2016; Whyte 2011). It is also essential for young people with cognitive disability who require supports in reasoning, problem solving, learning, and adaptive skills (Schalock et al., 2021). The skill development at ARROS PLACE was facilitated by

practitioners recognising that each young person had individual needs in relation to their skill development and providing flexibility in their approach to skill training. Individualism and sensitivity in approaches to skills training are recognised best practice in work with young people with complex support needs (Malvaso et al., 2016).

In this research it is evident that the skill-building in food preparation was a vehicle for broader changes to occur. For example, the young people described their self-transformation including their increased self-esteem, sense of agency and that they were engaging in peer-to-peer connection and mentoring as a result of their engagement with ARROS PLACE. These findings are promising as Whyte (2011) argues that the benchmark for a successful transition from care is “to create an environment that supports the development of personal resilience factors such as the promotion of self-esteem, trusting relationships, personal achievement, community acceptance, an external support network and a capacity to exercise self-determination” (p.40).

#### **6.2.1.5 Holistic, flexible, response, intensive and continuous service responses**

The ARROS PLACE practitioners adopted an ecological view of young people’s needs and provided “ecologically complex services” (Ungar et al 2014., p. 685) that sought to address all areas of need. Through the intake process practitioners identified needs which spanned: personal relationships; identity and culture; mental health; physical health; disability; accommodation; income; legal; navigating services; life skills; education and employment; fundamental needs of everyday living and other needs. While ARROS Place practitioners could not respond to all of these needs directly in the groups, the flexible service model with two key project workers enabled individual support for young people to occur simultaneously. The data revealed at times young people were in crisis and practitioners employed a flexible approach which allowed them to respond there and then and to defer other long-term goals of the young people until their crisis needs were addressed. For example, when legal issues arose for one young person, an ARROS PLACE practitioner made themselves immediately available as a support person. They liaised with Legal Aid to ensure the young person’s best interests were represented and that their disability was taken into consideration during interactions with legal aid. Case file data also documented practitioners’ attunement to needs such as engaging in deep listening, and in the sharing of and resonating the emotional states of the young people. It demonstrated practitioners were responsive, shifting the focus of engagement to emerging and immediate needs when young people dropped into the service seeking support and during ARROS PLACE groups when sitting with and responding to risk.

The findings indicate ARROS PLACE practitioners worked intensively with the young people. This involved frequent, almost daily contact over a period of a year as documented in the case files. It is important to note that case files were reviewed from a period of a year and it is unknown if these young people continue to work with the ARROS PLACE practitioners. The key worker model appeared to provide continuity for the young people, with young people reporting that practitioners were available to help with whatever they needed and that they had built relationships with multiple practitioners. In instances where ARROS PLACE did not have the capacity or resources to address all of the young person's needs internally, referral mechanisms and advocacy by practitioners sought to ensure the young people's needs were met. For example, practitioners assisted the young people to obtain DSP and NDIS, where young people met eligibility criteria. The positive changes the young people experienced in this research were made possible via the relationship-based practice that ARROS PLACE practitioners engaged in. This substantiates the need for relationship-based approaches to remain at the heart of ARROS practice.

This research contributes to the emerging literature that demonstrates that relationship-based practice with young people with complex needs has the capacity to: buffer against the impact of adverse child experiences (Frederick et al., 2020); be transformative – by restoring a sense of trust in adults and empowering young people to exercise their agency; and can bring about positive outcomes in their lives during transitions (Ellem et al., 2020; Malvaso et al., 2016; Purtell & Mendes, 2019; Sandu, 2019; Smyth, 2017). It further adds to the literature on relationship-based practice with young people with complex needs leaving care (see Malvaso et al., 2016; Purtell & Mendes, 2019; Ungar et al., 2014; Smyth, 2017; Sandu, 2019; 2020) by identifying how relationship-based practice can best engage young people with cognitive disability transitioning from statutory child protection and/or youth justice systems specifically. It has identified the personal values and qualities of the ARROS PLACE practitioners, their responses and the broader CLA service principles that facilitated the engagement of young people with cognitive disability transitioning from statutory child protection and/or youth justice systems. It has demonstrated that positive outcomes were produced.

It is encouraging that a number of the principles identified as underpinning the ARROS PLACE practice approach have previously been identified to be best practice within evaluations of relationship-based approaches to supporting young people with complex needs leaving care such as the 'Continuing Care' and 'Stand By Me' models (see Purtell & Mendes, 2019). Common service principles include: being holistic, flexible, creative, assertive and persistent (Malvaso et al, 2016), and offering intensive and continuous support (Purtell & Mendes, 2019). The ARROS

PLACE relationship-based practice framework also shares many features of the 'Get Connected' relationship-based framework developed by Smyth (2017) drawing upon his extensive social work practice with high-risk youth in state care in Canada. This adds weight to the case for continuing to use relationship-based service models with young people with complex support needs such as those with cognitive disability and a statutory child protection and/or youth justice system experience. Furthermore, relationship-based approaches constitute ethical social work practice as they recognise the human dignity and worth of all young people and that they deserve and require continuity in their relationships with practitioners (Frederick et al., 2021). Relationship-based approaches seek to mitigate the chaos and uncertainty young people have often experienced in their families of origin, in care and are still experiencing upon leaving care (Smyth, 2017). They seek to help young people navigate complex transitions and obtain needed support via a stable ongoing relationship. The final section of this discussion explores how relationship-based practice was enacted in a group context within the ARROS PLACE groups.

