

A Home-Centred Approach to Support Children and Young People in Out-of-Home Care

Final Report, March 2026

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Government of South Australia
Department for Child Protection

Acknowledgement of Country

We acknowledge the Traditional Owners and Custodians of the lands on which we meet and work. We acknowledge that sovereignty has never been ceded. We pay our respects to First Nations Elders past, present and emerging and affirm our commitment to the ongoing work of reconciliation. We recognise the past atrocities against Aboriginal and Torres Strait Islander peoples of this land and that Australia was founded on the genocide and dispossession of First Nations people. We acknowledge that colonial structures and policies remain in place today and recognise the ongoing struggles of First Nations people in dismantling those structures.

Adapted from <https://acij.org.au/about-us/acknowledgement-of-country/>

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Report on research findings for ARC Linkage Project LP200200848 (A Home-Centred Approach to Support Children and Young People in State Care)

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Executive Summary

This report presents findings from the Australian Research Council Linkage Project, A Home-Centred Approach to Support Children and Young People in State Care, a collaboration between Flinders University, Department for Child Protection, Anglicare SA and Life Without Barriers. The research explored what home means for children and young people in Out-of-Home Care (OOHC) and how carers and workers are able to support and sustain home.

Drawing on interviews with 30 young people and 24 carers and workers across foster care, kinship care, residential care and Supported Independent Living Services (SILS), the research reveals that home mattered deeply, yet it was neither guaranteed nor simple. Home was ‘not a given but a creation’ (James, 2013, p. 326), an experience that was developed and altered over time and as relationships and OOHC contexts changed. Common elements described by young people across OOHC types included connecting with others (including pets), feeling emotionally and physically safe and having a space of one’s own. Carers’ and workers’ understandings of home aligned with those of young people and they were aware of the challenges to achieving and maintaining home. They saw home as a relational and practical achievement, requiring sustained effort and negotiation within institutional systems.

Key Findings

Foster Care

For young people, relationships were essential in creating a sense of home, supported by routines and familiar household practices. Felt safety and the ability to claim space were critical for young people, enabling retreat and connection on their own terms. In common with young people’s understandings, relationships were central to carers’ definitions of home. Whereas young people described home as an experience, carers emphasised their homemaking, that is, the deliberate cultivation of the elements of home: developing caring and supportive relationships, building young people’s sense of safety, belonging and being understood and encouraging shared activities. However, carers’ efforts at homemaking were often challenged by institutional processes that failed to account for and respond to the specificities of a young person’s needs. Carers struggled with limited or inaccurate information and negotiating institutional denial of their knowledge of the young person for whom they were caring.

Residential Care

In residential care, home was an idea that resonated for young people and their carers but was often unattainable due to the structures and constraints of the system. For young people, meaningful relationships were foundational to their understanding of home, as were stability, control, safety and personalised comfort. Certain elements of residential care could feel ‘home-like’, but these were limited to specific places and subject to the actions of other young people and the authority of carers. These constraints reflected the dual nature of residential care as a place of personal importance for young people and simultaneously an organisational setting governed by policies that eroded the elements of home. Residential care workers described clear limits to stability and personalised comfort and the possibility of control. They understood institutional processes as constraining their own and young people’s homemaking. Notably absent from workers’ discussions were extended considerations of the role of meaningful relationships.

Supported Independent Living Services (SILS)

As in other OOHC contexts, home was a resonant idea for young people in SILS. Young people were able to claim a space that reflected their autonomy and preferences for where, how and with whom they lived. However, their independence, while supported, created a challenging context in which to maintain home. Loneliness, feeling physically unsafe and the future withdrawal of support could destabilise a sense of home, even if it did not destroy it. Support workers were aware of these challenges and focused on responding to young people's specific needs and limited life skills to strengthen the possibility of a stable home into the future.

Home-Centred Principles

Based on the research findings, we suggest the following principles might usefully inform a home-centred approach to supporting young people in OOHC:

- Young people, carers and workers can be supported to create home together;
- Building young people's agency to engage in homemaking;
- Supporting the development of relationships of care and understanding, which are central to young people's experience of home;
- Taking seriously mundane activities as important in creating a sense of home;
- Offering space to young people for self-expression, belonging and a promise of safety;
- Supporting transition points to independence, creating opportunities for skill building and autonomy;
- Acknowledging carers' work and expertise in homemaking;
- Resourcing homemaking;
- Limiting the disruptive potential of institutional practices that erode carers' homemaking;
- Responding to young people's individual needs with trauma-informed, timely support; and
- Developing OOHC relationships based on trust and transparency.

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Introduction

Within the context of placement instability, complex needs and socio-economic challenges post-care, the concept of home offers a new tool for understanding and supporting young people in foster care, kinship care, residential care and transition care programs and those who care for them.

Prior to this research, the meaning and experience of home for young people living in OOHC had not been subject to sustained and dedicated consideration. Existing research has gestured to the potential significance of home, recognising that:

in common parlance, [young people in OOHC] were removed from homes, placed in homes (both foster homes and institutions) and left home. Most described a past in which they did not feel at home. Nonetheless, home mattered. (Natalier & Johnson, 2015).

However, there has been no extended investigation of the meaning and implications of home in the context of OOHC.

This project responded to this gap, guided by the research question: What does home mean to young people in OOHC? It aimed to:

- Determine how a focus on home might enhance young people's experiences in OOHC.
- Support carers to understand and respond to young people's home-referenced needs.
- Explore how the concept of home might inform the provision of OOHC.

The approach was informed by a psychosocial-material conceptualisation of home. Home has a physical dimension in its offer of shelter and in the objects located within it; this physical dimension also holds meanings, generated through relational, psychological and emotional dynamics (Mallett, 2004). Home is a place of important connections, comfort and belonging (Fehlberg et al., 2018), created and expressed through routines and ritual activities (Campo et al., 2020). Home is also often understood as separate and private from the 'public' world, a place in which one is not subject to the surveillance and demands of others (Dupuis & Thorns, 1998). Taken together, these elements constitute home as a site of dynamic relationships between a dwelling and people's experiences and interpretations of that space (Boccagni & Kusenbach, 2020).

The primarily positive elements of home are tempered through complex lived experiences. People can feel 'homelessness at home', experiencing a 'tension between the binary opposites of safety and risk, security and fear, privacy and invasion' (Wardhaugh 1999, p. 93). Home can be a site of both security and struggle as power, past and present traumas and disruptive external forces shape people's lived experiences. Thus, understanding home requires a recognition of uncertainty, conflict and negotiation.

The tensions of home have particular resonance in the experiences of young people in OOHC. Young people have limited say over their living arrangements and must negotiate unfamiliar spaces, relationships, routines and cultural practices (Biehal, 2014; Natalier & Johnson, 2015). They may lack stability and security: while most (87%) young people in OOHC will experience fewer than three placements over a two-year period (Australian Institute of Health and Welfare, 2025), in South Australia – the state in which this research is conducted – 1 in 8 (13.3%) had experienced more than ten placements in the period 2023-24 (Office of the Guardian for Children and Young People, 2025). Young people in residential care may face additional instability associated with staff turnover and the complex needs of other residents (Moore et al., 2018). For the approximately 20,000 Aboriginal and Torres Strait Islander Australian young people in OOHC (AIHW, 2025), such care can erode the connections to community and Country (Lawrie, 2024).

In exploring the complexity of home as a concept, our research encourages consideration of the diverse elements that contribute to young people’s wellbeing. A sense of home cannot by itself address the complex challenges experienced by young people in OOHC. It does however cast light on those aspects over which young people and their carers may assert some agency, ideally supported by the organisations responsible for young people’s care.

The Research

In October 2022, this research project was approved by Flinders University's Human Research Ethics Committee (Project ID 5200) and in April 2023 it was approved by the Aboriginal Human Research Ethics Committee (Project ID 04-22-1017). The Department for Child Protection (SA) officially approved the project in December 2022 (Ref: DCP-F2022024528).

In June 2023 Stage 1 of the project began, involving interviews with young people and carers. This first stage focused specifically on families connected with Life Without Barriers, Anglicare SA and young people and workers within residential care. In 2025, the project expanded to include Junction Australia to invite the voices of young people residing in SILS and the workers supporting them. This provided additional insights into an emergent model of support for young people as they transition out of OOHC. Overall, the research includes young people (n=30) and carers (n=24) across residential, kinship, foster care and SILS (See Table 1 and Appendix A).

Participant Recruitment

Partner organisations were invited to identify potential participants whose engagement in the research was unlikely to significantly disrupt their emotional wellbeing or placement. Young people in crisis, those who had recently experienced a change in placement and those in the process of actively reunifying with their birth families were not part of this study. Key workers from partner organisations provided information about the project to potential participants and passed on the contact details of interested people to the researchers. Researchers then contacted potential participants to confirm their interest, reiterating the voluntary nature of their involvement and their right to withdraw from the project at any time. All participants were made aware of the researchers’ responsibility to notify relevant authorities of any risk of harm to the young person and/or others. For their time, young people and carers were provided with a \$40 gift voucher. Residential care and SILS workers were not financially compensated as interviews took place during their regular work time.

Data Collection

The interviews with young people focused on exploring: how they defined home and in what contexts (past or present) they felt at home?; what supported them to feel at home?; how did the presence and absence of home impact upon their lives and wellbeing?; and recommendations on how to help young people in OOHC to feel at home. Young people were provided with art supplies and invited to create a picture of what home meant to them. This activity provided young people with a non-verbal option to express themselves and offered a form of parallel play to reduce pressure on young participants. With their permission, each of the young people's drawings was photographed by the researchers, allowing the young person to retain the original.

Interviews with carers and workers were designed to contextualise young people's accounts, with a focus on how they understood and responded to young people's needs for home; what helped and hindered their efforts at homemaking; and recommendations for how carers can support young people's sense of home.

Participants nominated their preferred interview location, whether in their home or residential care facility, at a community space, or at Flinders University. Almost all (n=33) interviews took place within family homes or residential care settings. Conducting the interviews within participants' homes offered researchers the opportunity to observe the dynamics within the home and the spaces described by young people and their carers. At the request of the participant, some interviews occurred over Teams (n=2), by phone (n=2), on university premises (n=3), or a community library (n=1). When interviewing families, where possible, two researchers would attend, one interviewing the carer/s while the other interviewed the young person/ people. All interviews were audio-recorded, unless declined by participant (n=2), in which instances notes were taken.

Sample Characteristics

As shown in Table 1, most young people interviewed were living in foster care or SILS

Table 1 Out-of-Home Care Types

	Children and Young People	Carers and Workers
Foster Care	11	15
Kinship Care	2	1
Residential Care	5	4
SILS	12	4
Total	30	24

Table 2 presents key sample demographics. An age range has been provided to maintain participant anonymity.

