

## Moving On: Aftercare<sup>1</sup> Provision in Ireland

May 2012

### Introduction

As children journey through childhood, adolescence and into adulthood the majority experience love, support and stability that enables them to grow into independent, self assured adults. They often stay in the family home until they are around 25 years of age and have a strong network of support in their family and friends.

However, for some of those who have been raised in the State care system their journey can be characterised by multiple placements leading to subsequent feelings of low self esteem, uncertainty and unpreparedness<sup>2</sup>. They have to leave the care system once they turn 18 and are less likely to have a strong network of support. As a result, there is a necessity on the State, as the corporate parent, to prepare a young person for life after care, providing a range of supports including: financial, accommodation, training and education, advice and information supports as well as practical supports such as cooking skills, budgeting etc. Young people also need to have access to emotional support, mentoring, and a caring adult who will keep in touch with them<sup>3</sup>.

As every young person is different so too are their needs for aftercare supports. Those who have been in long term foster care may need less support than a young person leaving a residential care setting. But what is shared among this group is their vulnerability and unpreparedness for securing and maintaining a home, a career and social stability at such a young age especially when they may have already experienced a chaotic childhood. This is particularly true for separated children who may have fled violence and persecution in their home country before arriving in Ireland with no family<sup>4</sup>. Failure to prepare and support this transitional phase in their lives, can lead to increased exposure to and experience of homelessness, addiction, criminality, prostitution, poverty, mental health difficulties and early parenthood<sup>5</sup>. Therefore, the importance of preparing a young person to leave care and to support them to live independently cannot be overstated.

### Current Situation in Ireland

There were 6,160 children in care at the end of December 2011; 5717 were in foster care with the remaining 443 children in residential care<sup>6</sup>. Children in residential care are largely placed in open residential centres run by either the HSE or private/voluntary providers in communities across the country. The HSE stated that there were 1,310 young people aged 18-21 in receipt of an aftercare service in December 2011<sup>7</sup>. Given that not all children leaving care are aged 18 years of age, it is also planned that from 2012 the HSE will record

<sup>1</sup> The term Aftercare can also be known as Through Care or Continuing Care

<sup>2</sup> Dixon Jo, (2008) 'Young People Leaving Care', in Child and Family Social Work, 13

<sup>3</sup> EPIC, (2011) Briefing Paper on Aftercare. [www.epiconline.ie](http://www.epiconline.ie)

<sup>4</sup> Barnardos (2010) Aftercare for Separated Children

<sup>5</sup> Stein, Mike (2004) What Works for Young People Leaving Care?, Barnardo's, England

<sup>6</sup> HSE (2011) Monthly Performance Reports

<sup>7</sup> Figures stated by Michele Clarke, Social Work and Child Care Specialist, Department of Children and Youth Affairs at the Campaign for Children / Children's Rights Alliance seminar on May 15<sup>th</sup> 2012.

the actual numbers of children discharged from care by age<sup>8</sup>. This will hopefully begin to address some of the ongoing information deficits that exist regarding care leavers.

Presently, the availability of aftercare services from the HSE is patchy, inconsistent and inadequate. This is mainly due to the absence of a statutory entitlement to aftercare and the lack of investment in such services in the past. The provision of a statutory right to aftercare would ensure that every young person leaving care would be able to avail of aftercare supports appropriate to their needs. The Child Care Act 1991 states the HSE *may* provide assistance, in the form of support, accommodation, assistance with training and employment up to the age of 21. However, the word *may* rather than *shall* makes it discretionary, allowing the HSE to decide whether or to whom to offer support<sup>9</sup>.

During the recent passing of the Child Care Amendment Act 2011, there were extensive lobbying efforts by Barnardos, Action for Aftercare, TD's, Senators and the Ombudsman for Children to extend the section on aftercare and to place the provision of these services on a statutory basis by changing the wording from *may* to *shall*. However, our efforts were unsuccessful as the Government upheld the previous Government's legal advice that there was no need to change the wording stating the current legislative wording should not be understood as 'discretionary' but rather that where a young person's need for aftercare has been identified there is an obligation on the HSE to meet it. A directive was issued to the HSE to this effect obliging them to meet the aftercare needs of care leavers.