#### **6.2.1.6 Relationship-based practice in the group processes**

This research has developed an emerging understanding of relationship-based group work practices that are used to engage young people with cognitive disability who are transitioning from statutory child protection and/or youth justice systems. This is a significant contribution as there is very limited literature on group work with young people with complex support needs (Kelly & Hunter, 2016). Kelly & Hunter (2016) note "given this gap in the literature, it is important to explore the development of interpersonal dynamics in activity-based groups and whether young people experience personal growth as a result of their participation"(p. 307). In the ARROS PLACE groups the focus was negotiated and dynamic in that it evolved with the emerging needs of the young people.

ARROS PLACE practitioners engaged in ongoing critical self-reflection as to the needs of young people and this enabled them to remain responsive to the changing dynamics and characteristics of young people and their needs over time. Practitioners engaged in a dual process of individual and group work. They first built an individual relationship through pro-active, gentle, persistent engagement and then maintained it within the group dynamic. Practitioners created safety through their attunement and responsiveness to each young person. Issues particular to individuals arose and could be addressed individually and this enabled the young people to remain engaged and over time to even take ownership over facilitation of the group. Transport was an integral part of the group process –it provided the space to prepare the young people and also to debrief after. The car was also an opportunity for the peer-to-peer support to be provided.

It was within the context of relationship-based practice ARROS PLACE practitioners had the opportunity to sit with, and reframe risk, while also keeping group members safe. This safe group space enabled opportunities for co-creating knowledge and skill-development and the peer-to-peer transfer of knowledge and skills and for self-esteem building. The cooking tasks were the vehicle through which to achieve all of this. This research provides compelling evidence that not only is it possible to facilitate groups with this population, that participation in such groups enables a range of positive outcomes as perceived by the young people and practitioners in this study. While it has previously been acknowledged in the literature that group workers may play an integral role in influencing the development of autonomy in persons with cognitive disability (Carter, Munro & Matin, 2013) there are few previous studies that have demonstrated how to achieve this. There is therefore a need for further research on group work processes that can be used with young people with cognitive disability to facilitate their autonomy, engage their strengths and enable their personal growth (Kelly & Hunter, 2016). This includes research on how young people can actively shape the design of these groups.



## 7. RECOMMENDATIONS AND LEARNINGS FOR FUTURE PRACTICE

### 7.1 Service level

One of the most conclusive findings from this study is that there is a need for a specialist support service for young people with cognitive disabilities who are transitioning to adulthood and have experiences of the statutory child protection and/or youth justice systems. The young people in the study had complex and dynamic needs, which were not being adequately addressed by other service systems. The findings demonstrate that ARROS PLACE was able to engage this cohort of young people to build their skills, networks of support and confidence. In recognition of the positive outcomes it is recommended that ARROS PLACE continues to be funded. It is also recommended that the service continue to be underpinned by the relationship-based, trauma-informed, strengths-based, harm-minimisation approach currently being used to guide practice.

It is evident from the data that three staff members are required to facilitate the group effectively. This enables practitioners to manage the individual needs of the young people separate to the group without stopping or disrupting the group from proceeding. It is recommended that a minimum of three of staff members are available for the groups, with two of these being key workers. The third staff member could continue to be a social work student.

However, the data also revealed an overreliance on the two key practitioners. These practitioners have a detailed knowledge of each young person and of the group dynamics and processes, including how these need to be adapted as issues emerge. However, this knowledge is not being adequately documented in the group notes and is therefore at risk of being lost when staff leave the organisation or inaccessible if the practitioners are sick, for example. Developing a short profile on each young person and their strengths, needs and preferences may also assist if unfamiliar practitioners were required to step in at short notice and facilitate the group. These profiles could be developed in partnership with the young people to ensure they best reflect the young people's needs.

To further future-proof the program and ensure continuity for the young people it is recommended that the practitioners document the intent of their practice not just describe the process/tasks of the group in their group notes. It is important that practitioners document the rationale behind their decision-making when changes or evolutions happen in the group process. Further consideration of the purpose of the group notes may help in determining how best to amend the group note



template. Linking the group notes to supervision sessions may also help to identify practice learning which could be incorporated into the notes.

Given the complex needs, group dynamics and often risk that is being held within the group, opportunities for supervision and de-briefing are paramount. Practitioners described sitting with risk and one practitioner identified maintaining boundaries as a challenge in their practice. Supervision should be regular and address potential for vicarious trauma and opportunities for post-traumatic growth.

The data indicated that transport was integral to ensure the attendance of the young people at group and was part of the group process itself. Transport provided opportunities for preparation of young people before the group and debriefing following the group. The findings indicate that time and resources are provided by the organisation to enable transport to occur and be integrated into the group's operations. It is recommended that transport continues to be viewed as an integral part of the group program and is funded and staffed. It should continue to be provided to young people both before and after group.

The group's focus on food preparation and cooking had multiple positive outcomes for the young people. The young people built food preparation skills, which the young people valued, and it had the practical impact of ensuring the young people were eating, which is a fundamental need. More broadly, it was the vehicle for the relationship work and change and growth to happen. It is recommended that the focus on cooking remain for this group as it recognises that young people may not have these life skills because of their care experience, but also acknowledges their economic situation of living in poverty, and ensures they are fed. However, since the groups' focus is negotiated with the young people, they may also prioritise other needs and skills and these should be a focus too.