Table 2 Participant demographics

	Children and Young People	Carers and Workers
Age Range	7-19 years	25-69 years
<i>Gender</i>		
Female	18	19
Male	11	5
Genderfluid	1	-
<i>Other Characteristics</i>		
Aboriginal	7	1
LGBTIQ	2	-
Identifies as having a disability	2	-

Young People

The length of time young people had been in OOHC ranged from one to 17 years, with an average of just under eight and a half years. Time in the current placement ranged from two months to 11 years, with an average of just over four years for those in foster, kinship, or residential care, and six months for those in SILS (an average of two and a half years, overall). Only four young people were in their first and only placement. For the remainder of the sample, the number of placements ranged from one to approximately 12 with an average of 4.5 placements (three young people did not share this information). These are approximate figures based on the young person's or their carer's narrative history and are more likely to be underestimations than overestimations. Young people who described multiple placements had experienced a spectrum of placement types including respite, kinship, foster and residential care, with some referring to multiple respite placements over a short period of time.

Carers and Workers

Foster/kinship carers' time caring ranged from eight months to 15 years with an average of just over six years. Residential and SILS workers had been working in OOHC contexts from one to eight years with an average of just over three years.

Aboriginal Kinship Care

Initially, this project was designed to incorporate a specific focus on Aboriginal Kinship relationships and the cultural relevance of home as a concept. To support this, an Aboriginal Research Assistant was employed to provide feedback on the project and facilitate interviews with Aboriginal Kinship families. Additional support was obtained from the Aboriginal Kinship Steering Committee, and connections were established with Aboriginal Family Support Services, InComPro Aboriginal Association, and DCP. Despite these efforts, we were unable to recruit Aboriginal Kinship families to participate in this project.

Seven of the young people interviewed for this research identified as Aboriginal. However, each had been placed in non-Indigenous foster homes and/or were residing in SILS rather than Aboriginal kinship networks, as prioritised under the Aboriginal and Torres Strait Islander Child Placement Principles (Australian Institute of Health and Welfare, 2025). Further research is needed to explore how culturally specific definitions of home (Anderst et al., 2025) shape the experiences of Aboriginal young people in OOHC.

Findings

Foster Care

Young people and their carers highlighted the importance of relational elements of home. These relational elements were supported by feelings of belonging, generated through familiar household practices. Another key element identified both young people and carers was the importance of felt safety and security. Young people also described the ability to claim space they could retreat to and allowed them to engage with household members on their own terms.

Young People's Definitions of Home

For young people in foster care, caring relationships were foundational to their experiences of home. Also important were felt safety, shared activities and spaces they could claim as their own.

Caring Relationships

A loving and caring environment (Joel, 10 – 12 years old, current placement 11 years).

Caring relationships were at the centre of how young people defined home. These were relationships of support and love, explicitly or implicitly echoing ideals of family. For example, Stevie (13 – 15 years old, current placement one year) reflected:

Home to me is, like, having a family, one who cares, loves and supports you. And really, having somebody who is there by your side as well, is for me, as well, it's a big thing for home for me. Having someone, when there doesn't have to be many people, it can just be one person.

James (13 – 15 years old, current placement five years) described his current placement as home because:

*I'm kind of like, always comfortable here, if I have a problem I could talk to Mum and Dad about it ...
They're actively a replacement parent for me.*

For Sally (7-9 years old, current placement six years), a large heart, signifying care and love, was central to her depiction of home:



Kelly's (10 – 12 years old, current placement two years) understanding of home referenced similar feelings of support and care:

Well, you feel like you belong, and you have got things, people that you love and care about, and things that you like and that they will support you in it. You can be comfortable to talk to them about literally anything.

Sinead (13 – 15 years old, current placement two years) similarly valued being recognised and attended to as an individual:

She [carer] listens to me ... I actually get attention here.

Caring relationships arose through an immediate connection or, more commonly, developed over time through sustained effort particularly on the part of carers. June (13 -15 years, current placement six years) described the first scenario:

But with that first 3 months I moved in, I was very close with Dad because my sister was over with Mum. So, I, I shouldn't say this, but I do trust Dad a bit more than Mum with some things. Me and Dad would just connect on a different level, I should say.

Stevie's reflections, below, illustrated the possibility and value of both an immediate connection and a growing relationship over time. Stevie also contrasted their previous foster placement of seven years, which 'just didn't feel like home for me' with their relationship with their current carer – 'no matter where she lives has always felt like home for me':

I mean sometimes you meet the right people, and you get a really good connection with them but, that's the thing with [carer name], I felt it pretty much straight away. Lots of people are lucky and they get a really good connection with them. But I think it just depends on the person and the foster carer. [Later in the interview] And I think it just depends on the personality of the person. [carer name] is always just such an open and warm feeling where [old carer] just wasn't really.

Stevie suggested that regardless of an immediate sense of connection, understanding a young person as an individual was something that carers must deliberately pursue over time: a process led by a carer, ideally with a young person reciprocating:

I think just getting to know what things that they like and stuff like that. Just learn the little things can always be a lot helpful and easy, you can make like you know them at least a little bit. And you can grow that bond and relationship with time ... I think it's really good for the young person to learn about the foster carer as well though.

As such, relationships of recognition, acceptance and support were valuable in their own right and because they in turn helped young people experience household spaces and activities as home.

Felt Safety

A safe place, where we're looked after, protected by [carer] and our dog. (Billy, 10 – 12 years old, current placement six years)

The importance of needing to feel safe was also depicted in Billy's picture of his 'safe house':



For the young people in this research, home was a particular kind of safety, offering physical and emotional security. It was a refuge from unwanted or challenging interactions with other people and places. As Justin explained:

Justin: It should be safe for everyone and a loving environment and a place that you can call yours.

Q: That's it. So, when you say, 'call it yours' what do you mean by that?

Justin: Like there's school, you might sometimes not feel safe because there could be something happening or something. And like that's your problem. But this place, it's your place to feel safe. It's your place to feel loved and all of that.

For young people who remembered living in abusive or neglectful households, physical safety, achieved through the protection of foster carers, was a defining element of home. This was highlighted in Billy and Nathan's (13 – 15 years old, current placement six years) interview:

Q: And so, what are the things that you think that [carer] does to help make this place a home?

Nathan: Well, she has locked doors.

Q: Locked doors, that helps?

Nathan: Yeah. A gate.

Billy: She has a gate there.

Nathan: One thing we could influence: laser doors, but.

Q: Laser doors.

Billy: That'll be cool, we don't have them.

Q: What are laser doors, what would that look like?

Nathan: Just laser doors, like if anyone goes through, they get a small shock, and it sets an alarm.

Emotional and physical security were expressions of felt safety, an experience rather than an objective measure. Safety was created through carers' behaviours, often in the form of routine care (listening) or householding practices (locking the doors, installing a gate). For young people such behaviours were indicative of their carers' commitment to their wellbeing.

Doing Things Together

I like feeling like part of a family, sitting down at the table. (James)

The significance of seemingly mundane activities was also evident in young people's appreciation of householding practices, most commonly those shared with their carers and other household members. Young people understood them as expressions of care, signalling responsiveness to their needs and desires.

Like, [carer name] cooks for us, she buys clothes and stuff when we need them. Sometimes, every now and then, we don't even know until we see them on our bed. And she takes us to school every day. (Billy)

They've always, they've always treated me with respect. I know another case, some other really horrible things about foster carers, and I could never imagine my foster carers doing that, they're like Mum and Dad to me. They've always made sure I had somewhere to – always, I've always had my own room, they'd always cook me dinner. I didn't have to rely on [myself for] anything. When I first got my first job at [a fast-food restaurant], my Mum and Dad, they were the ones who'd take me to work. (Audrey 16 – 19 years old, most recent placement 16 years)

Kelly and Sally understood their carers' supplying play items as expressions of care and support that helped the placement feel like home:

Kelly: They, like, support you in a lot of things and if you need anything like a hobby, they will most likely get it, and they try and make things fun. Like, say the trampoline broke, they would get us a new one. They will let us do things that we really like to do.

Sally: They give me toys, and they make stuff. Well, they do presents at Christmas, and even at ... Easter.

Householding practices also contributed to a sense of home through building routines that assisted young people to feel confident in their day-to-day lives. Sadie (7 – 9 years old, current placement two years) explained:

So, when we get home, we unpack our bags, I do regulation in my bedroom sometimes, I do homework on Wednesday – or I do homework actually [at grandparents'] house. I go swimming on Wednesdays.

The examples offered by young people reflected how a carers' attentiveness to their day-to-day needs and desires helped them feel recognised and valued. Householding practices do not inherently hold this meaning but rather, they attained this significance over time. As young people recognised them as expressions of love they became an expression of home.

Claiming Space

Probably just having my own bedroom and having my own space, especially being a teenager, you need your own space in a family, that's something I have needed a lot of. (June)

A sense of one's own space was the fourth dimension of home. This included the ability to create a space that reflected young people's sense of self, familiarity with the places they lived and confidence and autonomy in using that space.

The importance of space and how it was used was elicited in Daphne's (7 – 9 years old, current placement one year) drawing showing a room with a desk to do her homework, a couch with cushions, table and place for her cat. At the centre of the drawing was a large picture of the beach, reflecting Daphne's appreciation of outdoor space.



'Your own space,' included somewhere explicitly set aside for a young person. Bedrooms were particularly important as a place to manage emotions and express oneself. For example, June's bedroom was a place of retreat, allowing her to manage big emotions and to be a teenager:

June: Probably just having my own bedroom and having my own space, especially being a teenager, you need your own space in a family, that's something I have needed a lot of.

Q: What is it about having your own space?

June: It just feels good to have my own space because then when I'm really – if something happens, I can go calm down and talk to someone about it if I wanted to. Or just chill out or just figure – do homework or talk to friends or something like that.

For James, autonomy over decorating and using his bedroom offered an opportunity to express his connections with friends and foster family in the present and over time:

Q: *And what have you done to make it yours?*

James: *Got my big name on a poster.*

Q: *How'd you do that?*

James: *A mate made it for me.*

Q: *Nice. What else about your room?*

James: *Just most of the stuff up on my wall, like other than the two baby posters that I have had up since I first came in. The gaming stuff, all that represents who I am and stuff. And all the sports equipment and stuff, represents what I like doing and what I enjoy with my spare time.*

Significant spaces extended beyond bedrooms into shared areas, where young people developed independence and agency in using space. This was particularly marked for young people who had not previously been allowed autonomy in their use of space, so that access to common areas could create a feeling of home. June explained:

Probably it's the layout of the house to be honest because it's more like an open style house, not like, not like half the wardrobes or half the kitchens locked up like as residential [care].

When young people felt familiar with the physical space and routines within it, home could be a site of retreat and comfort. Kelly felt this most keenly when returning from her friend's house:

When I've been away at a friend's house and then I come back and then it's like 'Oh, I'm home now, yes.' So, you're at home, and then you're not at your friend's house just not knowing where everything is basically, so that's always good.

In common with other dimensions of home, the importance of space highlighted the significance of often taken-for-granted elements of householding for young people. When offered autonomy in the context of caring relationships, young people claimed and used space to create home.

Foster Carers' Homemaking

Whereas young people described home as an experience, carers emphasised their homemaking, that is, the deliberate cultivation of home through building caring and supportive relationships, young people's sense of safety, belonging and being understood and shared activities. This work required responsiveness to young people's complex needs and managing institutional barriers that misrecognised those needs.