The continued absence of an unambiguous legislative framework means that efforts to progress the provision of aftercare services at a policy and practitioner level are weakened. The need to support children leaving care has long been identified as an area requiring improvement in both the Youth Homeless Strategy (2001) and the Homeless Strategy and Implementation Plan (2008).

The Ryan Implementation Plan (2009) also made clear recommendations with regard to data collection and to improve planning for leaving care and enhance the availability and quality of aftercare supports, resulting in the introduction of the HSE Leaving and Aftercare Services National Policy and Procedures document. This policy was finalised in April 2011 to provide the basis for implementing an effective equitable service across the country. It plans to engage with the young person from age 16 in preparing for leaving care and devising a care plan jointly with them. The responsibility of implementing the plan would be overseen by the aftercare worker once the child turns 18. According to the policy, aftercare services are to be available to all those eligible irrespective of which care sector they have been in, foster care, residential care and high support up to 21 years (unless they are in education in which case the HSE can support until 23 years). Engagement with services is voluntary and young people can refer themselves directly or through their social worker or another agency. Even those who choose not to engage are monitored for 12 months after leaving care to facilitate re-engagement and reduce their vulnerability.

This policy development is greatly welcomed, however, its implementation has been hampered by inadequate resources. In 2010, only €1m was allocated to aftercare services. A clear implementation plan on how to roll it out has yet to be finalised and it will be piloted in some areas initially before it is hopefully rolled out in its entirety countrywide. Presently, there continues to be an insufficient number of aftercare workers across the country resulting in high caseloads and inability to prepare, engage and oversee each leaving care plan. As a result, many care leavers do not have an aftercare worker. Also the eligibility criteria, outlined in the HSE policy, governing access to aftercare supports excludes a variety of

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<sup>8</sup> Parliamentary Question 22<sup>nd</sup> March 2012

<sup>9</sup> Fenton, Maurice, (2010) Aftercare as Afterthought, A dissertation submitted in partial fulfilment of a Master of Arts degree in: Youth and Community Studies, Brunel University.

vulnerable children who have had experience of the care system and are often ill-equipped to make a successful transition to independent adulthood. These include:

- a) Children deemed to be homeless as per section 5 of the 1991 Child Care Act<sup>10</sup>;
- b) Separated children whose status has not been determined and who are diverted into the Direct Provision system when they turn 18;
- c) Young people who have been taken into care at 17 but have not spent 12 consecutive months in care;
- d) Young people who have experienced frequent but short term placements throughout their entire engagement with the care system. These may be particularly vulnerable.

Research has found that the inadequacies of planning for life after care and the extent of support and services offered leave young people feeling uncertain for their future and alone<sup>11</sup>. The preparation stage is not a once off event but rather an ongoing process – it needs to be participatory, supported and holistic in approach well before they turn 17 to ensure that all aspects of the young person's needs are identified and discussed.

The Department of Children and Youth Affairs (2011) study which asked young people about their experiences of aftercare support found that they were critical of the lack of comprehensive services available to ease their transition from care to independent living. Unsurprisingly, the level of preparatory work was limited, leaving people with a fear of turning 18 and that they were going to be on their own, especially when those in foster care were eager to be financially supported to stay with their foster family after they turned 18. Also the lack of availability of aftercare workers (working office hours only) and promises being made but not met were identified as ongoing issues<sup>12</sup>. The research also showed that aftercare services vary enormously in each area, resulting in considerable confusion and increased fear among young people about what they could expect. Some felt that this uncertainty compounded their feelings of being let down by the State while in care and exacerbated their feelings of 'fear of being left completely on their own'. They also highlighted that every care leaver should receive the same treatment regardless of where they live or which type of care they have experienced.

A 2011 study by EPIC with young people who were availing of aftercare supports identified a number of particular challenges. These included having experienced several accommodation moves during the transition to independent living which was associated with greater risk of homelessness, difficulties in accessing further education and employment, dependency on social welfare, coping with difficulties arising from having mental health needs and lacking vital skills such as budgeting skills<sup>13</sup>.