There is a need to provide further opportunities and programs for young people to provide mentoring to other young people with cognitive disability with a statutory child protection and/or youth justice experience. The young people in this research have expressed a desire to be involved in this. Their experience and journey makes them best-placed to work alongside ARROS PLACE practitioners to engage young people facing similar circumstances and to begin to build networks of support for them.

Our findings show that ARROS PLACE practitioners provide education about cognitive disability and trauma to other professionals and stakeholders on an ad hoc basis to support young people in navigating other services and systems. It is suggested that the scope of ARROS PLACE be increased to include formal and planned training with key stakeholder groups, such as Department of Children, Youth Justice and Multicultural Affairs, schools and training providers.

Some of participants in this study identified as First Nations young people. However, none of the practitioners involved in the delivery of the program did. Whilst no concerns were raised in regard to cultural safety by the participants, given the over-representation of First Nations young people in statutory child protection and/or youth justice systems, it is recommended that future iterations of the program are designed and implemented in consultation with First Nations communities and services.

## 7.2 Broader system level

The work of ARROS PLACE is largely affected by the policy and resourcing decisions made at a higher level within the Queensland child protection system and at the national level with the NDIS.

### 7.2.1 Statutory child protection system

Whilst our findings indicate that young people valued the support provided by ARROS PLACE and they experienced positive changes in their lives because of the program, it must not be overlooked that their need for the program's support arose from the inadequacy of support provided by other systems, notably the statutory child protection system. As statutory child protection authority, and often guardian of young people under child protection orders, the State Government has an obligation to act in the best interests of the young person as what is often referred to as 'corporate parent'. In Queensland, under the *Child Protection Act 1999*, there is a legal obligation for the State to provide transition to adulthood support that meets the needs of individual young people. It is evident from this study that some young people with cognitive disability are not receiving this support, particularly in regard to income support, life skills, and NDIS. Our findings add support to the extant literature regarding the gap that exists between the national standards regarding transition planning and what happens in practice (eg. Mendes & Snow, 2014).

Given recent legislative changes to extend care support for young people under child protection orders in Queensland, it is vital that efforts are made to enhance the transition planning process and supports in place to ensure that young people with cognitive disabilities have the funding and

support structures in place to facilitate a supported and responsive transition from the child protection system to adulthood. The proposed changes for extending care are intended to ensure that young people receive support during emerging adulthood from their 'corporate parent' like other young people do from their own parents (Mendes & Snow, 2014). However, failure to address the current barriers to successful transition planning with young people will only 'push the can down the road' regarding the service gaps that this cohort of young people experience.

Given the skills of practitioners involved in the ARROS PLACE program for building trusting relationships with young people with cognitive disability and experience of the statutory child protection system, it is recommended that funding be provided by State Government to ARROS PLACE to provide an imbedded worker/support to transition officers and CSOs. This imbedded worker would provide guidance to the child protection workforce whilst building relationships with the young person. This would help to ensure that appropriate assessments of needs are undertaken and that young people have a voice in decisions that affect them. This would enable more responsive support to be provided to young people whilst they are still in care, rather than waiting for young people to 'fall through the gaps' after aging out of the care system.

### 7.2.2 National Disability Insurance Scheme

Similarly, the NDIS fails to adequately cater for young people with cognitive disability transitioning from statutory child protection and/or youth justice systems. The current system is reliant on programs like ARROS PLACE to assist this group of young people to engage in planning conversations and to access supports under the scheme. The practitioners of ARROS PLACE have specialised skills in communicating with and building trust and rapport with young people that is needed to overcome barriers for young people participating in the scheme. While the NDIS has developed specialist support coordinator roles to assist participants with complex support needs, there is a need for further research on how well this initiative meets the long-term needs of this group of young people (Collings et al, 2018), There is also a need for greater flexibility within the scheme in terms of funding supports that are young-person-centred, reducing the complexity of navigating the system, and extending the eligibility criteria to include young people with so-called "borderline" intellectual disability (Yates et al, 2021). Several young people with cognitive disability supported by ARROS PLACE were deemed ineligible for the NDIS, despite having significant needs related to disability, trauma and social disadvantage.

## 8. CONCLUSION

The findings of this research deepen understanding of the needs of young people with cognitive disability transitioning from statutory child protection and/or youth justice systems and demonstrate how their needs are varied, complex, dynamic and at times crisis-driven. It has explored how relationship-based practice was enacted by elucidating the practitioner qualities and responses, both at the individual and group level, and the service model characteristics of ARROS PLACE that engaged the young people with cognitive disability transitioning from statutory child protection and/or youth justice systems. This understanding can contribute to better outcomes for young people in similar circumstances by indicating the types of services, and evidence-based benchmarks for these services that should be developed to meet their complex needs. Furthermore, this research has identified how using a dual process of individual and group work can provide a way of working that supports young people's engagement, enables them to develop their skills in relating to other young people as well as addressing their individual needs. The positive findings presented in this report provide a sense of hope for the future. With a relationship-based practice framework that includes the right combination of practitioner qualities, skills and responses, as well as the right service characteristics, young people who have previously been labelled 'disengaged' can be reengaged, supported and even be empowered to mentor other young people who are still 'lost in the dark'.