Relationships

Probably previously I just would have explained home as a physical place. Whereas now it's very much an emotional, person place. And more routine. The whole thing. (Jean)

Foster carers were clear that relationships were foundational to home. Tracy explicitly distinguished home from a physical structure, emphasising the importance of supportive relationships even when interactions with a young person were challenging:

To me, I would happily live in a tent on the side of the road with [family members], because I feel like we have got each other's back and that even on the hardest days we still all love each other. We're able to come back and apologise, reconnect, repair.

Josephine also distinguished between home as a place and the emotions and practices that created and expressed care, understanding and support for a young person:

So, I think, yeah, you've got the bricks and mortar side of things, but you've also got ... their [young person's name] feeling at ease, feeling comfortable, feeling that they can relax in that home.

Developing these relationships became a core strategy for creating the additional dimensions of home.

Felt Safety and Belonging

Home, I think, is a safe place to live. The place you feel comfortable ... going to rest, have peace of mind. I'd say, to me, that's the definition of home. (Donna)

Carers emphasised the importance of helping young people feel safe. This was a multi-dimensional idea, extending beyond physical safety to meet young people's 'physical, spiritual, mental, emotional' needs (Irene). Emotional safety was particularly emphasised by carers:

It should be a place where you're able to be yourself and have unconditional love. I guess, you know, a place where you'll make mistakes, but you're supported and you know people are – they have got your back and will help you through those mistakes. So, it's really about connection and safety, I think. (Carla)

Carers believed emotional safety was experienced through feeling loved and accepted even in the face of challenging behaviours. Belonging offered a sense of security:

I think home is – gives you a sense of belonging and safety. (Carla)

This belonging and emotional safety could be difficult to create and sustain. Carers described the importance of consistently reassuring the young person that they had 'a home here no matter what, and nothing they can do will destroy that' (Olivia). Debbie explained:

It's just now that he's not saying 'Oh, if I do something wrong am I going to go somewhere different?' He's stopped that, and that's only just recently ... But it's only within the last six months or so, he's stopped saying that.

In a context of multiple and disrupted placements, it took time for young people to trust they belonged with and would remain part of a family. To respond effectively to young people's fears, carers committed to developing an understanding of young people's specific characteristics, needs and desires.

Understanding

It's really just learning to be, I guess, an investigator ... to make it safe, rather than expecting, 'Well this is how we do things, you fit in.' (Kim)

The complexity of creating a sense of safety and belonging highlighted the necessity of understanding each young person as an individual and being responsive to their specific, often trauma-related, needs.

Understanding became particularly important as carers attempted to create a shared life that was responsive to perceived threats embedded in seemingly mundane activities and sensory experiences. Carers unpacked their assumptions about what makes a home as they and the young people navigated sometimes unexpected triggers. Kim described her attempts to 'match things', aligning a young person's comfort and sense of safety with patterns and places in the household. She recounted explaining to Sam, the young person in her care:

'You are not going to offend me or hurt my feelings by just letting me know when you smell something or taste something so I know, and then we can work that out.' Because yeah, it's really just learning to be, I guess, an investigator ... to make it safe, rather than expecting, 'Well this is how we do things, you fit in'. It was triggering too much, and then you're dealing with not very nice behaviours. It was easier to match things.

Once carers understood a young person's responses, they could adopt strategies to strengthen or re-establish a sense of home. For example, when Kim recognised signs that Sam was re-experiencing trauma, she could help him return to the present and reinforce that his current home was a 'safe place':

So, yeah, it was really just continually using words and working out if Sam said, 'them/they' – any words that indicated when he [Sam] was talking to me that there was more than one, I would stop, and I'd go, 'I need you to touch five things, and tell me what they are.' 'What?' 'Touch five things like I show you.' So we were in the bathroom, or in a garden, it would just be – or here, like table, chair. And then he'd suddenly go – and after the fifth one, he goes, 'Oh.' And I go, 'And where are you?' 'I'm at home.' 'And is home a safe place?' 'Yes, home's a safe place.'

The work of understanding and responding to young people's specific needs was not an abandonment of traditional notions of home as a place of belonging and safety built on important relationships. Instead, it reflected carers' responsiveness to the challenges young people may face in interpreting as safe the material and sensory elements of where they were living.

Doing Things Together

Predictable responses, routine, structure, and which obviously then supports them to feel at home and cared for and all those important things. (Olivia)

Domestic routines built on shared activities and time assisted carers to build connections with young people:

Home to me is family and doing things together, being kind and positive and, you know, just having a happy environment to, to live in, yeah, doing things together, trying to enjoy, you know, simple things as well as ... it's nice to do cooking together and watch a movie together and just every day, every day normal things. (Martha)

Tracy also described the regular routines they use to create home, seemingly small activities that were valued by the young person she cared for:

We do lots of family time; we eat at the table every night, and I didn't think it was such a big impact on anybody until Tim was asked, what's one of the things he enjoyed about living here? The first thing that he wrote was that we eat at the table together every night, and for me and my husband for us that just felt like something families do. (Tracy)

While seemingly mundane, shared activities were an important element of home, reinforcing connection and belonging. They created for young people and their carers a sense of stability and normality and offered the possibility of a sustained sense of home aligned with cultural ideals of a good family life.

Challenges to Foster Carers' Homemaking

Carers' efforts at homemaking were often challenged through institutional processes that failed to account for and respond to the specificities of a young person's needs. Carers struggled with limited or inaccurate information and negotiating others' rejection of their knowledge of the young person.

Limited or Inaccurate Information

And she [worker] said, you know loads of parents with children work full-time, that's fine. And these are fine. They keep their own bedrooms tidy, they can ride a bike, they can swim ... And in that 6 months found out they couldn't swim, they couldn't ride a bike. I learnt that by putting them in a pool. (Kim)

While by no means reflective of agency or government policy or expected practice, time pressures on workers and crisis placements meant that many carers described having to make a home with young people about whom they knew very little. For example, Tracy described how, in preparation for Tim's arrival, she and her husband were provided with 'three lines' of information, none of it accurate:

So, we were told that Tim slept through the night; that Tim didn't cry; didn't chuck tantrums; didn't, like, wasn't violent in any way. None of that – 24 hours after he walked through that door me and my husband thought we had done something wrong. He wasn't sleeping through the night; he had meltdowns, like throw-down, destroy-the-house meltdowns. He was laying into my husband and all of this, and so [support workers said] 'Oh he feels safe, that's why he's behaving that way.' And I went, 'That would have been handy to know.'

Failing to provide information was a barrier to homemaking when a young person was initially placed with carers – with limited knowledge their efforts could inadvertently trigger trauma responses or fail to resonate with a young person. Longer term, unavailable or incorrect information meant parents were managing behaviours that recurrently unmade the tentative sense of home they created.

Divergent Understandings of Young People's Needs

So, [organisation] are then saying to DCP look, you know things aren't matching up to what we have on file, what you are saying you have got on file, all the rest of it. So, for a long time there was lots of investigation to why. (Tracy)

Once a placement was established, carers often found that their understanding of a young person's needs differed from the conclusions of agency workers and associated professionals. Failure to acknowledge foster carers' knowledge could lead to a persistent disconnect between formal assessments and the realities of young people's needs and behaviours. For example, when asked how services could help in creating home Olivia reflected that, although there had been improvements over the past 12 months, previously:

I would have said for Department for Child Protection to listen and, you know, listen to the kids, listen to the carers, listen to everyone else in – because it was the whole care team, like it's the school, everything's on the same page, except Department for Child Protection wouldn't listen, and that was obviously highly infuriating.

Downplaying or ignoring carers' knowledge meant that requests for support were at risk of being dismissed through institutional processes that did not recognise the specificity of a young person's needs. For example, Kim had initially received advice directly from the National Disability Insurance Scheme that Nathan would be eligible for mental health support however as Nathan's legal guardian the Department for Child Protection refused to approve the application:

So yeah, we didn't even get past the application part, because they [DCP] just said no. So, they keep saying to me, 'The best support he can have is at home.' And I went, 'But I'm not a specialist in that area. And I'm winging it.'

In the absence of institutional acknowledgement and support, carers saw advocacy as a necessary part of their foster care responsibilities, rooted in their commitment to creating a home. Carla spoke of:

Trauma and attachment ... so they [young people] need people to guide them and advocate them and, and it's – home is, is a big part of that but it's also within the home, having people that understand them in order to be able to advocate for them with the other services that they all require to get through.

Carers rarely focused their concerns on individual social workers with whom they worked. Rather, they were very aware that the institutional processes, unable to capture the specificities of any given young person, created unintended barriers to the effective care foundational for homemaking.

Relationships with Biological Family

For the most part, carers supported young people remaining connected with parents, siblings and extended family. However, some believed such connections could erode a young person's sense of home in the short-term. Visits with biological family could disrupt a young person's sense of emotional safety. What Carla termed 'tough behaviours' required immediate and longer-term strategies to manage emotional distress in the moment and reinforce a sense of belonging in the foster placement. However, Carla also described how home in a foster placement also offered a 'grounding' space, providing physical and emotional safety and acceptance that enabled young people to make sense of their experiences:

I think that grounding, that grounding, to know that whatever is going on in those relationships with their family, their birth family, they, they're safe to come home from any contact, any interaction and whatever emotions and reactions that they have, this is their safe place to deal with that and makes sense of that.

Describing the challenges of visits with biological family is not to downplay the importance of these relationships but rather acknowledges the distress and confusion that can erode young people's sense of home and the intensive work required to reinforce home during these periods.

Summary

Foster carers' understandings of home emphasised relationships and defined an array of practices as building and expressing care and understanding. Underpinning this relational concept of home was the time taken to understand a young person's needs and implement home practices reflecting those needs. This homemaking could be complex because home did not simply emerge out of carers' sustained, young person-focused efforts. Their work in understanding and responding to a young person often required negotiations with external forces. These were sometimes unwelcome, in the instance of unsympathetic institutional practices and sometimes valued, in the instance of connections with biological families. For carers, home required thoughtful and deliberate development through managing psychological dynamics and external forces that held the potential to disrupt home.

Residential Care

In the residential care context, young people and workers defined home in ways that echoed but did not exactly reproduce definitions in foster care. Home was a familiar idea for young people but was often unattainable due to residential care practices. Thus, the absence of home was a strong theme across these interviews.

Home and its Absence for Young People

Meaningful relationships were foundational to young people's understanding of home, as were stability, control, safety and the opportunity to personalise space.

Meaningful Relationships

But home isn't just houses or places, it's also the people around you. (Kasey, 13 – 15 years old, current placement two months)

Young people described meaningful relationships in terms of love and care. These were often absent or unreliable, limited by the transience of people and placements in residential care accommodation. For example, Janelle (13 – 15 years old, current placement nine months) compared her experience of residential care with her ideal of home:

I don't know, I've just been moving around, and I don't think this home has been the right home for me ... And like, I don't feel loved and stuff like that at the moment ... Home means people who love me, who care about me, who will always be there for me and with a family. That's mostly home to me.

Young people's discussion of meaningful relationships and their absence typically focused on residential care workers, rather than peers. A minority of young people described feeling understood and supported by their workers. For example, Jim (16 - 19 years old, current placement two years) remembered:

We had a really good carer ... and he really taught me and my brother how to be a man and how to actually evolve ... he really taught us what it means to live.