Given the vulnerability of young people leaving care, they should be guaranteed support in all areas of their lives to make this transition into adulthood. Placing aftercare on a statutory basis would strengthen the political commitment to these children, ring fence funding for these services and ensure better outcomes for them, their families and wider society. Much can be learnt from the experience in the UK where a clear legislative mandate is imposed on the local authority or HSS Trust to support these young people.

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<sup>10</sup> Section 5 of the Child Care Act 1991 states that '*where it appears to a health board that a child in its area is homeless, the board shall enquire into the child's circumstances, and if the board is satisfied that there is no accommodation available to him which he can reasonably occupy, then, unless the child is received into the care of the board under the provisions of this Act, the board shall take such steps as are reasonable to make available suitable accommodation for him.*'

<sup>11</sup> Barn, Ravinder et al (2005) Life After Care: The experiences of young people from different ethnic groups, Joseph Rowntree Foundation, England

<sup>12</sup> Department of Children and Youth Affairs (2011) Listen to Our Voices, Dublin

<sup>13</sup> EPIC (2011) Summary of EPIC Research Findings on Outcomes for Young People Leaving Care in North Dublin

## **Key Lessons from the UK**

### **Aftercare Supports in England and Wales**

The varying provision of aftercare services and the poorer outcomes being achieved by care leavers remained a constant concern and finding of the Social Services Inspectorate. It led to the Utting Report (1997)<sup>14</sup>, which reviewed the safeguards for children living away from home in the United Kingdom, and became a key document at the time. It ultimately led to the enactment of the Children (Leaving Care) Act 2000, which came into effect in September 2001. The aims of the Act are to delay young people's transitions from care until they are prepared and ready to leave; strengthen the assessment, preparation and planning for leaving care; provide better personal support for young people after care; and to improve the financial arrangements for care leavers.

This legislation applicable in England and Wales outlines clear categories of care leavers eligible for support and specifies their entitlement to participate in planning and reviewing of pathway plans, have a personal advisor and obtain assistance with education / training up to age 24, financial support and main suitable accommodation.

The enactment of this legislation has led to the development in England and Wales of a 'corporate parenting case model' in some areas, leading to better resourcing and overall to the increased profile of leaving care services. It has strengthened the responsibilities and clarification of roles towards care leavers by Local Authorities, with an emphasis on preparation for leaving care and addressing both practical and personal skills<sup>15</sup>.

A review of the legislation indicates that initial impact included an increase of young people in education, employment and training. Also a greater proportion of young people were in supported accommodation and shared or transitional accommodation<sup>16</sup>. The Buttle UK charity noted an increase of care leavers going to university from 1% in 2001 to 6% in 2011, although a small increase, the charity is lobbying further education institutions to encourage care leavers to apply to their colleges and support them with their education<sup>17</sup>.

Another study found that young people felt that the quality of preparation was inextricably linked to the calibre of a young person's personal advisor. Some young people also praised their foster family for teaching them 'how to cook, be organised and self managed'<sup>18</sup>. However, for some there was a sense of being speedily moved from the care system and not having enough information on their rights and entitlements to aftercare support. The development of Leaving Care Teams was positive and needing help with money matters (budgeting skills to help avoid debt) and housing were the primary areas of support required.

### **Aftercare Supports in Northern Ireland**

Access to and provision of aftercare supports is clearly outlined in the Children (Leaving Care) Act (Northern Ireland) 2002 and the subsequent Children (Leaving Care) Regulations (Northern Ireland) 2005 and Leaving and After Care: Guidance and Regulations. The intention is to improve the young person's life chances by ensuring that they do not leave

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<sup>14</sup>Utting, Sir William, "People like us: The Report of the Review of the Safeguarding of Children", (aka the Utting Report), 1997, HMSO.

<sup>15</sup> Stein, Mike (2004) What Works for Young People Leaving Care?, Barnardo's, England

<sup>16</sup> Ibid

<sup>17</sup> 'Care leavers must get more support to stay in education', by Gerri McAndrew printed in Guardian newspaper Friday 4<sup>th</sup> May 2012.

