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**Foster Youth in the  
Mediasphere**  
Lived Experience and  
Digital Lives in the  
Australian Out-Of-Home  
Care System

**Milissa Deitz  
Lynette Sheridan Burns**

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*For Skye Hope, 18 February 2013–16 April 2014.  
We dedicate this book to the tenacious and ferocious Skye Hope, fastest  
crawler in the inner west of Sydney, best fake reader, and cheekiest peek-a-  
booper. Loved by so very many, and forever in our hearts.*

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## CHAPTER 1

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# Introduction

**Abstract** This chapter begins with a reflection on author Milissa Deitz’s experiences engaging with the out-of-home care system in Australia as a foster parent. It outlines the authors’ research interest in how identity and security are linked, and how this might translate for someone whose life is often disrupted. The authors acknowledge that while there are many people who have positively devoted their lives to foster care, either professionally or personally, there are more children and families who have been failed by the system. The main challenges children in such circumstances continue to face have not changed in some time: placement instability, being separated from their siblings, the high turnover of case workers, and transitioning out of care at 18 years. This is against a background of the challenges of the sector itself—limited resources and an increasing need for carers. In particular, this chapter considers the role of the media in articulating public and private spheres of experience and the potential of digital media to empower young people in care to find ontological security while living with domestic and personal instability.

**Keywords** Out-of-home care • Mediasphere • Ontological security • Identity

My children have two mothers and two fathers. Current circumstances dictate we can't completely be sure of how many other siblings there may be. Their life stories are unusual, but if there is a typical story of foster care, I am yet to hear it. The extent and intricacies of foster care, now known in Australia as out-of-home care (OOHC), are not widely understood among the general public. Placements can vary in length depending on individual circumstances. They can be for a single child or a sibling group, and ages range from newborns to teenagers. As well as emergency care, there is short-term care. This can range from a few months to a few years for those children waiting for a Children's Court decision on their long-term future, which may or may not include them being restored to their birth parents. There is also permanent care, sometimes with a view to adoption.

My partner and I are permanent foster carers to our children. We're Mum and Dad, and we're responsible for teaching, socialising, educating, and, of course, loving them. Nevertheless, our children are in statutory care and see their birth mother a mandated four times a year. Some people baulk at such an arrangement: will it not be confusing and damaging for the child? But research has shown that ignorance of one's origins can be far more detrimental to a child's wellbeing. An ongoing relationship with the birth family helps the identity process and the emerging understanding of self.

If you'd asked me 10 years ago how many children in Australia were in foster care, I would have guessed a few thousand. If only. According to the Australian Institute of Health and Welfare, 174,700 Australian children received child protection services from 2019 to 2020. Aboriginal and Torres Strait Islander children were eight times as likely as non-Indigenous children to have received child protection services, while children from geographically remote areas were more likely to be in out-of-home care than those from major cities. During the same period, over 5300 children were reunified with families.<sup>1</sup>

When I was growing up, foster care seemed somewhat mythical. My only references were either literary—Pip from *Great Expectations*, *Anne of Green Gables*, and *The Great Gilly Hopkins*—or were part of family stories that had happened so long before I was born they may as well have been fictional. My paternal grandmother grew up with two foster brothers along with her biological brother. One little boy was left, when a toddler,

<sup>1</sup> Australian Institute of Health and Welfare (AIHW). Cat. no. CWS 69. Canberra: AIHW Australian Institute of Health and Welfare (AIHW). 2020 "Australia's Children."

with my grandmother's parents by his mother. She visited regularly for a few years, then she stopped coming. The youngest boy was a baby when he was left with my great-grandparents, and never met his biological parents. He always knew my great-grandparents were not his biological parents but was told from a young age they had adopted him. My father explains now that my great-grandmother wanted to ensure my great-uncle always felt that he belonged and was part of the family, but in fact they did not apply for adoption until my great-uncle was 16, for reasons we will now never know. When she applied for the adoption, my great-grandmother wrote that the child had been placed in the care of herself and her husband when he was a few days old and explained that the biological mother had not "made enquiries as to the welfare of the said child or contributed towards his maintenance with the exception of the first few months of his life". She continued that she was unaware of the biological mother's whereabouts and that the child was aware she and her husband were not his natural parents. The adoption was granted on Friday 27 October 1944.<sup>2</sup>

