

empowering people in care

## REPORT ON EPIC ADVOCACY CASES 2017



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## ACKNOWLEDGEMENTS

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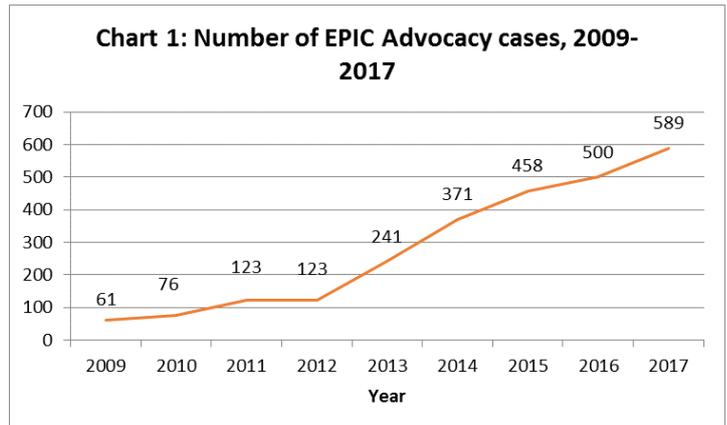
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# EXECUTIVE SUMMARY

## Number of Advocacy cases & Referrals

The number of EPIC advocacy cases increased from 61 in 2009 to 589 in 2017. Between 2016-17, the number of advocacy cases rose from 500 to 589, an increase of 18%.

In 2017, there were 434 Referrals to EPIC, which had increased by 17% since 2016 (from 370).



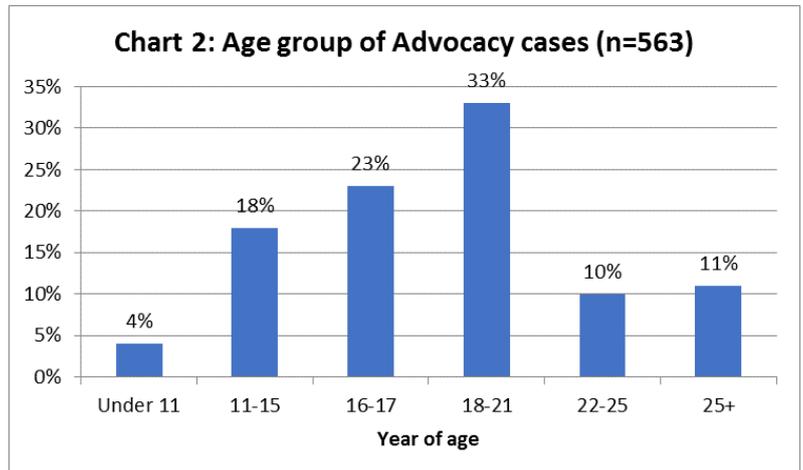
## Young people's characteristics

### Gender

56.9% (335) were female, 42.4% (250) were male and 0.7% (4) involved three Transgender young people and one young person in the 'other' gender category.

### Age

The age of children and young people who received advocacy support ranged from 4 years old (one case) to 48 years old (one case). On average, young people were age 19 years old. Chart 2 shows that over one half of cases involved young people, 56% (317), were aged 16-21 years old.



### Ethnicity

Data was available for 516 cases: 77% (399) were White Irish, 6% (33) were White Irish Traveller, 4% (20) from another White background. Also 7% (36) were Black African, 2% (12) were Asian and 1% (4) from another Black background.

### Separated young people

Just 2% (11) of Advocacy cases involved a separated young person, although this had increased from 0.6% (3) in 2016.

### Geographical location

- 28% (162) of young people lived in the Dublin North East area
- 29% (172) lived in Dublin Mid Leinster
- 26% (151) lived in the South
- 16% (95) lived in the West

Data was missing for the remaining 9 cases.

Out of the Advocacy cases that involved young people currently in State care (n=244), just over two thirds, 70% (172), were living in a care placement in the *same geographical region* to that responsible for their care. The breakdown for each of the four regions was as follows:

- Dublin North East, 72% (28)
- Dublin Mid Leinster, 84% (47)
- South, 78% (75)
- West, 58% (22)

### Care placement in the same region responsible for care

Young people were placed in a *different area* to that responsible for their care in 23% (57) of cases. Data for the remaining 6% (15) was missing.