More commonly, young people described interactions shaped by workers' compliance with organisational processes rather than emotional connection. Kylie (16 – 19 years old, current placement six months) contrasted the alienating professionalism of a worker with her desired relationship of mutual knowledge and respect:

Some carers I have found ... have too much of the sense of professionalism about them. It's terrible, I know I'm a client but don't make me feel like a client ... just also let yourself be comfortable. Let yourself, let your personality shine through. I mean maybe don't talk about anything heavy that's going on but tell us [if] you have a cat or a dog. Tell us you have a partner that you love so much. Tell us that you have kids that you love so much. Tell them – tell us that you have this weird yoghurt addiction and that's why you always have yoghurt in the fridge. Be honest with us ... let us in as well. Not only do you try to make the space for us [to] let you in, let us in as well.

In the absence of meaningful relationships with residential carers – and in addition to them – friends and community could offer the relationships that became important elements of home. Kasey explicitly linked these connections to a sense of home beyond her accommodation:

Like maybe a youth group or a sports team. It can also be your friends and family around you. Home isn't - home doesn't have to be with your family, home can also be my youth group or my care team.

However, residential care placed limits on young people's autonomy in building relationships beyond their accommodation. Young people's perception that they were always under surveillance limited their spontaneity, socialising and sense of control over their lives:

When it's like a sleepover ... I know you have to ask permission but when you say I have to get it approved it makes it sound really difficult. (Mary, 13 – 15 years old, current placement nine months)

My carers would call me every hour or so to check up on me ... If it was getting dark ... I think they're just worried and making sure that we're okay, but the kids' best thing is for space and time. Even if they're in a happy mood, they still need space and be able to go out and hang out with friends ... because most kids just want a family or just somewhere to live that's actually just like every other family. Being able to bring their friends over or stuff like that ... just kids hang out with their friends and being able to go more free space, free time. (Kasey)

In the absence of meaningful connections with other people, some young people had the opportunity to keep companion animals, although the possibility of pets varied across sites:

I do have two [animals] now; we're babysitting them for now ... they came from [an] abusive family so we're taking care of them ... but I feel like, [it] doesn't have to be people as a family, it's also animals ... as well. I love animals, so animals [are] like home to me, like dogs, cats, any animals. (Kasey)

Young people described meaningful relationships as a central element of home. However, creating and sustaining these connections could be at odds with organisational policies and residential care workers' practices. The importance and relative absence of meaningful relationships shaped and reflected additional dimensions of home.

Stability

I've been moving around different houses; this is probably my tenth home or my eleventh home. (Mary)

Young people understood home as a familiar place. This familiarity was built through stability: consistent and predictable care in a secure place with people they knew. Stability was typically absent as young people grappled with frequent changes in accommodation and the residential care workers supporting them. These changes were simultaneously destabilising and normalised as an inherent part of living in residential care.

Young people were particularly sensitive to the possibility of forced changes to their accommodation. Whitney (13 – 15 years old, current placement six months) reflected:

This is not a home ... Because if it's home you don't kick kids out ... Have to go to a dumb other home.

For some young people, the threat of being moved contributed to a sense of instability, irrespective of the likelihood of such a move. They were aware that moving to another OOHHC site meant learning how to inhabit new spaces and live with new people. They would be required to navigate unfamiliar rules and informal and sometimes unspoken expectations and routines.

Even when living in a placement for an extended period, familiarity was undermined by staff transience. Shift changes meant a rotating group of carers on any given day, and staff turnover led to new people arriving in young people's living spaces. When asked about how many people worked in her accommodation, Janelle could not easily enumerate them: there were, simply, 'A lot.' Staff changes eroded stability, introducing unfamiliar people with diverse styles of interacting, care and managing household practices.

In sum, living in residential care required young people to respond to almost-constant change in their daily lives. They often experienced this as confusing and destabilising, with the potential to undermine other dimensions of home.

Control

Being able to do stuff that I'd like to do and things like that as well. (Hugh, 8 – 10 years old, current placement nine months)

For young people, feeling at home was facilitated through a sense of control over their environments and decisions. However, this control often felt unattainable. The erosion of stability in how and with whom young people lived undermined their sense of control over their daily lives. Britney (16 – 19 years old, current placement nine months) described her frustrations when changeable or unreliable workers limited her ability to plan her days:

... it's hard to realise that you're going to have different carers every day because you would wake up not knowing who you were going to have the next day, or you'd wake up knowing, 'Oh yeah, I'm going to have this person' and then they don't rock up and then it's another person. It's just really stressful because you kind of plan your day out based on that.

Young people's desire for control was also stymied through rules and surveillance over mundane daily activities. For example, Amy's (16 – 19 years old, current placement 18 months) experience of having her activities managed and logged undermined the possibility of control which might offer some basis for feeling at home:

In residential care they fucking log everything so it doesn't really matter, nothing's going to feel like home if they're writing down what fucking time you took a shower and you're 14-years-old. They lock everything, they lock your food up after 9pm. It doesn't matter what your age is and what your opinions are because if there's a child that's in the house that is younger than you, they are going to [have] rules around that child as if I should have the same rules as a nine year, as a six year old boy when I'm a 14-year-old girl ... They'd [care workers] just write in the log book ... she [care worker] feels the need to tell them everything ... But none of this is homely. (Amy)

June (13 – 15 years old, current placement six years) contrasted her current foster home with her experiences in residential care:

In resi you wouldn't be allowed to get out of your room for something. And you would have to have people watching you in the bathroom, it's like, that's not the best thing ... Especially for, like, a teenager too. And in here the first night I spent here [in foster care] I was so confused ... I'm like, what the hell is this? I got to have a shower by myself. I got to watch electronics before I go to bed. I got to chill in my own room. I had my own space kind of thing.

June's comment suggests a simultaneous discomfort with surveillance and its normalisation to the point where autonomy in small decisions became notable and confusing – and then very much appreciated.

Safety

Home is a word that can be different meanings depending on the person. Home is a place where you feel like you belong and a safe place. (Kasey)

A safe environment was a core element of home for young people in residential care. Throughout the interviews, the importance of safety was explicit:

Home means safe place ... and a place where I can chill out (Ryan, 13 – 15 years old, current placement nine months)

I feel like saying that is kind of hard because everyone has different interpretations on what home is like. So, like some people, home might be actually a bad experience to them, so I think it shouldn't necessarily be home but maybe a place that feels safe. (Stella, 16 – 19 years old, current placement one month)

They're trying to make me safe here, so that's what they're doing ... some places they don't really make me feel as safe but this – the carers are lovely and they make me feel really safe here, that is a good thing. (Mary)

Safety was not taken for granted by young people in residential care. At times it was absent:

First one [residential care placement] I was placed with a 12-year-old girl and I completely didn't feel safe, she threatened to kill me. She did, like, smoked weed, she was doing drugs, she was going out. I mean she was sleeping with 30-year-old men, so I just completely didn't feel safe. (Audrey, 16 – 19 years old, current placement four months)

For others, safety was intermittent. It might be achieved sometimes in some spaces – notably bedrooms – and then threatened by the behaviours of other young people. Liz's (16 – 19 years old, current placement six months) experiences were a reminder of the importance of bedrooms as sites of safety and their limits when young people were required to share that space:

It [having your own room] is very important. I have never agreed with sharing a room with another resi kid – I've had to do it before – I don't agree with it because that child could become quite aggressive or just not a good person to be around.

Britney also described her bedroom as necessary ‘personal safe space’ and as key to feeling at home, even as it could be breached by uninvited others, threatening emotional security if not physical safety:

Your room is your number one spot. As soon as someone barges in and you're in there, you're feeling like someone is invading your personal space and stuff, and it's like, I don't agree with that stuff. I think regardless, kids need their personal safe space.

Young people often discussed safety with reference to its absence or corrosion by physical threats and breaches of physical boundaries. However, as Kasey's comments suggest, belonging was also an element of home. This might be understood as a type of emotional safety, created through – or absent from – meaningful relationships with others, as discussed earlier.

Claiming Space

Home is a house but it is also a feeling, and it is about comfort and happiness and safety. (Kylie)

When bedrooms became a locus of control, they offered young people the opportunity to express themselves and create a retreat from unsafe or alienating shared areas:

A lot of people when they're in resi, they make their room who they feel like they are, and I find that is what a lot of resi kids do. (Britney)

Having your own space is always good because you can decorate it the way you want. You can arrange the room however you want, and you can just make it your own space, and that's really important to a lot of other kids, not just myself. (Liz)

In my room I've got so many squishmallows [soft toys]. Not as much as my other friends but enough and everywhere I go [when moving placements] I bring them with me. They feel, they just have the sense of comfort to them that I don't think I could ever just leave or abandon. (Kylie)

Young people's opportunities to personalise their bedrooms to reflect their own sense of self and comfort contrasted with their capacity to make changes to shared living spaces. This was limited through organisational rules and few resources, so that care workers, not children, took the lead in creating a homey space. Angus (16 – 19 years old, current placement six months) explained:

She [worker] did attempt to build what I would call a home environment because she would always get tablemats in the colours I liked or she would get photos of me and get them printed and put up on the wall. ... she got a trampoline approved for the backyard and just things like that. To me that was – and getting me involved in cooking dinner ... it was not just the workers sitting in the carers' room eating their own dinner, it was the workers sitting down at my table eating dinner with me like, like home would be.

Angus's reflections highlight the importance of supporting the creation and use of space to reflect young people's preferences and identities. This couldn't be achieved by a person alone. It required residential care workers who learned about each young person and had the capacity to advocate for the resources required to translate that knowledge into a space ‘like home would be’.

Residential Care Workers' Definitions of Home and its Limits

Across the interviews, residential care workers described the limits to young people's stability, control and ability to claim their own space. They understood these limits to be rooted in institutional processes that constrained their own and young people's homemaking. Extended considerations of meaningful relationships in young people's lives were largely absent from their discussions.

Stability

It's having that consistent person around and sort of having that continuous structure and routine to your life. (Camille)

Residential care workers were aware of the challenges of changing accommodation and workers. The circumstances under which young people were moved varied across accommodation providers, with Camille contrasting her own approach with one that created greater instability in young people's lives:

Some areas move kids like hot potatoes. I prefer to try and work through the problems and see how we can best make it work and get the team to start managing some of the behaviours and giving the kids the tools to work through it.

Staffing approaches also differed across contexts:

So, some houses might have 20 staff going through [in a week], some other houses can be a bit more stable and reduce the amount of staff to maybe 10 they go through. (Camille)

Even in placements using a smaller and familiar roster of carers, the ability to build certainty and stability was limited. Zoe reflected on the differences between foster or kinship care and residential care:

[In foster care or kinship care] you've got the same person every day, you don't have someone you've never met before picking you up from school ... You know the expectations.

There may be differences in how young people's and staff mobility and change are limited or managed across residential care placements, but the organisation of residential care embedded a level of instability in the lives of young people, something that might be mitigated but cannot be completely avoided.