<sup>18</sup> Barn, Ravinder et al (2005) Life After Care: The experiences of young people from different ethnic groups, Joseph Rowntree Foundation, England

care until they are ready to do so. Responsibility is assigned to the local HSS Trust. Eligibility is determined by membership of the following categories:

1. "Eligible Child" – aged 16 or 17 who has been looked after by an authority for a period of 13 weeks since the age of 14 and is still being looked after;
2. "Relevant child" aged 16 or 17 who is not being looked after by an authority and was, before ceasing to be looked after, an eligible child;
3. "Former relevant children" was previously a relevant child or was returned to care until aged 18;
4. "Persons qualifying for advice and assistance" are young persons under 21 years who at a time after reaching the age of 16 were, but are no longer, looked after, accommodated or fostered.

Engaging with the young person to ensure their voice is heard and their participation is meaningful is mandatory for the HSS Trust "unless it is not reasonably practicable". The young person is to be involved in both carrying out assessment and in preparation of their pathway plan. This assessment of need and devising of a pathway plan is applicable to most care leavers (categories 1-3). This needs assessment must be carried out within three months of the young person's 16<sup>th</sup> birthday. The legislation clearly sets out who should conduct the assessment, the extent of young person's involvement and areas to be covered e.g. their health and development, education needs and support network. The Child Care Regulations specify what is to be included in the pathway plan, the nature and level of contact and support to be provided and details of accommodation for the young person, and their training / education / employment plans and financial and health needs including mental health needs. These plans are to be reviewed every six months.

It is compulsory for personal advisors to be appointed to most care leavers from the time of their 16<sup>th</sup> birthday (categories 1-3). The personal advisor's duties are to provide advice, be involved in development and review of pathway plans and liaise with the responsible authority to ensure the plan is implemented in all areas. Under the legislation and regulations, the HSS Trust must provide financial assistance, suitable accommodation (i.e. generally not B&B accommodation) and help towards meeting the young person's education, training and employment objectives as identified in their pathway plan. In recognition that these plans are holistic in nature and deal with all aspects of the young person's life, their implementation requires the assistance of multiple agencies. Accordingly the Children's Order Northern Ireland was amended to facilitate greater interagency cooperation; now agencies who are requested to provide help are mandated to do so as long as it is compatible with their own statutory duties.

For Former Relevant Children aged 18-21, the HSS Trust offers phased supports as they are not entitled to accommodation services or direct financial assistance but the HSS Trust are obliged to maintain contact and continue reviewing and implementing their care plan. Also, the HSS Trust have an obligation to keep in touch with those Young People Qualifying for Advice and Assistance aged 16 to 21 years. They have a duty to advise these young people if they were previously in care and their needs require it or if the young people's previous carers do not have the necessary facilities to advise and befriend them.

Having a statutory entitlement to aftercare in Northern Ireland has meant ring fenced funding for services and greater equity of provision across the province. Having clarity around the role of the aftercare worker, outlined procedures for delivery and a model of provision and compulsory training has led to a more consistent and uniform approach to services being delivered. It has also meant increased effort by HSS Trust to engage with non-engaging care leavers<sup>19</sup>.

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<sup>19</sup> Fenton, Maurice, (2010) Aftercare as Afterthought, A dissertation submitted in partial fulfilment of a Master of Arts degree in: Youth and Community Studies, Brunel University.

As Mullen et al (2007) found, when interviewing young care leavers, having more freedom and control was cited as a positive aspect of leaving care. However, there were also feelings of anticipation and apprehension. The benefits of providing aftercare supports and a personal advisor were noted when some wanted to return to education while going through the aftercare process and saw the value of it, and others sought to obtain training and work<sup>20</sup>.

It was found that those in long term foster care had often forged good relationships with their foster family and subsequently their need for aftercare workers was not as great as for young people who had shorter durations of being in care, in residential care or in training schools. These young people needed someone to trust and talk to and seek advice from and benefited from the relationship with their social worker, aftercare worker or personal advisor<sup>21</sup>.

Things to note were that legislative change in Northern Ireland brought more bureaucratic duties and subsequently aftercare workers noted they had less time to engage one to one with care leavers and as a result the personal advisors were sometimes carrying out aftercare worker specific duties. It was also noted that greater links were needed with mental health teams as many young people had not had their needs fully assessed - access for young people in care to therapeutic, psychiatric and psychological services appeared to be problematic<sup>22</sup>.