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**Participation in education/training**

Data was available for 502 cases. In 2017, 61% (304) of cases involved young people taking part in an educational or training course, which had fallen slightly from 63% in 2015.

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**Special needs**

Nearly one in six cases, 16% (93), involved a child or young person with a diagnosed special need, which had fallen slightly from 20% in 2016.

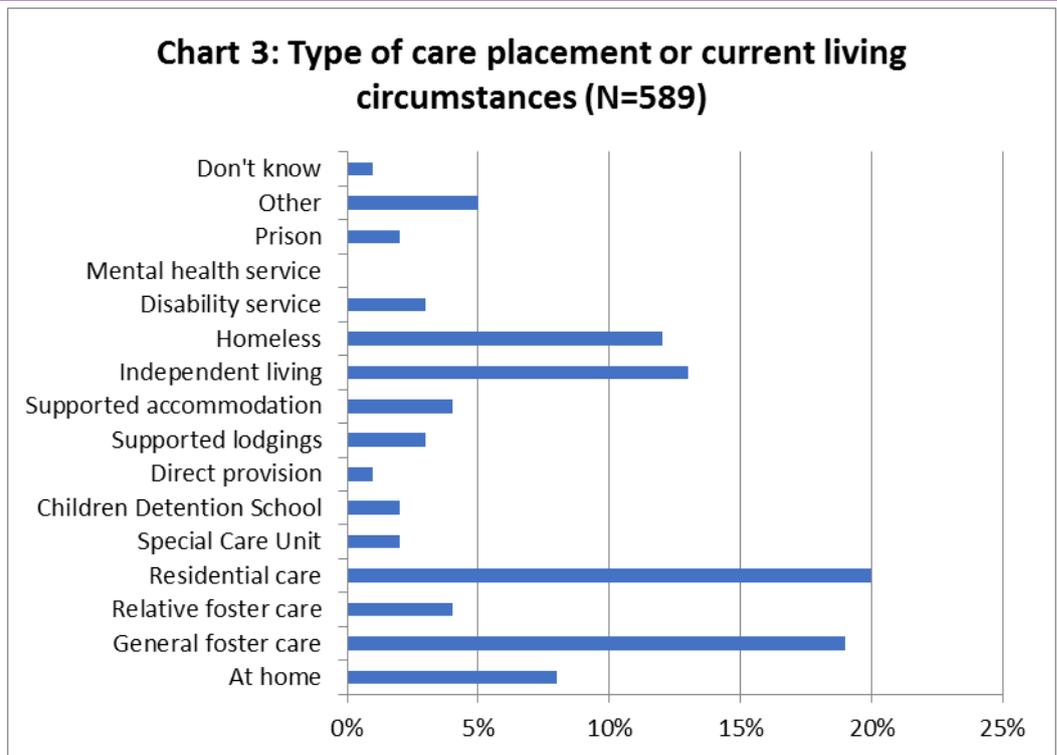
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**Aspects of care placements**

**Care status**

- 41% (244) were in care
  - 22% (132) were in Aftercare
  - 19% (112) were categorised as ‘post-leaving care’
  - 5% (31) were not in care, e.g. detention, disability service, at home, Section 5. The remaining 2% were in other categories and 10% were missing.
- 

**Type of care placement/current living circumstances**



**Private care provider**

In 2017, 7% (44) of Advocacy cases involved a young person in a placement with a private care provider, which had fallen from 14% (70) in 2016. Most young people (36) were in residential care.

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**Nature of Advocacy cases**

**Purpose of case**

- 77% (454) for Advocacy
- 14% (85) for support only
- 8% (47) for information only. (Data for the remaining 1% was missing)