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## APPENDICIES

**Appendix 1:** Participant information sheet and consent form – Young People interview and case file review

**Appendix 2:** Interview guide – Young people

**Appendix 3:** Participant information sheet and consent form – Practitioner interviews

**Appendix 4:** Interview guide – practitioners

**Appendix 5:** Participant information sheet and consent form – Practitioner focus group

**Appendix 1:** Participant information sheet and consent form – Young People interview  
and case file review

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## **PARTICIPANT INFORMATION SHEET (WITH VISUALS): YOUNG PEOPLE**

**Project Title:** Finding out about the ARROS Place Program: Supporting young people with cognitive disabilities and experiences of child protection &/or youth justice involvement

[Short title: Finding out about the ARROS Place Program]

**Ethical Clearance No.:** 2021/HE002144

### **Who is doing the research?**

My name is *[interviewer name]*. I am from the University of Queensland. I am part of a team of researchers who want to talk to young people. We are working with ARROS.

### **What is this research about?**

The research team wants to find out about how the ARROS Place program is supporting young people like you.

### **What are you being asked to do?**

#### **Interview**

I would like to meet with you once and talk to you about your support needs.





I would like to know about:

- Your support needs



- How you found out about ARROS Place program



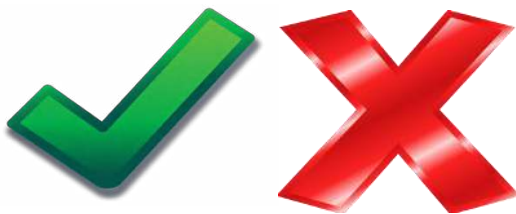
- Your time in the ARROS Place program



- How ARROS Place helped or didn't help you



- What you think of ARROS and ARROS Place program



We will chat for about one hour. You can choose where and when we meet. It will need to be in a private room in a public place. If there are COVID-19 restrictions in place, you will have a ZOOM interview.



### **Case file review**

You can give permission for me to read your ARROS Place case file. I would only read your file to find out about the types of support you were given by ARROS Place. Names will be removed from the file before I read it. I won't tell anybody about what was written in the case file.



### **The good parts of being in the research**

You will get the chance to tell me about your support needs. You can tell me about the good and bad things at ARROS and the ARROS PLACE program. You will be helping me to find out how we can make things better for other young people who are growing up and leaving care or youth justice.



### **The bad parts of being in the research**

Talking about your support needs and experiences at ARROS may make you feel upset. You might start to feel scared, sad or angry about it.

If you want to, you can bring someone with you to our meetings to give you support. The person you bring along can't be someone who works at ARROS. We want you to talk freely about your time at ARROS and ARROS Place.



If you start to feel upset, I can help you find a counsellor to speak to. He or she can help you to feel better.



### **Do I have to talk to *[interviewer]*?**

No! If you do not want to talk with me, then that's okay – it is up to you!



### **Recording what we talk about**

If you say it is okay, I will record what we say. This will help me remember what you told me. If you don't want me to do this, that's okay too!



### **Keeping what you say private**

If you do talk to me, nobody will know what you say to me. What you tell me will be kept private. The research team will **not** use your name when we write about our research. We will also **not** share names of other people you know or places you have been to.



I will put all the notes about our time together in a locked filing cabinet. Only I will have the key. I will also keep notes and the recording of our time together on a password protected computer. I will also delete the recording when I have what you said written down.



### **Getting help if it is needed**

If you tell me something that has happened to you that is against the law, I may need to talk to someone about it, like the police, to get help for you. I will not talk to anyone else without talking to you first.



The day after we meet I will ring you if you need me to. I want to make sure you are feeling okay after we talk.





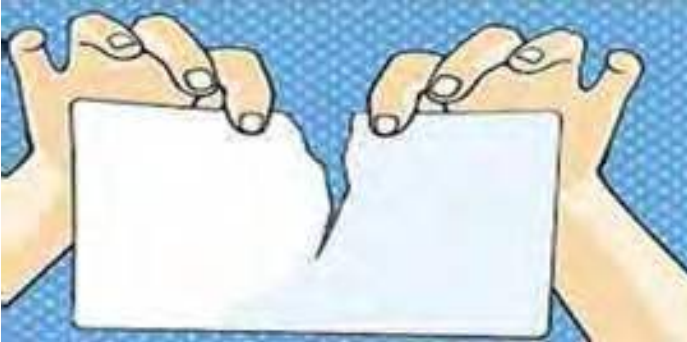
## Thanking you for your time

I will give you a \$50 spending card for being part of this research.



## Can I change my mind about talking to *[interviewer]*?

You can change your mind at any time and stop being part of the research. That is okay with me. If you decide to stop being part of our research, I will tear up any notes I have made when we talked. I will delete all files and recordings of our time together. **No one** will be able to read these notes or files again. **No one** will be able to hear the recording.



### **Telling you what I find out**

When this research finishes, the research team will know a lot about your support needs and about ARROS Place. If you want, we will tell you what everyone has said about ARROS Place. We can send you a report of what we found.



### **Who can I talk to if I have questions?**

If you need to contact me about this research, you can call or email the researchers.

This research is led by Dr Jemma Venables.