### **Aftercare Supports in Scotland**

The Children (Scotland) Act 1995, The Children Leaving Care Act 2000 (UK), The Regulation of Care (Scotland) Act 2001 and the Support and Assistance of Young People Leaving Care (Scotland) Regulations 2003 provide the legal framework for the provision of aftercare supports in Scotland. A “looked after” young person (“looked after” replaced the term “in care”) must be over school leaving age (generally 16 but it will depend on when their birthday falls) and under 19 years to be eligible for aftercare support. There is a duty on local authorities to provide aftercare unless the local authority is satisfied that the young person’s welfare does not require it. For those aged 19-21 who had been in care, they can apply for aftercare and while the local authority does not have a duty to provide it they do have the power to do so unless the authority is satisfied the person’s welfare doesn’t require it. The level of aftercare services will depend on the different categories into which the young person falls:

1. Compulsorily Supported Person – a young person to whom a local authority is obliged to provide advice, guidance and assistance;
2. Currently Looked After Person – a young person who is over school age but is less than 18 years of age and who is being looked after by a local authority;
3. Discretionarily Supported Person – a young person between 19 and 21 years of age to whom a local authority has agreed to provide advice, guidance and assistance after an application for aftercare by the young person;
4. Prospective Supported Person – a young person who has made an application to the local authority for assistance which has yet to be determined. (A prospective supported person becomes a discretionarily supported person if the local authority decides to provide support after a pathway assessment has been completed).

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<sup>20</sup> Christine Mullan, Siobhán McAlister, Fiona Rollock & Lelia Fitzsimons (2007) “Care Just Changes Your Life”: Factors Impacting upon the Mental Health of Children and Young People with Experiences of Care in Northern Ireland in *Child Care in Practice*

<sup>21</sup> McCauley, C (2006) *Pathways and Outcomes: A Ten Year Follow Up Study of Children Who Have Experienced Care*, Department of Health, Social Services and Public Safety

<sup>22</sup> Ibid

Similar to Northern Ireland, the legislation mandates that the young person's views be taken into account when conducting assessment and preparing and reviewing the pathway plan. Such assessments are compulsory for most care leavers (categories 1, 2, and 4) with clear duties outlined on who is involved and timelines to be adhered to. The compilation of a pathway plan is mandatory for a compulsorily and discretionarily supported person. If the young person is a currently looked after person they may be provided with a pathway plan if the responsible authority considers it necessary or desirable to do so. The plan will outline how the needs of the young person (identified through the assessment) will be met, who is responsible for implementing it, timelines assigned and it is to be reviewed regularly. Plans are holistic and examine the young person's emotional state, family relationships, details of accommodation, training / education / employment plans and their financial and health needs. Again, in recognition of the holistic nature of these plans to improve interagency working, the Children (Scotland) Act 1995 makes provision for a local authority to specifically request the help of other agencies e.g. health board, another local authority, national health trust service who then must comply as long as it is compatible with their own statutory duties.

A 'Young Person's Supporter' may be nominated by the young person if the young person requires it. Their role is purely to provide support and assistance to the young person in their pathway assessment, plan and review. The Young Person Supporter cannot be the Pathway Co-ordinator. A 'Pathway Co-ordinator' is appointed by the local authority to act on behalf of the local authority. They must be provided to categories 1 and 3 and may be provided to category 2 if the authority deems it necessary or desirable to do so. Their role is to provide advice and support to the young person and participate in the pathway assessment, plan and review. Their functions also include to co-ordinate the provision of services arising from the pathway plan or review, to keep themselves informed about the well-being and progress of the young person and to maintain a written record of discussions with the young person.

The local authority must provide or assist with suitable accommodation if required for compulsorily or discretionarily supported persons with regard to that individual's wishes, views and needs including their health needs as far as reasonably practicable. Likewise local authorities can provide grants to care leavers to go towards expenses in relation to education or training.

The Care Commission<sup>23</sup> (2009) undertook to assess how extensively services were adhering to the National Care Standards and compliant with legislation and regulations. It found the majority of services were compliant, ensuring availability, consistency and high standards in the delivery of aftercare provision. Only 21 out of 240 services did not have a policy on throughcare and aftercare. Only 3 services provided no guidance to their staff on throughcare and aftercare, with the staff trained in the majority of services. Although there was still a sense that young people were being pushed out of care, staff knew about pathway planning in all but 4 services. Also young people were not involved in creating and reviewing pathway plans in only 6 services. Finally, all services did encourage young people to keep in touch after they left care.