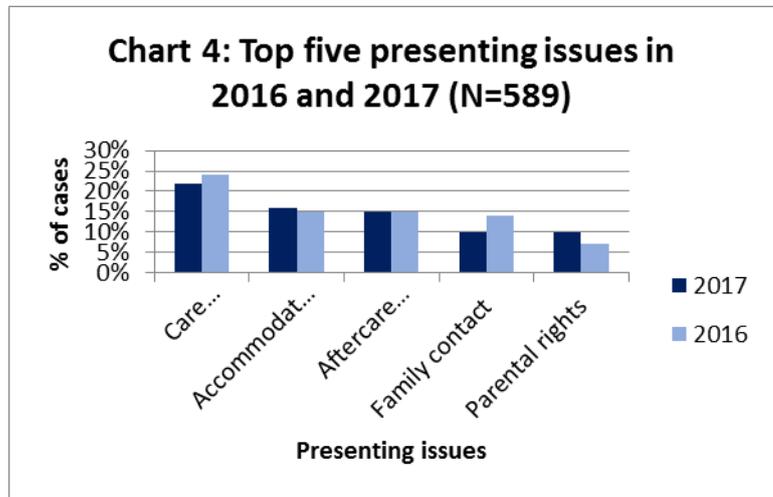
Advocacy is defined as ‘providing a skilled and independent person to give a voice to and represent the rights of children and young people in care’.<sup>1</sup> The above three categories are likely to overlap as providing advocacy is also likely to involve giving support and providing information.

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<sup>1</sup> This definition is taken from EPIC’s *Advocacy Policy and Practice Document*, March 2013 (p.4)

**Main presenting issues**

The top five presenting issues in 2017 were the same as those in 2016. Care placement remained the top presenting issue.



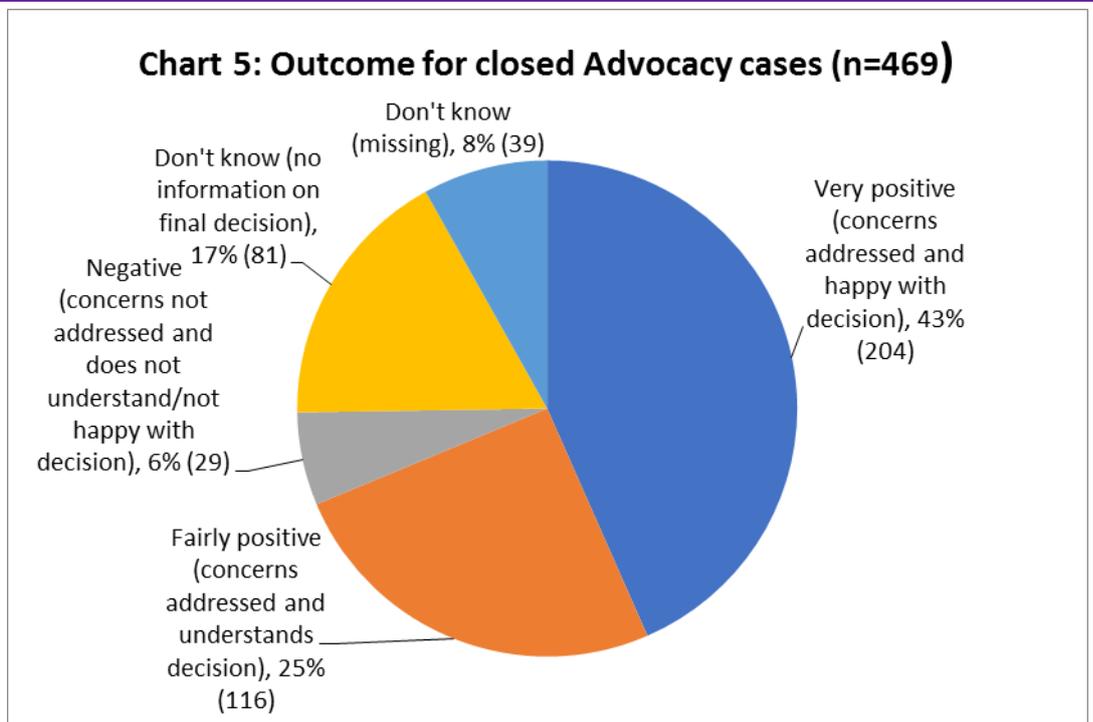
**Duration of cases**

- 27% (127) for less than 1 month
- 31% (146) for 1-2 months
- 24% (111) for 3-5 months
- 11% (51) for 6-12 months
- 7% (34) for more than one year

This was measured for closed cases only (n=469).

On average, Advocacy cases lasted for 124 days (approximately four months), which compared to an average of 158 days in 2016.

