empowering people in care

EPIC Presentation to Joint Committee on Disability Matters: Exploring the Need for a Representative Advocacy Service for Children with Disabilities in Ireland

May 2026

Joint Committee on Disability Matters, 20 May 2026

Exploring the Need for a Representative Advocacy Service for Children with Disabilities in Ireland'

EPIC Empowering People in Care provides direct one-to-one advocacy support to children in care and young people in aftercare up to the age of 26 to enable them to have their views and concerns heard, empower them to speak for themselves, to resolve the issues and challenges they raise and to help them to obtain the services and resources they need.

It is EPIC's position that every child in care should have a statutory right to access an independent advocate should they so wish. We believe this could have been included in the Child Care Amendment Bill 2025 which is currently before the Dáil. EPIC welcome the strengthened provisions on multi-agency collaboration in the Bill and it is our view that empowering children and young people to access an independent advocate would further enhance the impact and implementation of these provisions. We hope that this will be considered as part the Alternative Care Framework which is currently being drafted by the Department of Children Disability and Equality.

Children with disabilities cared for by the State are a particularly vulnerable group. EPIC's Annual Advocacy Service Report for 2024 shows that one in seven advocacy cases were with children and young people with a diagnosed additional need or disability.[1] EPIC supports the introduction of an advocacy service for children with disabilities more generally. When EPIC advocates visit centres for a general population of children in disability residential services, there is an inequality of access to supports as EPIC's services only support children who are in the care system.

While international law does not guarantee a right to advocacy, it strongly underpins the principle. Article 12 of the UN Convention on the Rights of the Child is explicit in stating that the child's right to be heard should be facilitated not only in judicial settings but in all matters affecting the child, including in administrative proceedings. Article 7(3) of the UN Convention on the Rights of Persons with Disabilities guarantees that disabled children the right to have their views respected on an equal basis with others and places a duty States to ensure that disabled children have access to appropriate assistance to realise that right.

---

[1] www.epiconline.ie/app/uploads/2025/12/2024_EPIC_National_Advocacy_Service_Report.pdf, p.11

There is a lack of data relating to children in care with a disability. The Tusla Performance and Activity Reports does not include specific centralised data about children in care with disabilities. However, one Irish study found that children with intellectual disabilities were 12 times more likely to be in care compared to non-disabled children and that those with more complex needs were more likely to be placed in a residential setting rather than foster care.[2]

A key issue presenting in EPIC advocacy cases related to disability is the delay in after-care planning for young people before they turn 18. The impact of not knowing where the follow-on placement will be places so much additional pressure on young people as they near the end of placement. Late initiation of planning means services frequently reacts to crises rather than preventing them. Disability case management is limited, and long-term planning is inconsistent.

Our advocacy work also highlights gaps in services and resources. There is insufficient availability of home-share, residential, and respite options for young people approaching 18. Pathways of transition to appropriate adult services are often unclear and access to therapeutic supports can lapse when a child moves placement or county. In some cases, a young person may not be profiled for training and day services on time resulting in them missing out on a full year of access to services.

Another recurring issue is that access to HSE disability services generally requires a moderate disability diagnosis, leaving those with mild intellectual disability without adequate support. Planning and support approaches often fail to consider the intersection between care experience, disability, and trauma, especially for young people with mild intellectual disability.

There are still ongoing problems with the implementation of the Joint Protocol for Interagency Collaboration between the Health Service Executive and Tusla. Young people frequently encounter delays in assessments, difficulties in referral pathways, and barriers accessing therapeutic or specialist support. EPIC encounters many examples where the protocol is not consistently adhered to or is only applied at a very late stage. Some regions show excellent collaboration between aftercare and HSE Disability Services with clear role delineation. In other areas, once HSE disability services become involved, aftercare withdraws leaving full oversight and responsibility to the HSE, depriving the young person of this important relationship with their aftercare worker.

---

[2] McConkey, Roy, Fionnola Kelly, and Sarah Craig. 'A national comparative study over one decade of children with intellectual disabilities living away from their natural parents', British Journal of Social Work 44, 3 (2014), 714–28.

In 2023 EPIC published *Headphones, Odd Shoes & A Second Chance at Life*[3] by Deborah Erwin, an exploratory study about the lived experience of children in the care system, and young people in after care with disabilities. The research found that there were significant challenges in identifying supports & services in a timely and effective manner, with one participant describing it as “a never-ending challenge”. Participants shared their experience of struggling to identify and access services, and encountering slow responses, delays, cancellations, rejections, or accessibility issues, which are indicative of a range of ‘systems let-downs’. Several gaps in provision emerged in the research, including a lack of coordination between agencies, insufficient awareness of available supports for children and young people with disabilities within the care system, and limited capacity to respond to ongoing support or accessibility needs.

The experience of EPIC would support the introduction of a representative advocacy service for all children with a disability. An area of particular concern to is the need for access to independent advocacy for children with communication challenges, including children who are non-verbal, particularly those placed in residential care. Currently, referrals for these children often depend on staff in the disability service, rather than as an accessible right. A dedicated advocacy service would ensure sufficient time, expertise, and consistency to understand each child’s communication needs and represent their views effectively.

What is outlined above is the experience of EPIC in engaging with the current system and I hope this will be of service to the committee in understanding the need for advocacy support and the benefit to children and young people in having access to that support.

However, we would also encourage the committee to consider that a representative advocacy service would not only benefit children and young people—it would also strengthen the effectiveness of the broader system. Advocacy acts as a bridge between services, families, and the child, helping to ensure that plans are clearly communicated, responsibilities are understood, and delays or gaps are identified early. This can reduce duplication, prevent crises, and support more efficient use of resources.

In addition, as outlined above, advocacy brings an independent, rights-based perspective that can improve accountability and consistency across agencies. By ensuring that children’s voices are central to decision-making, advocacy supports better-informed and more sustainable outcomes. It also

---

[3] Deborah Erwin, Headphones, Odd Shoes & A Second Chance at Life (2023) – EPIC

enhances inter-agency collaboration by clarifying issues, facilitating communication, and supporting problem-solving across organisational boundaries.

In this way, investing in advocacy is not an additional burden on the system—it is a practical mechanism for improving how the system functions. A well-resourced advocacy service can help services work better together, reduce inefficiencies, and ultimately deliver better outcomes for children and young people with disabilities.