You can call Jemma about the research on 33651258 or email her at [jemma.venables@uq.edu.au](mailto:jemma.venables@uq.edu.au)

The ethics officers of the University of Queensland have looked very carefully at this research and made sure it was okay for me to talk to young people. If you want to, you can ring an ethics officer about the research on 3365 3924 or 3443 1656 or email [humanethics@research.uq.edu.au](mailto:humanethics@research.uq.edu.au)

### Other Important contacts



Johnny Choi (interviewer)  
[jongheon.choi@uq.edu.au](mailto:jongheon.choi@uq.edu.au)

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Dr Kathy Ellem  
[k.ellem@uq.edu.au](mailto:k.ellem@uq.edu.au)  
Ph. 0426 816 595

UQ Ethics office [humanethics@research.uq.edu.au](mailto:humanethics@research.uq.edu.au)  
Ph. 3365 3924 or 3443 1656

Lifeline [lifeline.org.au](http://lifeline.org.au)  
Ph: 131114

## PARTICIPANT CONSENT/ASSENT FORM: YOUNG PEOPLE

**Project Title:** Finding out about the ARROS Place Program: Supporting young people with cognitive disabilities and experiences of child protection &/or youth justice involvement

[Short title: Finding out about the ARROS Place Program]

**Ethical Clearance No.:** 2021/HE002144

I \_\_\_\_\_ agree to help \_\_\_\_\_ in the research: “**Finding out about the ARROS Place Program**”

**[interviewer name]** is from the University of Queensland. He/she is part of a team of researchers who are working with ARROS to find out about how the ARROS Place program is supporting young people like me.

**[interviewer name]** will meet with me once. We will talk for about one hour. I can meet **[interviewer name]** on my own or I can have a support person with me if I want. The person I bring along can't be someone who works at ARROS. I can choose where we meet.

**[interviewer name]** will talk to me about:

- my support needs
- how I found out about ARROS and ARROS Place

- my time in the ARROS Place program
- how ARROS Place helped or didn't help me
- what I think of the ARROS Place program

By talking to **[interviewer name]** I will help them to find out how we can better support and teach skills to other young people who are growing up, and who might be leaving care or youth justice.

If I say it's okay, **[interviewer name]** will record what we say. If I don't want to be recorded, then **[interviewer name]** will not record what we talk about.

### **Case file review**

With my permission **[researcher]** will read my ARROS Place case file. **[researcher]** will only read my file to find out about the types of support I was given by ARROS Place. I can decide if I want my name removed from the file before **[researcher]** reads it. **[researcher]** won't tell anybody about what was written in the case file.

My name will not be used when **[researcher]** and the research team write about their work. **[researcher]** and the research team will **not** share names of other people I know or places I have been to. All notes about me will be kept private.

I can phone or email **[interviewer's name]** on \_\_\_\_\_ and \_\_\_\_\_ to talk about my part in this research.

If I am not happy about the way \_\_\_\_\_ is doing his/her work, I can phone the ethics officer about the research on 3365 3924 or 3443 1656 or email [humanethics@research.uq.edu.au](mailto:humanethics@research.uq.edu.au)

I don't have to sign this form if I don't want to. If I do sign it, I can change my mind and stop being part of the research.

\_\_\_\_\_ will be okay with this.

If I change my mind and stop being part of the research, \_\_\_\_\_ will tear up any notes he/she has made when we talked. He/she will delete all files and recordings of our time together.

When this research finishes, I can get a report of what the research team found if I want.

I would like a copy of the report (tick one box):

Yes

No

My contact details are:

I have read the information sheet and I understand it, or someone has read it to me and explained it to me.

**I agree to take part in this research “Finding out about the ARROS Place Program”**

**Please tick which options you would like to take part in. You can tick as many as you like.**



**Yes**



**No**



I agree to participate in an interview



I agree to having my case file read



I agree to having my case file read but I would like my name removed

My signature: \_\_\_\_\_

Date: \_\_\_\_\_

Researcher signature: \_\_\_\_\_

Date: \_\_\_\_\_



## Appendix 2: Interview guide – Young people

### APPENDIX 1: INTERVIEW GUIDE – YOUNG PEOPLE

*\*Please note that interviews will be semi-structured – this acts as a guide only. The phrasing and order of questions will be adapted as required to meet the needs of the interviewee and their responses\**

#### Preparation:

- Interviewer to spend time introducing self via a sharing activity
- Interviewer to explain the research project
- Participants encouraged to ask questions about the research
- Interviewer explain interview process and provide young person with the “stop”, “break” cards etc
- Confirm consent/assent prior to commencement of interview. See Project Description and Output Form for more details on the consent process.
- Interviewer shows young person the timeline (see end of interview guide)

#### About you:

- Age
- Gender
- Cultural background
- Most exciting thing about becoming an adult
- Biggest worry about becoming an adult
- Three hopes for the next 5 years

#### Setting the scene:

- Young person is presented with a timeline that includes ARROS Place as a key milestone. Included will be pictures of key ARROS staff to help contextualise the program for the young person
- Ask young person to help map out other people who help and support them at the moment

#### “Before ARROS Place”:

*We are interested in knowing a bit about the support you’ve had before you started working with [ARROS Place workers]*