**Rating of outcome**



## INTRODUCTION

This report gives an overview of the EPIC Advocacy cases in 2017. It presents a profile of the young people who sought advocacy support, identifies the main presenting issues and key actions taken by EPIC to address their concerns. The aim of EPIC's advocacy work is to empower children in care and young people with care experience to have a say in issues that affect their lives. The nature of EPIC's role can vary from providing basic information, for example, in relation to social welfare entitlements, to providing practical support, such as assisting a young person to find an education course or appropriate accommodation. At the highest level of engagement, one of the EPIC Advocacy team may be asked by a young person to represent their views on their behalf, for example, by attending a care or aftercare review meeting.

This is the ninth annual report on EPIC Advocacy cases, the first of which was in 2009. The number of Advocacy cases has increased substantially over these eight years – from 61 in 2009 to 589 in 2017. During the year 2017, there were eight Advocacy Officers in EPIC, two in each of the main regions: Dublin North East; Dublin Mid Leinster; South; and West. Therefore, on average, each EPIC Advocacy Officer dealt with 73 cases throughout the year, which has increased from an average of 63 cases in the previous year 2016, when there was a total of 500 EPIC Advocacy cases. In 2017, there were 434 Referrals to the EPIC National Advocacy Service. Compared to the previous year 2016, when there were 370 Referrals, this has increased by 17%.

The data presented in this report will help to inform the future development of EPIC's Advocacy work. In addition, the issues raised will contribute to EPIC's policy work by helping to track emerging trends in presenting issues being experienced by young people who received support from EPIC's National Advocacy Service.

## METHODOLOGY

An Advocacy case file is opened when a young person agrees to receive advocacy support from EPIC. As well as documenting the issues involved and key developments during the case, information on young people's basic characteristics is recorded. Therefore, each Advocacy case comprises both quantitative and qualitative data.

The data from EPIC Advocacy cases is entered into a Salesforce database by the EPIC Advocacy Officer who has been allocated to the case. When data entry is complete, it is then analysed using Salesforce and a final report compiled. This report for 2017 is the fourth year that data on EPIC's Advocacy cases has been compiled and analysed using Salesforce.<sup>2</sup>

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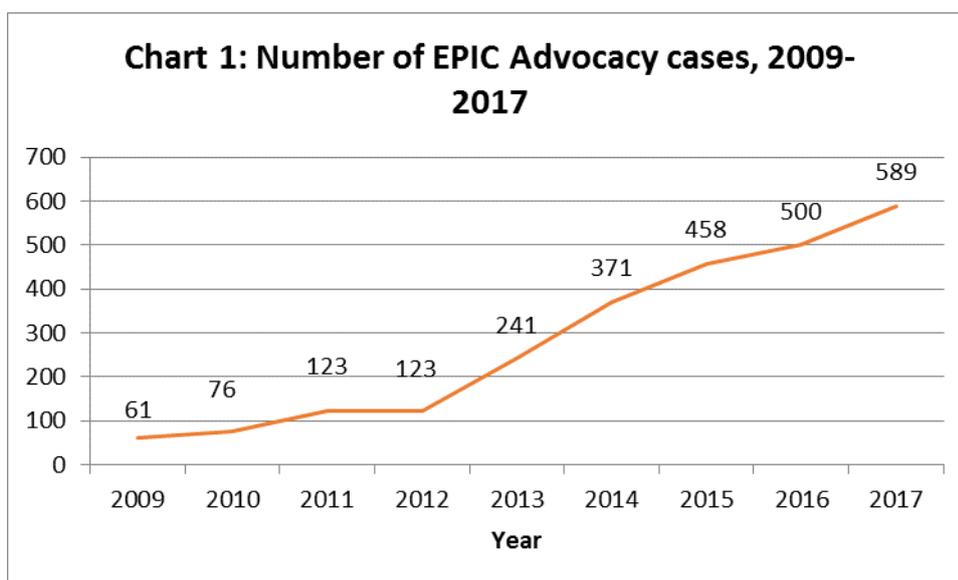
<sup>2</sup> Since 2014, the information recorded in EPIC's advocacy cases is now stored electronically in a Salesforce database.

## MAIN FINDINGS

### Number of Advocacy cases and Referrals<sup>3</sup>

#### *Advocacy cases*

Chart 1 shows the number of EPIC Advocacy cases between 2009 and 2017.