Control

Residential care workers described control as a central element of residential care accommodation. This control was conceptualised as the need to direct young people's actions, including their daily activities. Lee (a former residential care worker) reflected:

In [resi] space ... everything is led, like there's the carers who say, 'This is what we're going to cook, what we're going to do.'

Residential care workers were aware that such control can limit young people's autonomy and development. For example, Pat reflected on the difference between residential care and SILS with reference to a young person who had not attempted to personalise her space when she had the opportunity to do so:

She [young person] still felt like she was in a residential care, she never had a choice, she never had autonomy, she didn't even have a photo hanging on her wall ... I feel like in resi you do for, whereas in SILS you do with. So everything [in residential care] is you're doing it for them, you're cooking them dinner, you're cleaning their room for them, you're doing their laundry, you're driving them here there and everywhere, you're not teaching them any tangible skills ... you're keeping them safe and alive ... without allowing them to take any dignity of risk, to make choices whether it be good or whether it be bad.

In common with young people, residential care workers could be critical of the implications of control but understood it as a requirement of their role.

Safety

I wouldn't say any of them [young people] feel at home. I would say that we [workers] offer safe spaces for them. (Anne)

Residential care workers were clear that residential care should offer safety but were ambivalent about the connection between safety and home. Zoe and Jamie pointed to the limits of physical safety as a foundation for a sense of home if emotional security and meaningful relationships were not part of young people's experience:

I think it's just a safe space ... There are other residents in the house, they are not related to them. They have no connection with them as such but they are then forced to share this space with them, where they have to then either interact or they have to then learn to manage how they feel about the young people's behaviours ... and you can understand why they quite often will then abscond and not want to be at the placement because they are not getting their needs met a lot of the time, and don't have that sense of safety to come back to. (Zoe)

In resi you could be lying in bed, someone comes in, you don't have any privacy, no independence and someone you don't like – you're stuck with that person for the next eight hours or sometimes they sleep there. So not only are you in a place that's not your own with people you don't even know, half of them you don't like: this random is going to sleep under your roof, do you feel safe? I wouldn't. (Jamie)

Residential care workers saw the organisation of residential care as embedding flux and a lack of boundaries and control into young people's lives. Even when young people were physically safe, emotional security might not be available to them.

Claiming Space

[Home is] where you can go to like retreat and actually have that relaxation and feel that you can be comfortable there. (Zoe)

In common with young people, residential care workers linked personalised spaces to a feeling of home. They recognised that offering young people the opportunity to decorate rooms to reflect their preferences and history could contribute to a sense of belonging. As Zoe explained:

But they all look the same, they all have the same furniture and it's the stock standard style and that's what so many of our kids complain about, is, our whole house is from K-Mart and it's, well yeah it is, and I think that's sort of where we probably need to branch out a little bit more. The houses that I run, we've got a few young Aboriginal girls in there, and so we have got artwork up, like rugs and soft furnishings with artwork on that we've ordered online from elsewhere, so it's not the standard which you would get from K-Mart and Big W.

However, residential care workers' ability to facilitate personalisation could be limited. Zoe's experience was an exception; more commonly workers did not receive the resources and permissions needed for young people to decorate their space. Zoe continued:

I think that's where we are trying to have those battles at the moment within resi, is to be able to get furniture which isn't just from our facilities, and just something that the kids can actually pick out and have a bit of contribution to make them a bit more engaged at being at the house.

Similarly, Anne described the challenges of encouraging personal expression given the organisational constraints on decorating rooms:

We've got the one boy who's been there for years, his room is very definitely his room, he was just seven when he came in, so he's obviously grown up with, you know, accumulating, and his stuff is all there, it's all his ... But on the other hand, it's tricky because you have rules, and again, most homes do, but you know, rules, or if he wants something changed, or wants something on the walls, or off the walls, or it's not just something where you can go, oh yeah, we'll do that [then] we'll have to get maintenance.

In this instance, the complexity of making even minor changes was mitigated through the young person's length of tenure. Anne contrasted this example with another young person who had moved so often he made no attempt to personalise his space in even the most functional of ways:

One of the boys, he's not bothered at all for doing anything with his room, say he came in April and just about a month ago [October], his suitcases were still packed, you know, because we obviously said, 'You're going to unpack, you can do what you need, all the rest of it', and 'No, no, no...' (Anne).

These experiences again reflect the tensions between the need for a space in which young people can live in ways that are meaningful for them and the organisational limits of residential care.

Summary

For most of the young people living in residential care, home was an ideal but not something they experienced in their current accommodation. Elements of residential care could be home-like but these were limited to specific places and subject to the actions of other young people, the authority of residential care workers and organisational rules. These limits reflected contrasting meanings of residential care: a place of potential personal importance for young people and a site subject to institutionalised requirements that corroded the possibility of home.

Supported Independent Living Services (SILS)

Supported Independent Living Services (SILS) have operated in South Australia since 2021 to assist young people aged 16–17 in OOHC as they approach adulthood. Developed to address the ‘care cliff’ experienced when supports are withdrawn at age 18 (Mendes & McCurdy, 2020, McDowall, 2020), SILS aim to reduce risks such as homelessness, mental ill-health, financial hardship and involvement in the criminal justice system. State Government tenders SILS to NGOs, which provide housing—often ex-housing trust or community housing—and tailored support hours until young people turn 18 years old. At this point, formal supports cease but young people can remain in the property until 25 years old if tenancy conditions are met, with limited post-OOHC support available for some. One NGO also offers a transitional tiny homes community for a year to help young people transition from residential care to longer-term housing.

What Home Means for Young People Living in SILS

Young people in SILS defined home in ways that aligned with the understandings of those in foster care and residential care, but emphasised connection and autonomy. SILS offered young people the agency and opportunities for homemaking, however young people also described challenges that threatened the possibility of sustaining home over the longer-term.

Connection

It never really felt like home at residential care 'cause you couldn't have animals, and I've always needed a cat. (Natalie, 16 – 19 years old, current placement one month)

In SILS, young people were often living by themselves or with one other person. The possibilities of building meaningful relationships within their households were thus limited. In these circumstances, young people often sought community beyond their immediate living environment. For example, Angus (16 – 19 years old, current placement six months) made friends with young people in a nearby community to counter his loneliness:

I expected my family to visit a lot more often when I moved into independent living ... so when that didn't happen, I thought, maybe I'll take these workers up on their offer because I was offered multiple times to come around to [the community] ... and eventually I ended up clicking and now to build home, I invite most of them around once a fortnight every Friday or every other Friday to my house and we'll have a movie night ... And I find that that builds a stable home because I have those friends coming around and just sitting down with me, playing these board games, watching a movie and we're all just having fun and good lives.

Pets were particularly important for young people in SILS. Of the twelve SILS residents interviewed, six had a pet of some kind. For some like Hamish (16 – 19 years old, current placement two years), getting a pet was their priority – he adopted the first of multiple cats on his second day of tenure. For Indy (16 – 19 years old, current placement two months), a cat was the impetus to create and value her home:

I honestly wouldn't give two shits as I do about [home] if I didn't have [cat] because it's not only my place, it's his place too. And, honestly, I would recommend every person to have a cat – have a pet because it told – it showed me, like, how to be kind and how to look after, like – because no-one was there for me and I had to teach myself. And I've got this little thing which I got a month old, and he didn't have anyone, and he needed someone to rely on, and then you – it's kind of like healing, you know? Because no-one could help me, but I can help him.

Young people in OOHC often long to live independently, with the autonomy and control this implies. However, the reality could include loneliness and isolation, undermining a sense of home. In these contexts, connections not typically understood as constitutive of home – people living outside of the household, companion animals – allowed young people to invest meaning where they lived.

Autonomy

It's pretty much freedom, is the easiest way to explain it. (Courtney, 17 – 19 years old, current placement six months)

Young people living in SILS contrasted their ability to be themselves and order their life and space in ways that felt right to them, with the surveillance and control of residential care. As such, home was created by young people engaging in mundane activities on their own terms:

But also knowing that I can wake up in the morning and have a safe roof over my head, not having some youth worker wake me up, that's my own responsibility now. So, if I miss something, that's completely on me. And also knowing that I can just walk out to the lounge room, sit down, watch some TV, look at the photos on the walls. Just cook something in the deep fryer which I was not allowed to have in residential care. (Angus)

I've got my own room, but I can do what I want in the house without having it all logged ... Be ourselves and not have to worry about a curfew or SAPOL (South Australian Police). (Courtney)

Young people explicitly noted the importance of deciding who they interacted with and the tenor of those interactions. This control offered the possibility of retreat and safety that are defining elements of home:

It's about having a comfortable place to be able to grateful for where you are, and to be able to enjoy your space, and not feel like you're being interrupted by other people that you don't want to have around you, and to feel very safe and sound in where you are. (Amy, 16 – 19 years old, current placement 18 months)

I have to know how to set those boundaries for people. So that makes it a lot more homely as well for me, when I know I can set boundaries for people and go, 'No this is my house, get out if you don't like it.' (Angus)

Autonomy extended to how young people organised their space. While essential elements like having their own bed and couch were important, it was the personal items that young people most connected with home. For Michael (16 – 19 years old, current placement two months), the opportunity to choose items reflecting his preferences and identity was particularly important for creating a sense of home:

Michael: First thing we did, we went shopping for the furniture, obviously, and I obviously got to pick out the furniture, all that, made it like really personalised, and I feel like that made it feel a lot like home as well, because I was able to choose and not just have a pre-furnished and boring apartment – not apartment but a house, yeah.

Q: Yeah. And what kinds of things were important to you when you were doing that?

Michael: For me, personally, it was posters, photo frames and little, a little coffee desk I got with slots where I can put photos as well.

Michael's description of his posters, photo frames and desk echoed other young people's appreciation for designing their accommodation as they wished, without requiring permission. For Indy, the 'numb feeling' associated with moving to new accommodation receded when she was able to make the space hers with personal belongings:

Because I've moved around so much, it's like kind of like numb feeling, like I just go to a new – I'm moving to a new place, kind of settle in, and then when I settle in, I'm at home. So, yeah, no, maybe it took like a month for me to settle in. I – as soon as I got my paintings up and my decorations up and, you know, made each room have, like, its own little vibe and character, I finally felt at home, really.

Britney (16 - 19 years old, current placement nine months), too, spoke of the emotional power of small items - 'bits and bobs' - that reflected her identity and marked the space as hers:

Supporting my favourite AFL team and going ahead and putting photos of my friends, my polaroid photos of my friends and family up on the wall because seeing them makes me happy, or going ahead and sticking with a colour theme because certain colours lighten up my mood. I think for me those physical items were stuff that I – how would I explain it? It's more just like little bits and bobs of stuff, like stuff that made me feel happy.

In SILS, the absence of surveillance that had been normalised in residential care offered young people the autonomy to create a space and a way of living that aligned with their desires and needs and helped them feel at home.

Challenges to Making and Sustaining Home

SILS was a welcome opportunity to create a home unconstrained by the instability and lack of control that had defined residential care for the young people we interviewed. However, the young people also described challenges in their move to independent living. Loneliness, feeling unsafe and the impending withdrawal of support could be barriers to a sustained experience of home.