- Work with the young person to map out the services they have worked with in the past on the timeline
  - *What did these services help you with?*
  - *What was it like working with them? What did you like/dislike*
  - *Prompt re involvement with Child Safety &/or Youth Justice.*
    - *Prior contact with either Child Safety or Youth Justice is a requirement of entry into the ARROS Place program. The purpose of this question is to find out about the experience of support provided by these statutory authorities NOT to find out why they came to the attention of these services. The interviewer will actively shift interview away from these issues.*

### “About ARROS Place”

- *I don't work for ARROS – can you tell me what ARROS Place does?*
  - *Who do they help? What do they do? What does [name of relevant worker] do?*
- *Using the diagram, explore similarities and differences in the types of support provided by ARROS Place and any other services the young person has previously worked with*
- *How did you find out about ARROS Place/who told you about it? (referral pathway question)*
- *Did you have a choice about deciding if you would work with ARROS Place and [worker name]?*
- *What did you think would happen when you started working with ARROS Place/[worker name]?*
- *Did you have any worries or questions about working with ARROS Place/[worker]?*
- *Do you remember the first day when you met [worker]?*
  - *What was that like? What did you do? How did you feel about meeting [worker]?*

### Experience of ARROS Place workers:

Show young person the timeline with the images of ARROS Place and workers. Use this as a reference for the following questions:

- *When do you see [worker]? Is there a day that you see them?*
- *What do you talk about with [worker]?*
- *What do you do with [worker]?*
- *Have you asked [worker] for help with anything?*
  - *What did you ask for help with? What did they do? What happened? How did that make you feel?*
- *What do you like or dislike about the time you spend with [worker]?*

### Experience of group/learning activities:

- *Other than [worker/s] are there other people you see at ARROS Place? When do you see them? What do you do with them? [map this onto the timeline]*
- *What is your role in the group at ARROS Place? What things do you do?*
- *How do you get on with the other people in the group?*
- *What do you like/dislike about the group and working with other young people?*

### Summary:

- *If you could use one word to describe ARROS Place, what would it be?*
- *If you could change anything about ARROS Place, what would it be?*
- *Any other things you think I should know about ARROS Place?*

## Appendix 3: Participant information sheet and consent form – Practitioner interviews

### PARTICIPANT INFORMATION SHEET: PRACTITIONERS

**Project Title:** Finding out about the ARROS Place Program:  
Supporting young people with cognitive disabilities  
and experiences of child protection &/or youth justice  
involvement

[Short title: Finding out about the ARROS Place  
Program]

**Ethics Reference Number:** 2021/HE002144

#### **Why is the research being conducted?**

This study seeks to explore how the ARROS Place program supports young people. In particular, it aims to gain insight into how the program is delivered, the types of support young people are provided with and the way that practitioners form professional relationships with the young people. The knowledge built from the findings will help to increase the capacity of the program to meet the needs of the young people.

#### **Who can participate?**

You are able to participate if you are employed by the Community Living Association and are currently, or have been previously involved in the service delivery of ARROS Place.

#### **What will you be asked to do?**

You will be asked to participate in a group interview. The interview will take approximately one hour and will occur either face-to-face at a suitable location OR via zoom. The interview will explore topics such as: 1) the tasks that you undertake within your role; 2) the types of issues that you support young people with; 3) the extent to which the service components of ARROS Place meet the needs of young people; 4) the strengths and weaknesses of the ARROS Place program. With your permission, the interview will be audio-recorded.

#### **The expected benefits of the research**

There is no direct benefit for participants. However, taking part in the research will provide an opportunity for participants to reflect on their experiences and share their perspectives on the ARROS Place program and its capacity to meet the needs of the young people.

#### **Risks to you**

There are no expected risks to you as you will only be asked to reflect on your professional practice. However, if you do become distressed when participating in the interview you are able to stop and/or withdraw from the study at any time. If required, information about possible supports, including counselling, will be provided to you.

#### **Your participation is voluntary**

Please note that participation in this study is voluntary. This means that participants will not be penalised by their employer or the researcher for not taking part. Further to this,

participants can choose not to answer certain questions and may withdraw from the study at any time without giving a reason. There will be no penalties for withdrawal and any data collected from you will be destroyed.

### **Your confidentiality**

Confidentiality will be ensured throughout the research process. Your responses will not be linked to you. Participants will be allocated a unique code that will be used to refer to them in all reports to protect participant confidentiality. No identification of the participants will occur in data analysis, results or publication of findings.

The interview data will be stored digitally and in accordance with data storage guidelines on the University of Queensland's secure Research Data Management System. This can only be accessed by members of the research team. The audio recordings of the interviews will be deleted once they have been transcribed, while the interview transcripts and consent forms will be stored for five years before being securely destroyed. Any physical copies associated with data collection will be scanned and also stored digitally on the Research Data Management System. The physical copies will be securely destroyed.

### **Feedback to you**

The research team will utilise the findings from the study to compose a report for the Community Living Association, as well as peer reviewed journal articles and conference papers.

Participants will be able to receive a summary report at the end of the research project. Any participant involved in the study who wishes to obtain more detailed information will be able to request it from the researchers.