In 2017, there was a total of 589 EPIC Advocacy cases. This compares to 500 in the previous year 2016, which represents an increase of 18% between 2016-17. It can be seen that the number of Advocacy cases has risen year on year, with the increase being particularly high since 2012. In September 2013, four additional Advocacy Officers were employed to cover the areas of Dublin Mid Leinster and the Southern region. From 2013-14, the number of cases increased by 54% (from 241 to 371), which can be largely attributed to the doubling of EPIC Advocacy Officers. However, from 2014-17, the number of cases was still increasing with the same number of staff, which reflects an increasing demand for the EPIC Advocacy service

<sup>3</sup> The figures presented in this report are based on figures that were correct when the data analysis was carried out, i.e. May/June 2018.

during this time. In 2017, the increase in the number of Advocacy cases was not as high as in previous years but was still on an upward trend.

In 2017, all the EPIC Advocacy cases comprised work with individual children and young people. In previous years, a small number of cases involved Advocacy work with a group of children/young people. For example, in 2016, 1% (4) of all cases involved a group, such as several young people living in the same residential centre.

In some instances, a young person may have had more than one Advocacy case during the year as they may have requested support at different times or for different issues. In 2017, 88 young people had more than one Advocacy case: 63 had two cases; 20 had three cases; and five young people had four cases. The number of young people who had more than one Advocacy case had increased between 2016-17: in 2016 this figure stood at 68 young people, while during 2017 this number rose to 88, an increase of 23%. Therefore, in 2017, there was a tendency for many young people to return to EPIC to receive additional support or help with a different issue at some later stage during the year.

The total number of individual young people involved in EPIC's Advocacy cases in 2017 was 471 (taking account of multiple cases). In 2016, this figure was 412. Therefore, between 2016-17, the number of individual young people who engaged with EPIC's National Advocacy Service increased by 14% (59). This represents the number of individual young people who were given information, support and/or advocacy by EPIC during the year. Also, almost one in five young people who engaged with EPIC in 2017, 19%, sought Advocacy support for another presenting issue at the same time or returned to EPIC later in the year to do so – 88 out of 471 young people had more than one Advocacy case in the year.

### *Referrals to EPIC*

In 2017, there were 434 Referrals to EPIC, which compares to 370 in the previous year. Therefore, the number of Referrals between 2016-17 increased by 17%. This

was in addition to an increase of 49% between 2015-16 and a rise of 35% between 2014-15.

The number of Referrals is lower than the number of Advocacy cases as many cases that were open in 2017 were referred in the previous year(s). In relation to young people who had more than Advocacy case during the year, where the presenting issue was different or there was a change in their circumstances, a new Referral form was required before opening a new Advocacy case.