Loneliness

I hate being alone. (Audrey, 16 - 19 years old, current placement four months)

Moving out of OOHHC could be attended by loneliness even when young people had made few meaningful and safe relationships in residential care. This loneliness was intensified when young people were disengaged from education and employment, further reducing their opportunities to meet people. This isolation, combined with their experiences leading up to and while in OOHHC, made it difficult for young people to connect with others:

What I felt like when I was moving in here, I was scared to be by myself, I reckon. I think just given that I was always known as to be the lonely child or stick-to-myself child, I think just realising that whole issue, like adulthood's actually harder than I think it is. I think I started to realise like shit, it gets lonely and stuff.
(Britney)

Loneliness did not prevent SILS accommodation feeling like home, but it could make it more difficult for young people to create and sustain home. Home was a place where connections felt meaningful and physical and emotional boundaries were respected, but these experiences were not always easily created, even in contexts of young people's choosing.

Felt safety

Supported independent living kind of misses out on the support bit. (Kylie, 16 - 19 years old, current placement six months)

Being alone could feed young people's fears about their safety. These fears were informed by their past experiences in unsafe environments and security concerns in their current housing. In response, Britney described rigging up noise alarms to feel safer in the sometimes-chaotic area in which she lived. Indy's reflections demonstrated how past experiences may result in ongoing vigilance and diminished capacity to feel truly 'at home' even within a 'safer' environment:

One of the times you're most vulnerable is when you're sleeping, and that's when I'm sleeping, I'm tired. I also – because of all the stuff that happened to me, my eyes play tricks on me half the time and I think I see things and I – and then I look again and ... gone. So, it just was, like, nerve-racking.

In light of these concerns, young people sometimes needed reassurance and practical support. On her second night of independent living, someone broke into the unit Kylie shared with another young person. They sought additional support as they attempted to rebuild their sense of safety, but this was denied:

And after that we asked, because it was just two girls living here – it's a three bedroom house – we asked if a staff member could just stay the night for a week or so, so that we can regain trust in the fact that the house is safe and that, they just said no, we kind of just had to get used to it ourselves because that's independent living. Sometimes I do find that at times independent living, specifically supported independent living, kind of misses out on the support bit. It's a hit or a miss, it depends on the staff members, how much rapport you've built with them.

In common with feeling lonely, feeling unsafe did not necessarily translate to an absence of home. But these experiences were a reminder that for young people with few resources and limited prior experiences of home, supports may necessary to feel safe where they live and to buttress their sense of home.

Impending Loss of Support

I'm scared. (Audrey)

The likely withdrawal of support worker assistance when young people reached 18 years old was a frightening prospect for young people who lacked confidence in their independent living skills. Even when young people had been given opportunities to develop such skills while in OOHC, the necessity of consistent householding could be particularly challenging once they moved into SILS. Decorating a house was a necessary step in creating a home, but so too was the need to maintain where they lived. Kylie was attempting to 'wire that into my brain':

And so next week, so due to my struggling to maintain a house, I can clean, don't get me wrong, it's just I really struggle with keeping it clean. So next week I actually got some cleaning appointments to help start trying to, I guess, wire that into my brain. I'm very excited about it. They're very helpful but in the start, they didn't feel as helpful because I guess that relationship just wasn't there.

Developing householding skills solved the immediate problem of how to maintain a home but it could not necessarily address the emotional implications of truly independent living. Young people spoke of feeling 'stressed' and 'scared' in the lead up to turning 18 and losing worker support. For example, Michael recognised the need for his impending transition, but the loss of support felt destabilising, even as he would continue to live in a place that felt like home:

Michael: So, I get to live in the place that I've lived at now up until I'm 25, but with SILS, the support cuts off when I become 18 years of age because I'm not under care of the Minister anymore, which is where most of it comes from, because through SILS I get recommended through my DCP case worker and that's how I go into SILS, and when I don't have a case worker anymore, kind of like, yeah.

Q: How are you feeling about that transition?

Michael: A little bit stressed but it's also like I can't be in SILS or under care forever, so, it's just taking a little bit of time to adjust, that's all, I think.

Similarly, Audrey spoke of how supports would withdraw once she turned 18, soon after the interview:

Audrey: No, the only thing that will change is I won't have [my case workers], I won't have them. So, I'll be independent.

Q: So that's in a couple of weeks?

Audrey: Yeah.

Q: How do you feel about that?

Audrey: I'm scared.

These fears will not necessarily translate to young people's failure to live independently, retain their accommodation and sustain their sense of home. However, they are a reminder of the potential for emotions to trouble a sense of home, even when tenure is stable.

Supporting Young People's Homemaking

SILS workers understood the importance of home for the young people with whom they worked. They were also very aware of the challenges young people faced in making and maintaining home. Their primary concern was the steep learning curve young people faced as they left residential care to live independently. To address this, SILS workers described two strategies: understanding young people's pasts and their present needs and respecting young people's desire for autonomy. SILS workers were concerned that even with these efforts, many young people would struggle to live independently when supports were withdrawn at age 18, implicitly undermining the sustainability of home.

Understanding Young People

Home is something we would say is far away from them because they've moved to different homes where they think it's going to be home forever, and it's never been. (Leigh)

Most young people move into SILS from a residential care placement. SILS workers were aware that this trajectory meant that many 'don't have a concept of what a safe home is' (Jamie):

So, until they reach us, they've never had that ability [to create a safe home]. So, the window that we get them in is their opportunity to work out what feels like a safe home for them and what that looks like. But that's a thing that they have to come up with on their own, that's not something that is easily demonstrated because it's different for everybody, I think.

Recognising the common absence of home informed SILS workers' support for young people. For example, Leigh highlighted the importance of trauma-informed practice in recognising what young people desire in a home and how those desires can be respected:

So, in this place we understand the trauma and what can we do to avoid the trauma aspect of it. So that's why the gate is open, there's freedom and also, they have their own homes; we don't just go in, we have to make attempts, make a call before we go into their homes. So it's just more housing in a way that before you go into someone's house you have to call if they are home, if they are around ... so the trauma aspect is top notch and then before we work our way down to the basic needs of the young person.

Leigh's comments recognised young people's need for autonomy and control over their living space. Pat suggested that time was also important. Accommodation will not immediately be a home: young people need to develop autonomy, confidence and control over their space, even when they have immediately decorated it to reflect their preferences:

They take pride in their space. A lot of my young people you'll see the change, and it may not be instant, it may be slowly over the time as they start to settle in more. So, they'll move in, they'll put all their stuff out and then it's just not a home; you could walk into that house, and you can just feel it's not a home yet. And then one month has passed, two months has passed, they've got a plant now or they've hung up a poster. ... But then you start to notice a difference and you start to notice a difference in their comfort level of being in the house, they're just not walking around like robots anymore going I can't touch this or I might break this, this is not my house; they're actually starting to show comfort, they'll slam a cupboard door or something miniscule like that and you can be like yes, you're comfortable now, I can see the change in you.

In another example, Pat spoke of a young person who previously had slept downstairs on a used couch rather than in her bedroom but once she moved to a house of her choosing:

She bought herself a brand-new couch and she also made her bed for the first time in six months, and she's now started sleeping in her bedroom, so little things like that. When you get to know your young person you see the changes and you can also visually see the changes in their homes as well, they become comfortable, they realise that I'm not going to get bounced around again, this is mine, and this is mine until I'm 25.

These accounts suggest that many of the elements of home described in previous sections (control, safety, stability, personalised space) were not sufficient to create a sense of home. Time – and implicitly, beginning to address past traumas – allowed young people to feel these elements as defining features of their living situation through which a sense of home may develop.

Respecting Young People's Desire for Autonomy

She never had a choice, she never had autonomy. (Meg)

SILS workers understood that SILS offered young people much desired autonomy. They recognised that autonomy was rooted in choice and extended beyond merely offering options. Young people needed to feel that the choices they made aligned with their sense of what was right for them; it was more than the best available option. Pat remembered a young person whose initial placement in SILS accommodation not of her choosing diminished their capacity to create home:

Because she was so depressed and it came back from being that she still felt like she was in a residential care, she never had a choice, she never had autonomy, she didn't even have a photo hanging on her wall.

When the young person could choose where she lived, she was able to engage in homemaking:

And we moved her into a new property, and this whole different personality's come out of her. She's vibrant, she's got pictures on her walls, she's decorated her kitchen, she's decorated her house.

Similarly, SILS workers were aware that young people may feel lonely but did not attempt to force connections:

So, it really does depend, and that's why, again, as we've said – we've said it multiple times – but they have the choice. We're always happy to support and encourage those connections, but they have the ability to say no and we're not going to force those connections on them. (Jamie)

Taking autonomy seriously required SILS workers to shift from 'doing for' a young people (as was common in residential care) to 'doing with' young people:

And also, in SILS the program it's not the coaches who run the program, it's the kids who lead the programs: what do they want?; what is their goals?; what do they want to achieve?; what do they want to do? So, we guide the program and they lead. In [resi] space they have – everything is lead, like there's the carers who say this is what we're going to cook, what we're going to do but over here the kids lead the program. (Leigh)

Recognising autonomy extended to supporting young people when they engaged in what SILS workers perceived to be risky behaviours:

[In residential care] you're keeping them safe and alive and in a bubble without allowing them to take any dignity of risk to make choices, whether it be good or whether it be bad. Whereas in SILS: 'you want to do that, okay you can do, that but you're going to find out the real-life consequences of that action and once you have found out those consequences then I'm here to chat.' You're still trying to keep them safe but you're allowing them that dignity of risk, to take those risk-taking behaviours and do that stupid shit that they've never been able to do before. (Pat)

This approach shifted definitions of what workers considered appropriate. Pat reflected that strict definitions of acceptable behaviour were not as relevant in SILS, where the aim was to support young people to develop decision making and life skills:

In resi care [they] sit in the black and white, we [SILS] sit in the grey.

These different contexts also reshaped the tenor of relationships between workers and young people. In residential care:

You're the consequence [for the young person when they make mistakes; in SILS] you become a safe person that they know is not going to call the police on them or throw them out their house because they yelled at you. (Jamie)

So, they know if they make mistakes and they come back to us and tell us, 'This is what I did', and we don't judge them on what they did, we help them to understand this is the consequences, this is what's going to happen ... it's just more like we're trying to manage it with them, to work alongside with them on that. (Leigh)

Such comments suggest that the relationships unavailable to young people in residential care were more likely to be developed in SILS, where different staffing processes and understandings of professional practice facilitated personal connection.

Respecting young people's desire for autonomy extended beyond their homemaking to an array of decisions that were not self-evidently supporting young people's sense of home. Drawing together these reflections was the recognition that SILS offered young people an opportunity to create a way of living that aligned with their own understanding of what was most appropriate for them.

Developing Independent Living Skills

The reality is that these young people are forced into adulthood at 18. (Pat)

SILS workers were aware that young people's desire for autonomy needed to be balanced against limited basic living skills – limits young people themselves acknowledged. Most of the time SILS workers spent with young people was focused on developing the knowledge they needed to live without support. Jamie explained:

Typically, we get them for a window of two years at best, sometimes it can only be six months, so it's what can we scaffold for them so that when they don't have our support anymore they can still manage.