### **The ethical conduct of this research**

This study adheres to the Guidelines of the ethical review process of The University of Queensland and the *National Statement on Ethical Conduct in Human Research*. Whilst you are free to discuss your participation in this study with Dr Jemma Venables from the research team (contactable on 07 3365 1258), if you would like to speak to an officer of the University not involved in the study, you may contact the Ethics Coordinator on 3365 3924 or email [humanethics@research.uq.edu.au](mailto:humanethics@research.uq.edu.au)

## PARTICIPANT CONSENT FORM- PRACTITIONERS

**Project Title:** Finding out about the ARROS Place Program:  
Supporting young people with cognitive disabilities  
and experiences of child protection &/or youth justice  
involvement

[Short title: Finding out about the ARROS Place  
Program]

### Participant Consent Form – Practitioners

**Researcher(s):** *Dr Jemma Venables, NMSW, UQ; Kathy Ellem, NMSW, UQ.*

**Ethical Approval Number:** 2021/HE002144

By signing below, I confirm that I have read and understood the “Participant Information Sheet” and in particular have noted that:

- I am aware that I will be interviewed once about the ARROS Place program, my professional involvement in it and the young person’s experiences of the ARROS Place program
- I have had any questions answered to my satisfaction
- I understand the risks involved
- I understand that there will be no direct benefit from my participation in the research
- I understand that my participation in this research is voluntary and will not impact my relationship with The University of Queensland
- I understand that I can contact the research team with any additional questions
- I understand that I am free to withdraw at any time, without explanation and without penalty
- I understand that I can contact the University of Queensland’s Ethics Coordinators on +617 3365 3924 or +617 3443 1656 or via email [humanethics@research.uq.edu.au](mailto:humanethics@research.uq.edu.au) if I have any concerns about the ethical conduct of the research

**I agree to participate in an interview**

**I would like to receive a summary report of the findings at the completion of the project**

<b>Name:</b>			
<b>Signature:</b>		<b>Date:</b>	
<b>Send summary report to:</b> <i>(Email or post)</i>			

## Appendix 4: Interview guide – practitioners

### INTERVIEW GUIDE – PRACTITIONERS

*\*Please note that interviews will be semi-structured – this acts as a guide only. The phrasing and order of questions will be adapted as required to meet the needs of the interviewee and their responses\**

#### Preparation:

- Interviewer to spend time introducing self and the research project
- Participants encouraged to ask questions about the research
- Explain interview process & sign consent form

#### ***To start off with, I'd like to know a little bit about you– would you mind telling me:***

- Age (*offer age ranges if they would prefer: 18-25; 26-45; 46+*)
- Cultural background
- Qualifications
- Length of time working in community/social support services
- Current role & length of time in current role
- How your role relates to ARROS Place program

#### ***These questions are about the ARROS Place Program. Would you mind telling me a little bit about:***

- the purpose/aims of ARROS PLACE
- how it relates/intersects with ARROS & Community Living Association more broadly
- the key elements of the program
- the guiding practice principles
- who is involved in delivery & how?
- what are the unique contributions of the ARROS Place workers versus the peer mentors in program delivery?
- how do YP enter the program – what is the intake process?
- where do referrals come from? Are many cross-referrals from other CLA programs?
- are there any YP who have not been accepted into the program? Why? Were they referred elsewhere?

#### ***These questions are about the young people who access and are supported by ARROS Place:***

- what are the needs & goals of YP entering the program?
- to what extent does the program address these needs/goals?
- what other in/formal supports of the YP do you engage with as part of the program?

#### ***These questions are about your practice in relation to ARROS Place:***

- Tell me about a piece of work you are proud of. What skills/knowledge did you draw on in this instance?
- Tell me about a piece of work you found challenging. What did you do to manage it? What other skills/supports do you think you needed?
- If someone took on your role what advice or guidance would you give them?

#### **Summary:**

- Overall, what are the strengths & limitations of the ARROS Place program?
- What changes would you make to the program?
- Any other comments?

## Appendix 5: Participant information sheet and consent form – Practitioner focus group

### PARTICIPANT INFORMATION SHEET: PRACTITIONER FOCUS GROUP

**Project Title:** Finding out about the ARROS Place Program:  
Supporting young people with cognitive disabilities  
and experiences of child protection &/or youth justice  
involvement

[Short title: Finding out about the ARROS Place  
Program]

**Ethics Reference Number:** 2021/HE002144

#### **Why is the research being conducted?**

This study seeks to explore how the ARROS Place program supports young people. In particular, it aims to gain insight into how the program is delivered, the types of support young people are provided with and the way that practitioners form professional relationships with the young people. The knowledge built from the findings will help to increase the capacity of the program to meet the needs of the young people.

#### **Who can participate?**

You are able to participate if you are employed by the Community Living Association and are currently or have been previously involved in the service delivery of ARROS Place.

#### **What will you be asked to do?**

You will be invited to attend ONE focus group comprised of approximately five (5) practitioners. The focus group will be held either face-to-face or on Zoom (a link will be provided) and will last for approximately 90 minutes. The focus group will be facilitated by at least one member of the research team and will be audio recorded to enable the research team to analyse the data at a later date. If the focus group is held via zoom it will also be video recorded, however only the audio component will be used for transcription purposes. All audio/visual recordings will be deleted after transcription has occurred.

In the focus group, you will be presented with practice examples drawn from ARROS Place group case notes and individual case files. These de-identified documents were reviewed by the researchers in a previous component of this study. You will be asked to reflect on these examples and to discuss your practice approach and any factors that informed your engagement and responses to the young people involved.