## **Socio-economic characteristics**

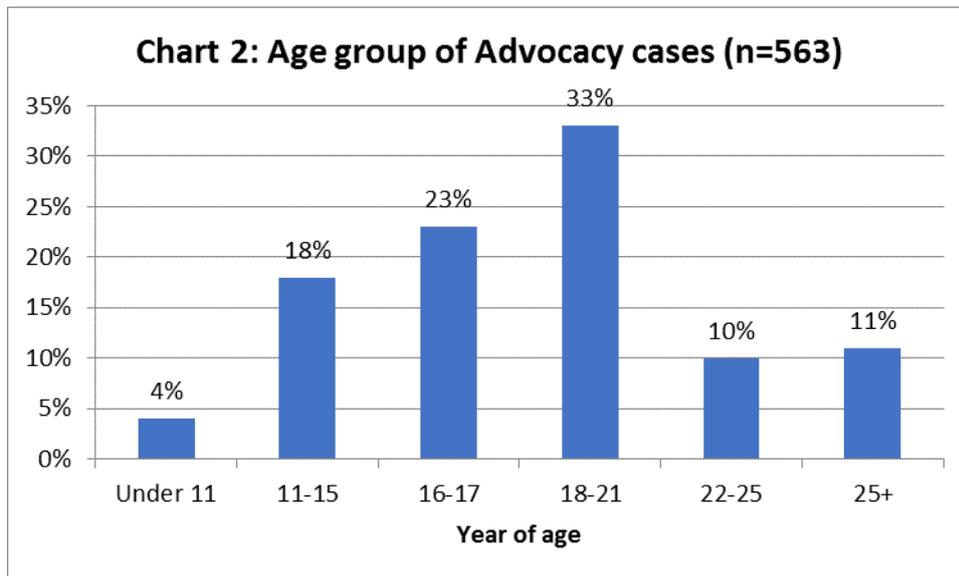
### *Gender*

In 2017, 56.9% (335) of Advocacy cases involved females and 42.4% (250) involved males. The remaining 0.7% (4) cases involved three Transgender young people, which had increased from one in the previous year, and one young person in the 'other' gender category. The male/female breakdown was very similar to the year 2016 – 57.2% female and 41.8% male.

### *Age*

In 2017, the age of children and young people who received advocacy support ranged from 4 years old (one case) to 48 years old (one case). This compares to a range of 4 years to 56 years old in the previous year 2016. Therefore, the EPIC National Advocacy Service provided support to people with a wide range of ages from pre-school children up to middle aged adults (with a care history). The average age of young people involved in EPIC Advocacy cases in the year 2017 was 19 years old, which was the same in 2016.

The data on age was divided into age groups. Chart 2 presents the results below.



Young people were most likely to be aged 18-21 years old, making up 33% (186) of Advocacy cases. This was followed by 23% (131) where young people were aged 16-17 years old. Therefore, over one half of all Advocacy cases, 56%, involved young people aged 16-21 years old. Between 2016-17, the proportion of young people aged 18-21 years old increased from 27% to 33%, while those aged 16-17 fell from 31% to 23%. Therefore, there was an increase in the number of Advocacy cases involving young people in the Aftercare age range. One fifth of all cases, 21% (118), involved young people over the age of 21 years old, which stood at 20% in 2016. Data on age was known for 563 cases and was missing for the remaining 26 cases.

Chart 2 also shows the breakdown of young people who were younger than 18 years old and those aged 18 and over – 54% (304) and 46% (259) respectively. The age profile of young people receiving advocacy support from EPIC has been increasing in recent years. Compared to the year 2016, these results were similar.

### *Country of birth*

Country of birth was known for 420 Advocacy cases. A majority of cases, 89% (372), involved young people who had been born in Ireland, which was similar to 88% in the previous year 2016. A further 3% (12 cases) involved young people born in the

UK (including one in Northern Ireland), 3% (12) in Africa (including 7 in Nigeria), 1% (5) in Albania, 1% (3) in Romania and 1% (3) in South Africa. Other countries of birth included Afghanistan, Canada, the Czech Republic, Egypt, Latvia, Poland, Serbia, Sierra Leone and Syria. These results show that almost one in 10 Advocacy cases involved a young person who was born outside Ireland.

### *Ethnicity*

Ethnicity was known for 516 Advocacy cases. Out of these, 77% (399), were White Irish, 6% (33) were White Irish Traveller and 4% (20) were from another White background. A further 7% (36) were Black African, 1% (4) from another Black background, 2% (12) were Asian and another 2% (12) in the other ethnicity category including mixed background.<sup>4</sup> Compared to 2016, there was a fall in the proportion of those from a White Irish background (89% in 2016) and an increase in the Black African (6% in 2016) and Asian categories (none in 2016).

### *Separated young people*

In 2017, 2% (11) of EPIC Advocacy cases involved a separated young person. This increased from 0.6% (3) of all cases in the previous year 2016. In 2017, nine individual separated young people engaged with EPIC for Advocacy support – two young people had two cases as they had more than one presenting issue.

### *Geographical location*

The geographical location where young people who had EPIC Advocacy cases were currently living (at the start of the Advocacy case) is as follows:

- 28% (162) of young people lived in the Dublin North East area
- 29% (172) lived in Dublin Mid Leinster

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<sup>4</sup> The categories for ethnicity were taken from the Census of Population compiled by the Central Statistics Office.

- 26% (151) lived in the Southern region, and
- 16% (95) lived in the Western region.

Data was missing for the remaining 9 cases.

The results show that over one half of cases, 57% (334), involved young people living in the Dublin North East or Dublin Mid Leinster regions, which was similar to 58% in the previous year 2016. The proportion of cases in the Southern region increased between 2016-17 (from 21% in 2016) as did those in the Western region slightly (from 14% in 2016). Where young people were in care or aftercare, this reflected the location of their current care/aftercare placement, while for those who had left care it showed the area they were currently living in.