This work was not explicitly referenced to home but supported young people to maintain where they lived and retain their accommodation – and the possibility of home – into the future:

So, at the moment the basics are understanding budgets, understanding finances, understanding options around food and healthy eating, transport services, education and what their options can look like, understanding government supports as well, what they can be enrolled in, what they can help themselves through. That sort of thing is the aim, but we also try and focus on what their own goals are. (Jamie)

To understand how house inspections happen in the real world, so how can we help them to build onto the house inspection, how to pay rent, to understand that you've got to pay rent on time. So, this is the area that we keep in check for them to know. Yeah, it's a home but you have to understand the practical of having to live in a home. (Leigh)

Summary

As in other OOHHC contexts, home was a resonant idea for young people living in SILS. Its presence could also feel tenuous. Young people were able to create a space that reflected their autonomy and preferences for where, how and with whom they lived. However, their independence, while supported, could be part of a challenging context in which to maintain home. Loneliness, feeling physically unsafe and the future withdrawal of support could destabilise young people's sense of home, even if it did not destroy it. SILS workers were aware of these challenges and focused on responding to young people's specific needs and general lack of life skills to buttress the possibility of a stable home into the future.

Discussion

Across all forms of OOHC, home was ‘not a given but a creation’ (James, 2013, p. 326), an experience that was developed and altered over time as relationships and OOHC contexts and young people’s understanding of their lives and needs changed. There were, however, common elements shared across OOHC types (see Table 3, below). For young people, connecting with others was foundational to a sense of home. Feeling emotionally and physically safe was also important, as was having a space of one’s own. Carers’ and workers’ understandings of home aligned with those of young people, but they were more aware of the barriers to achieving home, linking these to OOHC systems and processes shaping everyday life of young people and those who cared for them.

Table 3 Elements of Home Across Care Settings

	Foster Care		Residential Care		Supported Independent Living Services	
	Young People	Carers	Young People	Workers	Young People	Workers
Connection						
Understanding						
Felt Safety						
Claiming Space						
Doing Things Together						
Stability						
Autonomy						
Control						
Independent Living Skills						

Creating Home

Connection

Relationships were foundational to young people's experiences of home. They offered emotional and material support and were a lens through which mundane householding practices and uses of space could be viewed as expressions of care and signifiers of home.

Connection between foster carers and young people was a process of learning about and responding to each person as an individual. Young people's examples of what mattered to them – new clothing, sharing dinner, hobby supplies, choice in how they spend their time – suggested that 'attentiveness in ways that might seem mundane to adults' (Campo et al., 2020, p. 315) is central to the experience of home. This attentiveness was recognised by young people as a carer's responsiveness to their specific needs and desires, an implicit message that their individuality was recognised and valued. Thus, seemingly mundane acts could facilitate emotional belonging.

Carers more commonly described deliberate efforts to build relationships with young people, but there were also instances of young people seeking points of connection with carers. In both scenarios, young people were aware of the importance of their relationships with the people who cared for them, a reflection that young people 'do not simply experience relationships with significant others: they manage and respond to relationships in order to define home or protect their sense of home or seek alternative homes' (Natalier & Fehlberg, 2015, p. 17-18).

Young people living in residential care also described the importance of relationships with others, but in their interviews emphasised its absence. They aspired to belong; rarely, however, was residential care a place where young people felt cared for. The high turnover of both staff and young people made it difficult to build connections. There were examples of residential care workers seeking to understand and support young people but consistently attaining and acting on this recognition was rare, so that young people often felt disconnected and invalidated. While desiring emotional intimacy with workers, young people also acknowledged this was unlikely, echoing prior studies that have shown young people did not conceive of affect and love as part of the role of residential care workers (Côté & Clément, 2022). Nonetheless these connections were missed, particularly when no others existed in young people's lives. Perhaps reflecting the consequences of staffing and the normalising of young people's transience, residential care workers did not describe relationships as a crucial element of home for young people, emphasising instead safety and some autonomy in how they used space.

Young people living in SILS also described the significance of relationships in their lives. The relative autonomy accorded to these young people expanded their opportunities to connect with those who mattered to them on their own terms and timeline and avoid those with whom they felt uncomfortable or unsafe. Staffing and practice frameworks enabled SILS workers to become a stable presence in young people's lives, and workers deliberately built relationships based on understanding, respect and recognition of young people's autonomy. Nonetheless, young people also described loneliness, often living in situations where they knew very few people. They were also concerned that workers would no longer be formally and reliably part of their lives once they turned 18 and support was withdrawn. These difficulties suggested that home was not as stable as it first seemed to be.

Understanding

Associated with the importance of relationships was the necessity of understanding. Foster carers and SILS workers understood young people as individuals and emphasised responding to young people's specific challenges and desires. This understanding facilitated shared activities, routines and spaces that buttressed the feelings of safety and belonging that contributed to young people's sense of home.

Understanding was particularly important for foster carers who were supporting young people living with trauma on a daily basis. They described identifying and interpreting signs of trauma as a process of learning, focused on circumventing or immediately addressing a young person's emotional distress. Failing to do so could lead to immediate and longer-term disruptions to young people's wellbeing, eroding a sense of home for those who lived in the household. SILS workers also emphasised the importance of understanding young people. However, because they did not live with young people and were aiming to develop their independence, understanding was not the continuous emotionally and intellectually intensive process it was for foster carers.

Residential care workers had fewer opportunities to understand young people as individuals. Rosters and a high turnover of staff limited personal connections, and practices of logging behaviours and movement left young people feeling under surveillance rather than recognised and valued.

Felt Safety

Feeling emotionally and physically safe was part of young people's definitions of home in all three OOHIC contexts. However, the possibility of felt safety varied across placement types, with residential care notable for its absence.

For young people in foster care, home was a haven, protecting them from uncertainties beyond the household and physical harm by external others. Foster carers supported young people to become accustomed to an unfamiliar environment and emphasised the necessity of emotional safety and a sense of belonging – something that was implicit in young people's descriptions of home. As with building relationships and understanding, felt safety took time and carers' commitment to reassuring young people that they were accepted and valued, and this placement would remain their home 'no matter what'.

Young people in residential care described safety as an important element of home but it was not something they typically or consistently experienced. Residential care workers focused on physical safety, also acknowledging such safety could be limited by other young people's threatening behaviours and the presence of those with whom a young person felt no connection or disliked. Ultimately, the transience and lack of choice structuring life in residential care eroded the lived experience of safety, even when challenging behaviours of other residents were managed.

Feeling safe helped young people in SILS feel at home. However, they also described feeling insecure as they learned to live without a consistent adult presence. Fears about safety could reflect the ongoing effects of previous unsafe environments and immediate security concerns about their current housing. To manage their fears, young people focused on physical security. SILS workers recognised that young people moving into SILS might not 'have a concept of what a safe home is' (Pat). Their support centred on physical safety, including helping a young person to determine how they wanted to use their house and who would be allowed into it.

Claiming Space

Claiming space was a key element of home for young people across foster care, residential care and SILS. However, young people's capacity to claim space differed markedly across OOHC settings, reflecting contrasting levels of agency and comfort, with residential care again offering particular challenges.

The importance of one's own space echoed earlier conclusions that control is a crucial element of home (Dupuis & Thorns, 1998; Natalier & Johnson, 2015). In the present study, young people placed less emphasis on having charge over where they lived and more on their agency to use and shape spaces in ways that engendered comfort through familiarity and self-expression. In often modest and mundane ways, claimed spaces built young people's feelings of home and reflected their belonging within it.

Bedrooms in particular held a vital role in offering young people a space in which to develop a sense of home. In foster care, bedrooms allowed a young person to retreat and choose when and how they engaged with the rest of the household. Personal possessions were also concentrated in bedrooms – accumulated over time, these could strengthen a young person's sense of stability, connection and identity (Campo et al., 2020). Foster carers did not explicitly acknowledge the importance of space in young people's definitions of home, but their facilitation of young people's decorating bedrooms and using the whole house and garden in ways that were comfortable for them, suggested an appreciation of its significance.

In residential care, a young person's room was often their only sanctuary, a space they would withdraw to, to avoid the often-hectic dynamics of other residents and care workers. While bedrooms might be 'your number one spot' (Britney), their possibilities as a retreat were limited by the potential that someone would come into a space uninvited. Residential care workers also reflected on the difficulty of personalising spaces, where uniform furniture and wall art could feel alienating. Institutional constraints on even minor changes meant that the possibilities of buttressing home through personalising physical surrounds faded.

Young people living in SILS most consistently and explicitly described expanding their expression and use of space beyond their bedroom. Given most had transitioned directly from residential care, the role of personal belongings and personal expression was particularly important. Through the Transition to Independence Allowance, young people in SILS had the freedom and economic resources to create their own version of home, often for the first time. Here, personal items enabled them to assert their identity (posters, special interests), feel connected (photos and mementos) and improve mood through chosen colours and themes.

Shared Activities

Wright and Collings (2025) have described familiar household practices as 'small acts of belonging', facilitating the emotional connection and functional belonging that embeds young people within their households. This was particularly important and most obviously available for young people in foster care. Often mundane activities helped 'to create and sustain [young people's] perceptions that they belonged to, and would remain in, their foster families' (Biehal, 2014, p. 964). The activities themselves did not hold inherent significance – their connection with home was the outcome of sustained relational work on the part of carers.

Within residential care, young people did not discuss the value of familiar and shared practices. A changing roster of residential care workers made it difficult to provide a consistent routine and activities that reflected the interests of young people; young people valued memories of times when this happened. Other, often short-term, residents also made it difficult to find points of connection and opportunities for young people to do things together. Some residential care workers spoke of attempts to implement shared activities or routines but noted that this was dependent on others following suite. It was unsurprising that neither young people nor workers emphasised doing things together as an element of home.

Doing things with others was not a strong theme across the interviews with young people in SILS. However, the mundane activities described in other care contexts were important here. They provided young people the opportunity to develop familiar household practices on their own terms. Sometimes this independence could be overwhelming but they valued being able to go about their activities and routines without the surveillance experienced in residential care. SILS workers attempted to develop independent living skills that would support young people to maintain their tenancies and live in a way that was meaningful for them.

Autonomy and Control

For young people living in SILS, many of the elements discussed above were significant because they were indicators of autonomy. Claiming space, connecting with others, developing their own routines and activities were principal elements of home when done on young people's terms and in ways that aligned with their sense of what mattered and what would work for them. This was recognised by SILS workers, whose support for young people was tempered by the need to respect that autonomy. Similarly, in the context of residential care, frustration and distress over a lack of control was implicit across young people's discussions of the absence of home – a lack that was acknowledged by residential care workers.

Summary

For young people and their carers, home was a resonant idea. They defined home in ways that echoed dominant cultural ideals. The specificities varied but connection, felt safety and claiming space were elements of home in all three OOH types. However, there were significant differences in the presence and possibility of home as a lived experience. These differences reflected challenges embedded within OOH systems, to which we now turn.