Taking these stories for granted, I never stopped to consider what had driven these mothers to leave their children, or how it may have affected the children in question or the wider family. There is so much I'd now like to know, but as my father reminds me, there is no one left alive to ask.

I had always wanted a big family of my own, and my partner and I tried to fall pregnant unsuccessfully for many years before turning to IVF. After seven cycles, we were told by our specialist that we had reached the end of what medical science could do for us. We were among the 3% of Australian couples with unexplained infertility. Despite the shock and disappointment, I wasn't ready to give up and started seeing a Chinese herbalist. Not long after, I was having lunch with a colleague when she told me about friends of hers who had just welcomed a three-year-old girl and her baby brother to their immediate family. This had been arranged through an Australian-based charity and was not an adoption. I asked her how this was possible, and she explained that the charity was involved with foster care. Instantly, I was single-minded. When I excitedly told my partner about *permanent* foster care later that evening, he was not at all convinced—he worried about being unable to love a child not his own. His main concern was the uncertainty of how such a child might grow up. Before making a decision, however, he promised to undertake the entire training course.

<sup>2</sup> Deitz, Milissa, personal family email correspondence (2021).

After an initial interview at home by the charity, we were invited to the first part of the program. It consisted of an all-day Saturday session followed by four two-hour sessions once a week. If we wanted to continue, there would be four more two-hour sessions at home where we would be interviewed extensively, before being separated for a final interview each. Then we would wait while our application was assessed by a panel. To say that the first session on that August Saturday in 2011 was an emotional onslaught is an understatement. Afterwards, my partner lay awake for most of the night while I had variations on familiar nightmares. Children go into foster care for a number of reasons but mainly due to abuse or neglect. How to manage and care for emotionally damaged, confused, and frightened children makes up most of the course. My tenacity was shaken as we listened to what too many children have to deal with in our society due to the impact of disadvantage, poverty, drugs, alcohol, and poor mental health. For support, we sought out the marriage counsellor who had helped us grieve together rather than apart after our IVF experience.

As it turned out, of the four couples who commenced the course we were one of two who didn't pull out before its completion. A week later we heard we had "passed", which meant that the next stage—our home interviews—would begin. Weeks passed, and there was little the charity did not know about us or our lives. After what seemed like an interminably long time, the panel went on to accept us as official foster carers—and then came the agonising wait for the referral. With a referral one is given, confidentially, all the information the agency has about a child's background and medical history, not including names or photographs. Our paperwork showed we were interested in a child three years old and under. Expecting to wait for some time, we were taken aback when we received a phone call a few weeks after our approval: would we like to look at the file of a four-month-old baby boy who had been in short-term care since he was a few days old? At first glance, there was nothing to indicate we should not say yes immediately. But on closer inspection of a paediatric report, we saw that the baby had been diagnosed with "failure to thrive", was severely underweight, and his short-term foster carers were worried about his sight and hearing. Further investigation into the baby's birth family revealed the possibility of a congenital illness that, if realised, would impact all of us, possibly for the rest of our lives. We agonised. We cried. Would we be able to take care of him?

There is, of course, no way of divining whether anyone will ultimately grow up to be healthy, happy, or "normal": we said yes, we wanted to commit to this child. The agency emailed us a photo. We sat in front of the

computer, too overwhelmed to open the attachment. When we did, we saw the most beautiful baby either of us had ever seen. The court order came through in May of 2012. The next month we brought a 6-month-old baby into our lives.