In addition to the geographical location where young people were currently living, data was also collected on the region responsible for their care. This was collected for the first time in 2013, as it was acknowledged that the region responsible for a young person’s care placement may be different to that where they actually live, particularly for those who have left care. Chart 3 presents the data on the region responsible for young people’s care.

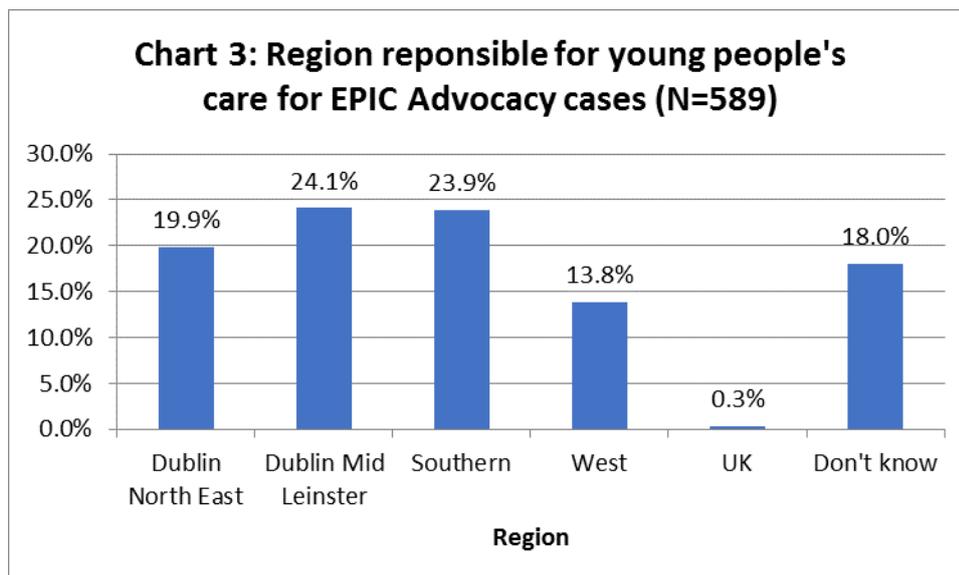


Chart 3 shows that almost one half of cases (44.0%) involved young people whose care came under the remit of Dublin North East, 19.9% (117) or Dublin Mid Leinster, 24.1% (142). This figure fell from 52% in the previous year 2016. Just under one

quarter of cases, 23.9% (141) were the responsibility of the Southern region, which increased from 20% in 2016. While a further 13.8% (81) were under the remit of the Western region (similar to 14% in 2016). A small number of cases, 0.3% (2), were the responsibility of child care services in the UK.

Further analysis found that in 2017 almost one in seven EPIC Advocacy cases, 15% (88), involved a young person living in a different area to that which was responsible for their care. This had fallen from 21% in the previous year, however it still represents a sizeable number of cases. A breakdown by age group found that 63% (55) of such cases involved young people under the age of 18, while 34% (30) related to young adults aged 18 years or older.<sup>5</sup> It might be expected that care leavers would be more likely to be living in a different area than that responsible for their care. However, the above result shows that almost two thirds of the Advocacy cases involving young people who were currently living in a placement outside of the area responsible for their care were under the age of 18 years old. Furthermore, this had increased from 53% in the previous year 2016.

Additional analysis was carried out to compare the geographical region responsible for a young person's care and that where they were living for those Advocacy cases where a young person's care status was *in care* (n=244). Table 1 shows the results. Data was missing on one of the variables for 15 cases, therefore the Table is based on 229 cases.

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<sup>5</sup> Data on age was missing for the remaining three cases.