#### **The expected benefits of the research**

There is no direct benefit for participants. However, taking part in the research will provide an opportunity for participants to reflect on their experiences and share their perspectives on the ARROS Place program and its capacity to meet the needs of the young people.

#### **Risks to you**



There are no expected physical or psychological risks of harm to you beyond everyday living as a result of participating in a focus group, as you will only be asked to reflect on your professional practice in work with young people who are involved with the ARROS Place program. However, if you do become distressed during the focus group you are able to stop and take time out from the focus group OR withdraw from the study. A member of the research team will be able to support you and explain these options as required. If you need further information about possible supports, the research team will be able to provide this to you. Examples of possible support services include Lifeline: <https://www.lifeline.org.au/get-help/get-help-home> or phone 13 11 14.

There is a low potential for social harm caused by participants sharing opinions or examples of practice during the focus group that may criticize or be outside of accepted current practices and policies associated with supporting this cohort of young people. However, all participants are required to provide their informed consent prior to participating in the focus group discussion and will be advised verbally and in writing that they are not required to answer any questions or share opinions/experiences that they are not comfortable sharing. Participants in the focus group will also be asked to agree to keeping the identity of other focus group participants and the content of the focus group discussions made by other participants confidential. Furthermore, the strategies used by the research team to maintain confidentiality during data storage, analysis and reporting are considered to mitigate this risk to participants by ensuring that they cannot be identified by their comments in any reporting of results. Further details about these strategies are outlined below in the section “Your Confidentiality”.

### **Your participation is voluntary**

Please note that participation in this study is voluntary. This means that participants will not be penalised by their employer or the researcher for not taking part. Further to this, participants can choose not to answer certain questions and may withdraw from the study at any time without giving a reason. There will be no penalties for withdrawal and any data collected from you will be destroyed.

### **Your confidentiality**

Confidentiality will be ensured throughout the research process. Your responses will not be linked to you. Participants will be allocated a unique code that will be used to refer to them in all reports to protect participant confidentiality. No identification of the participants will occur in data analysis, results or publication of findings.

The focus group data will be stored digitally and in accordance with data storage guidelines on the University of Queensland’s secure Research Data Management System. This can only be accessed by members of the research team. The audio recordings of the focus group will be deleted once they have been transcribed, while the transcripts and consent forms will be stored for five years before being securely destroyed. Any physical copies associated with data collection will be scanned and also stored digitally on the Research Data Management System. The physical copies will be securely destroyed.

**Feedback to you**

The research team will utilise the findings from the study to compose a report for the Community Living Association, as well as peer reviewed journal articles and conference papers. Participants will be able to receive a summary report at the end of the research project. Any participant involved in the study who wishes to obtain more detailed information will be able to request it from the researchers.

**The ethical conduct of this research**

This study adheres to the Guidelines of the ethical review process of The University of Queensland and the *National Statement on Ethical Conduct in Human Research*. Whilst you are free to discuss your participation in this study with Dr Jemma Venables from the research team (contactable on 07 3365 1258), if you would like to speak to an officer of the University not involved in the study, you may contact the Ethics Coordinator on 3365 3924 or email [humanethics@research.uq.edu.au](mailto:humanethics@research.uq.edu.au)

## PARTICIPANT CONSENT FORM: PRACTITIONER FOCUS GROUP

**Project Title:** Finding out about the ARROS Place Program:  
Supporting young people with cognitive disabilities  
and experiences of child protection &/or youth justice  
involvement

[Short title: Finding out about the ARROS Place  
Program]

**Researcher(s):** *Dr Jemma Venables, NMSW, UQ; Kathy Ellem, NMSW, UQ.*

**Ethical Approval Number:** 2021/HE002144

By signing below, I confirm that I have read and understood the “Participant Information Sheet” and in particular have noted that:

- I understand that my involvement in this research will involve participation in a focus group interview
- I understand that the focus group will be audio recorded if in-person; and audio and video recorded if conducted over Zoom
- I am required to keep the identity of other focus group participants and the content of focus group discussions made by other participants confidential
- I have had any questions answered to my satisfaction
- I understand the risks involved
- I understand that there will be no direct benefit to me from my participation in the research
- I understand that my participation in this research is voluntary and will not impact my relationship with my employer or The University of Queensland
- I understand that I can contact the research team with any additional questions
- I understand that I am free to withdraw at any time, without explanation and without penalty
- I understand I can withdraw any data collected from me if I make the request prior to the analysis of data and subsequent publication of results by contacting any member of the research team to discuss withdrawing from the study.
- I understand that I can contact the University of Queensland’s Ethics Coordinators on +617 3365 3924 or +617 3443 1656 or via email [humanethics@research.uq.edu.au](mailto:humanethics@research.uq.edu.au) if I have any concerns about the ethical conduct of the research

**I agree to participate in a focus group**

I would like to receive a summary report of the findings at the completion of the project

<b>Name:</b>			
<b>Signature:</b>		<b>Date:</b>	
<b>Send summary report to:</b> <i>(Email or post)</i>			



## Contact details

**Dr Jemma Venables**

T +61 7 3365 1258

E [jemma.venables@uq.edu.au](mailto:jemma.venables@uq.edu.au)

**Dr Kathy Ellem**

T +61 7 3346 9013

E [k.ellem@uq.edu.au](mailto:k.ellem@uq.edu.au)

CRICOS Provider 00025B