### **Conclusions and Recommendations**

As can be seen, there have been positive developments arising from the implementation of a comprehensive legal framework in England and Wales, Northern Ireland and Scotland. The different laws recognise that preparation for leaving care and aftercare support are vitally important stages to ensure that young people are adequately equipped with the necessary life skills to live independently after care. It places clear onus on the local authority to continue its role as a corporate parent and meet the needs of these young people. Needless

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<sup>23</sup> Care Commission (2009) *Throughcare and aftercare provided for children and young people in residential care. Are services meeting the standards?*

to say, some failings have been identified in each jurisdiction including not teaching practical skills such as budgeting or inadequate links with mental health teams<sup>24</sup>.

As identified by Stein (2004) the key ingredients for successful aftercare provision and achieving successful outcomes for those leaving care include:

- Responding to and recognising different needs of different groups of young people – all care leavers are not a homogenous group;
- The quality of substitute care and young people's opportunities for gradual transitions from care, especially those in long term foster families;
- Need for services to address both practical and personal skills and the importance of targeted services;
- Stability, continuity and family / carer links provide the foundations for successful outcomes of leaving care schemes;
- Involve young people in the decisions that are important to them – planning, practice and reviewing;
- Using formal and informal support networks (personal advisor, family member, staff in other agencies etc).

These ingredients should form the cornerstone of legislative and policy development in Ireland. While no comprehensive cost benefit analysis has been done with regard to aftercare services, there is indicative evidence to show that providing these services does have long term socio-economic benefits e.g. reduced homelessness, welfare dependency, criminality etc. Given the recent establishment of the Department of Children and Youth Affairs and the proposed new Child and Family Support Agency which is to reform child welfare and protection services, the time is ripe for concrete advancements in the entitlement to the provision and availability of aftercare supports.

### **Recommendations:**

- Place aftercare on a statutory basis – one route could be through the forthcoming Child and Family Support Agency Bill which is required to establish the agency and outline its role and functions. The legislation should be influenced by the UK system, in that it clearly assigns duties and is child centred in its focus. It should incorporate key principles of the UN Convention on the Rights of the Child, namely that decisions would be made in the best interests of the young person and that their voice would be heard in all decisions affecting their lives;
- The intention of the legislation must be to ensure that young people do not leave care until they are ready to do so and to live independently. Therefore, the option for young people to be financially supported to remain with their foster family until age 21 should be included for those seeking to do so<sup>25</sup>. Not only is this a cheaper option on the HSE / new Child and Family Support Agency but also ensures strong emotional and practical support is provided to the young person;
- Any proposed legislation must expand on the HSE Leaving and Aftercare Services National Policy and Procedures Document which recognises the importance of preparing for leaving care, beginning at age 16, and the range of supports and services to be offered to meet the practical, emotional and physical needs of the young person. Clear procedures and standardised forms such as conducting a needs assessment, creating and reviewing a pathway plan and assigning overall

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<sup>24</sup> Barn, Ravinder et al (2005) Life After Care: The experiences of young people from different ethnic groups, Joseph Rowntree Foundation, England

<sup>25</sup> Department of Children and Youth Affairs (2011) Listen to Our Voices, Dublin

responsibility must be included. The extent of support offered will vary for each young person depending on their identified needs. These procedures should become Regulations as per the Northern Ireland's system, enforcing and assigning clear roles and duties to ensure implementation;

- Eligibility for receiving support should be open to all those care leavers who require it. The present categories outlined in the HSE policy are too narrow and exclude a number of vulnerable young people. The categories used in Northern Ireland and Scotland are a useful starting point. It is imperative that a young person who had previously not engaged with the services can self refer themselves at a later point in time.

Young people only have one chance to make a successful transition from adolescence to adulthood. All of them, especially those who are leaving the care system, deserve to be appropriately supported to make this transition, facilitating them to become independent, self sufficient, confident young adults. Failure to do so will blight their lives indefinitely.