Challenges to Home

The challenges to creating and sustaining home emerged from the tension between a desire for a life that was meaningful for each individual and the institutional practices and systems that shaped what was possible in any given OOH type. This tension was evident in the contested place of information in OOH, especially foster care and residential care, differing understandings of young people's needs and constraints on the agency and autonomy of carers and residential care workers. These challenges made it difficult for carers and workers to respond to young people's desire for home and intensified the cumulative effects of placement instability, which was itself a force disrupting a young person's ability to establish a sense of home and connection.

Contested Information

For foster carers, the initial absence of accurate information on the history, needs, preferences and characteristics of the young people they cared for created an unstable foundation for the relationships of understanding, care and trust that were foundational to home. Carers could not immediately introduce home practices such as shared experiences and routines and expressions of belonging and acceptance that would resonate with the specific needs of the young person in their care. Young people's behaviors could be distressing for the upheaval they caused to carers' sense of home and because they suggested to carers that they were failing to make and sustain home.

Young people in residential care expressed a desire for greater transparency in how information was documented and accessed by workers. And while young people recognised that workers were required to record their actions, how this recording was done and communicated significantly influenced the young person's sense of home by eroding the possibility of meaningful relationships with residential care workers. This tension could be minimised when workers actively cultivated transparency and trust so that young people felt respected and involved in decisions about their own lives.

Divergent Understandings of Young People's Needs

Foster carers' homemaking was embedded in the legal responsibilities, policies and practices of the OOHC system. They described institutional and social workers' failure to acknowledge the misalignment between organisational records of each young person's needs and carers' understanding of those needs, developed through experience and often substantial research. The complexity of young people's trauma and needs created upheavals that reflected the fragility of home and undermined its possibility. Without institutional recognition of their knowledge of a young person's needs and the provision of additional support services, carers felt their ability to make and sustain home for the young people in their care was limited.

Limiting Workers' Agency

In residential care, the capacity to create and maintain home was challenged by institutional practices and policies that centred on risk mitigation and resource management. Permissions to make changes, decorate or purchase homely items, locks on doors and consistent surveillance were examples of seemingly minor inconveniences eroding the possibility of home for the young people in OOHC. Where they could, workers supported and advocated for young people, but the need to do so highlighted young people's limited agency. Residential care was an 'adult geography' (Costa Santos et al., 2024) but one in which the adults themselves were constrained in their homemaking.

Cumulative Impact of Multiple Placements

Of the 30 young people interviewed, 16 had experienced four or more placements. Placements often varied across types with young people transitioning between foster care, kinship care, residential care and/or SILS. These changing environments had implications for young people's experiences of home and homemaking. They limited young people's ability to create and maintain relationships that were based on trust and reciprocity. Even in long-term foster placements, young people required sustained and consistent assurances that this was now their home. Within the SILS context, the ability to stay in a property until they turned 25 provided a sense of stability to the young person, yet they remained uncertain about their success in continuing in the tenancy and in home supports.

Summary

Challenges to the experience of home and homemaking did not always result in the absence of home. For young people and their carers living in foster care arrangements, a sense of home could be disrupted in the short-term but sustained with work and understanding over time. The same patterns were evident in SILS: young people's efforts to create home did not result in a simple trajectory towards an increasingly homely state; rather, it could be undermined and then rebuilt through the efforts of young people with the support of SILS workers. In these OOHHC contexts, home was not stable or simple, but it could be maintained. The possibility of home was less evident in the experiences of young people in residential care, for whom the complexities of living in an institutionalised site with few stable relationships limited their homemaking. For these young people, home was resonant as an idea and largely absent as an experience.

Embedding Home into Out-of-home Care

The findings from this research suggest that home is an idea that resonates for young people, carers and support workers; even when it is absent from their lives, young people desire home. Across OOHC contexts, young people and those who care for them offer multi-dimensional understandings of home aligned with dominant cultural definitions, notably the centrality of caring relationships, felt safety, familiar and shared householding practices and the importance of claiming space. These dimensions reflect young people's definitions of home in other domestic contexts, including nuclear families (James, 2013) and parental households after separation and/or divorce (Fehlberg et al., 2018; Campo et al., 2020; Francia & Milliar, 2019). They reinforce earlier findings on young carer leavers' desires for home even when it was absent from their OOHC histories and present lives (Natalier & Johnson, 2015).

The meaning and value of home was inflected by personal histories and OOHC contexts. Natalier and Johnson (2015) have noted 'a dynamic interpretive process through which home is defined in relation to the past, the present and an imagined future' (p. 128). To protect young people's wellbeing, we did not prompt discussions of previous family and OOHC experiences (although these were sometimes raised by young people) however the interviews suggested that their pasts informed their current sense of home. This was most evident when young people compared their present home to its previous absence. It was also notable where past experiences of abuse likely contributed to some young people's focus on physical safety, and an emphasis on claiming and using space in SILS after feeling constrained in residential care. Similarly, experienced and absent dimensions of home were shaped by policy, practices and resource differences across foster care, residential care and SILS.

Introducing home to OOHC is not a panacea for the complex array of factors contributing to the disadvantages experienced by these young people; nor can it solve the challenges described by carers and workers looking after them. However, understanding and integrating home into OOHC policy, practice and evaluations may enhance young people's, carers' and workers' experiences and improve young people's life chances.

Recognising the value and possibility of home may buttress strengths-based approach to supporting young people. Such an approach suggests:

- Home:
 - Builds understanding of what matters for young people in OOHC. It expands focus to the intersection of easily overlooked relationships, places, practices and the interpretive processes giving them meaning.
 - Acknowledges the presence and significance of an emotionally and culturally valued experience for young people whose lives have been implicitly assessed as marked by its absence.
 - Is a reminder that young people's lives cannot be reduced to the difficulties, neglect or abuse they have experienced. Recognising the multiple dimensions of home encourages a sensitivity to 'the importance of the mundane, or risk rendering such experiences invisible in young people's lives' (Boddy, 2019, p. 2249).
- Home is created by young people, foster carers and workers together. Foster carers most explicitly described their efforts to create a home, however across OOHC contexts young people's reflections on home typically referenced their own practices and their interactions with carers and workers.

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- Homemaking requires young people's agency. Young people are conscious of their lack of agency in the OOHC system and in their lives more generally. Having the ability to shape space and activities and experience a sense of control in their domestic lives, contributes to their sense of home.
 - Relationships of care and recognition are central to young people's experiences of home. These relationships:
 - Offer stability and belonging in and of themselves and offer a lens through which young people can interpret spaces and activities in ways that build a sense of home.
 - Facilitate carers' and workers' homemaking by responding to young people's unique needs. This includes understanding the impact of past trauma and its ongoing implications for daily life, relationships and emotional wellbeing.
 - Claiming space is important for young people. A space of their own offers a site for self-expression, belonging and the promise of physical and emotional safety. This is most evident in young people's appreciation of their personal bedrooms and extends to supporting young people's autonomy and confidence in how they use shared spaces.
 - Mundane activities are important in creating home. Disrupting or denying such activities can erode young people's sense of home. Limiting young people's ability to cook, decorate, see friends or organise their time may simultaneously reflect policy, practice or logistical requirements and undermine the possibilities of home.
 - Homemaking necessitates resources. When young people seek to decorate space, they need money, transport, time and permission to make material changes to their space. The implications of limited resources were particularly evident in residential care, where young people and support workers could not easily decorate personal and shared spaces. In contrast, the young people in SILS described greater agency and resources for making a space their own and in so doing engendering a sense of home.
 - Home and its absence are not static states. Home is an experience that changes over time. It may be strengthened or eroded as relationships develop or as interactions, memories or sensory experiences occur.
 - The meaning and experience of home are rooted in past relationships and living circumstances. These shape, but do not determine what feels meaningful and possible for young people in their present context.
 - Homemaking begins when a young person moves into their placement. Indeed, some carers suggest it should begin earlier, when they meet a young person.
 - It is important to offer the supports necessary for homemaking from the beginning of a placement.
 - Disruption to practices and relationships facilitating home does not necessarily lead to its dismantling. A sense of home can be re-established and protected as carers and young people understand what supports and what undermines home.
 - Homemaking requires foster carers' effort and expertise. Carers' attempts to create home knit together administrative, emotional, logistical, domestic and paid labour in complex patterns, directed towards meeting the specific needs of children, the needs of the household and the requirements of OOHC systems.
 - Foster carers' homemaking is subject to processes, policies and legal responsibilities. Recognising the disruptive potential of institutional requirements may create a greater sensitivity and responsiveness to carers' homemaking.
 - Residential care offers particular challenges to young people's homemaking. Surveillance can undermine feelings of safety and belonging. Shift work and worker turnover limit the possibilities of building trust and understanding between workers and young people. Control over how young people use and decorate their spaces can further erode the possibilities of home.

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- Young people's transition to independence requires longer-term planning and support. SILS play a critical role in helping young people prepare for independently living. However, the curtailed independence and skills development in residential care often limits opportunities for young people to develop and build confidence in practical independent living skills, with implications for their capacity to create and experience home in the future. Creating space for risk-taking and skills-building within OOHHC settings is critical for fostering genuine independence and sustaining home beyond institutional supports.

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Appendix A Participant Overview

Pseudonym	Participant Type	Placement Type
Amy	Young Person	SILS
Angus	Young Person	SILS
Anne	Worker	Residential Care
April	Worker	SILS
Archie	Young Person	SILS
Audrey	Young Person	SILS
Billy	Young Person	Foster Care
Britney	Young Person	SILS
Camille	Worker	Residential Care
Carla	Carer	Foster Care
Constance	Carer	Foster Care
Courtney	Young Person	SILS
Debbie	Carer	Foster Care
Donna	Carer	Foster Care
Gene	Worker	Residential Care
Gina	Young Person	Kinship Care
Hamish	Young Person	SILS
Hugh	Young Person	Residential Care
Indy	Young Person	SILS
Irene	Carer	Foster Care
James	Young Person	Foster Care

Appendix A Cont.

Pseudonym	Participant Type	Placement Type
Jamie	Worker	SILS
Janelle	Young Person	Residential Care
Jean	Carer	Foster Care
Joan	Carer	Foster Care
June	Young Person	Foster Care
Justin	Young Person	Foster Care
Kasey	Young Person	Residential Care
Kelly	Young Person	Foster Care
Kevin	Young Person	Foster Care
Kim	Carer	Foster Care
Kirsten	Carer	Foster Care
Kylie	Young Person	SILS
Leigh	Worker	SILS
Lily	Young Person	Foster Care
Martha	Carer	Foster Care
Michael	Young Person	SILS
Natalie	Young Person	SILS
Nathan	Young Person	Foster Care
Neil	Carer	Foster Care
Olivia	Carer	Kinship Care
Polly	Carer	Foster Care

Appendix A Cont.

Pseudonym	Participant Type	Placement Type
Richard	Young Person	Foster Care
Roy	Carer	Foster Care
Ryan	Young Person	Residential Care
Sadie	Young Person	Foster Care
Sally	Young Person	Foster Care
Sinead	Young Person	Foster Care
Stella	Young Person	SILS
Stevie	Young Person	Kinship Care
Tracy	Carer	Foster Care
Whitney	Young Person	Residential Care
Zoe	Worker	Residential Care