At first, we had absolutely no desire to have anything to do with the biological parents or their extended families. I found the first court-ordered visit excruciating. I dropped my baby at the charity's head office, walked aimlessly around a nearby shopping mall for an hour, then came back and sat in the waiting room for another hour until the end of the visit because I couldn't bear to be too far away. The visits are arranged so the foster care families and biological families do not meet. After what seemed like hours, the case worker appeared and handed the baby back to me.

It wasn't so much that we were judgemental, although of course there was a little of that—it was that we didn't want to consider that our boy didn't entirely belong to us. Despite all the excellent training we had been given around caring for children that “have two families”, there was a part of me that wanted to figuratively mark the baby as inextricably mine. Ultimately, and slowly, I began to truly comprehend what it meant that we were the ones who were able to see him daily, to watch him gain weight and reach milestones, and cuddle him and put him to bed every night. The visits with the biological family were supervised and, initially, held in what was clearly a large office, characterless albeit with toys. Little by little I began to see how incredibly fortunate we were.

Now that I am more cognisant of the system, I am of course aware that while there are many people who have positively devoted their lives to foster care, either professionally or personally, there seem to be more children and families who have been failed, sometimes over and over, by the system. Too many young people are moved around too frequently, and the main challenges children in such circumstances continue to face have not changed in some time: placement instability, being separated from their siblings, the high turnover of case workers, and transitioning out of care at 18 years. This is against a background of the challenges of the sector itself—limited resources and an increasing need for carers.

I remember how shocked I was initially when reading about a contemporary foster care case in which a teenage boy mentioned having to move his belongings in a garbage bag. I now find my naivety somewhat shameful, as it has become clear to me this is a common occurrence. Indeed, at the time of writing, Newcastle woman Rachael Clancy was recently presented with a NSW Government Community Service Award for her

initiative, *Hope in a Suitcase*. After witnessing, as a foster mother, many children entering care with little more than the clothes on their backs, she began to gather essential items in a suitcase to donate to children moving into new accommodation. As well as providing practical items, she hopes the initiative gives the children a sense they are deserving of their own belongings. The initiative has attracted a steady stream of companies willing to donate full suitcases and is growing steadily across Australia.

When our boy was 21 months old, we were joined by his biological sister. I had only been back at work for five months when I went on parental leave again, this time taking five instead of the 10 months I had taken with our son. We were ecstatic. She was completely healthy and, just like her brother, absolutely gorgeous. Before I go on, I want to be clear that we did not take one day of our lives as a family for granted. It is not an exaggeration to say that I felt whole for the first time in my life. While I had some empathy for the biological parents and extended family, it was at a distance. I'm not proud of the following admission, but in my head those children were mine. If I'm completely honest with myself, I didn't even like sharing photographs of them with their biological family.

When tragedy struck, we were completely unprepared. Our daughter was 14 months old when she died suddenly and very unexpectedly in an accident at her childcare. I will go so far as to say that for quite some time, my partner and I lost our minds. There were suddenly huge gaps in my memory, and I had absolutely no concept of time: my day-to-day existence was something akin to being trapped inside someone else's dream state.

While this book is not about me, or my own family, I strongly wanted to make the point that what came out of such devastation is a solid relationship with my children's biological mother. Three months after my daughter's death, I met the woman who had given birth to her. I asked if I could hug her, and she said yes. Our son looked at us both as if what we were all going through was quite ordinary, and then ran to a toy kitchen set up in the visitor's room and asked his case worker to play with him.

Many years later, I'm friendly with my children's mother and her extended family. My children's tummy mummy is 22 years younger than me and has started another family with her new partner. When I pick our son up from his visits—still supervised but these days held in a beachside park or a suburban play centre—her niece runs to me for a cuddle, I chat to her siblings, and sometimes ask advice of her own mother before Mummy K and I sit down to talk about our boy, who takes his life circumstances for granted. Of course, while I am aware of how fortunate we