Table 1: Region responsible for care by current geographical location for Advocacy cases where young people are currently in care (n=229)

<b>Region responsible for care</b>	<b>Region living in</b>				<b>Total</b>
	<b>DNE</b>	<b>DML</b>	<b>South</b>	<b>West</b>	
<b>DNE</b>	28	3	7	1	<b>39</b>
<b>DML</b>	6	47	2	1	<b>56</b>
<b>South</b>	8	7	75	6	<b>96</b>
<b>West</b>	11	3	2	22	<b>38</b>
<b>Total</b>	<b>53</b>	<b>60</b>	<b>86</b>	<b>30</b>	<b>229</b>

- Dublin North East – Out of a total of 39 cases in care which were under the remit of DNE, 72% (28) involved young people living in a placement in the same region. The remaining 11 cases were placed in a different region: 3 in DML; 7 in the South; and one in the West.
- Dublin Mid Leinster – Out of 56 cases in care under the remit of DML, 84% (47) involved young people living in a placement in the same region. The remaining 9 cases were placed in a different region: 6 in DNE; 2 in the South; and one in the West.
- South – Out of the 96 cases in care under the remit of the South, 78% (75) involved young people living in a placement in the same region. The remaining 21 cases were placed in a different region: 8 were in DNE; 7 in DML; and 6 in the West.
- West – Out of the 38 cases in care under the remit of the West, 58% (22) involved young people living in a placement in the same region. The remaining 16 cases were placed in a different region: 11 in DNE; 3 in DML; and 2 in the South.

This data shows that 57 cases involved children and young people in care who were placed in a *different area* to that responsible for their care. This happened across all four regions to a different extent. Out of all the 244 cases where children and young people were currently in care, this represents almost one quarter, 23%. Compared to the previous year 2016, this percentage has fallen slightly from 25% (65 cases). Additional analysis on these 57 cases in 2016 showed that placements in a Children

Detention School or Special Care Unit were fairly small, 11 in total (19%), and did not explain this finding. More than six in ten of these cases, 66% (38), were in mainstream residential care at the time.

### *Participation in education or training*

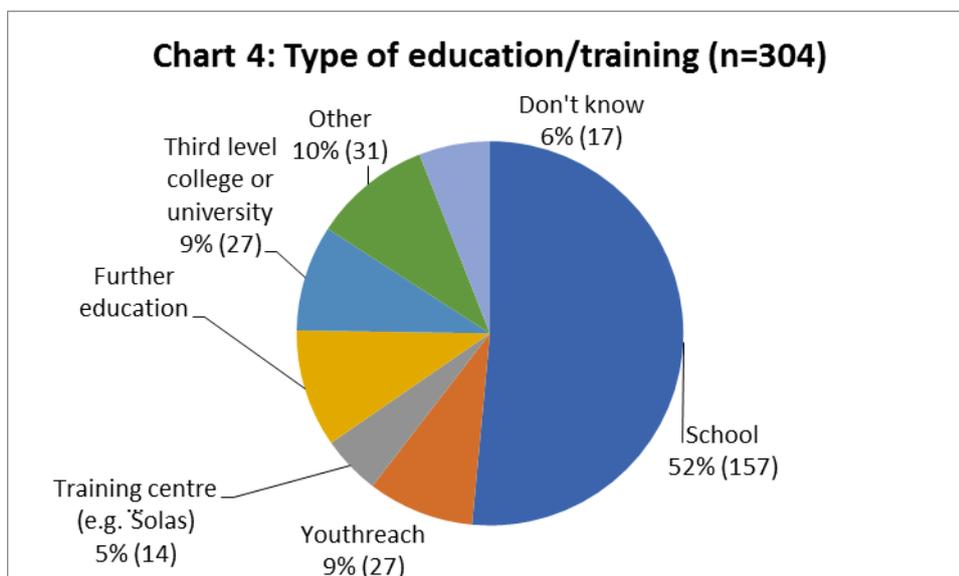
Information was given about young people's engagement in education or training for 502 Advocacy cases – 61% (304) were currently involved in education or training while 39% (198) were not. Compared to the previous year 2016, there was a slight fall in the likelihood of being engaged in education/training from 63%. In 2017, the educational participation of young people under the age of 18 was 59% (180) compared to 26% (51) for those over the age of 18. The educational participation of both age groups fell between 2016-17 - 68% (under 18) and 32% (18 years and over).

When compared with statistics on the percentage of young people in care aged 6-17 years old in full-time education, the educational participation of young people who engaged with EPIC is relatively low. National figures published by Tusla (2018) show that at the end of 2017, 98% of children in care aged 6-15 years old and 94% of those aged 16-17 years old are reported to be in full-time education.<sup>6</sup>

Chart 4 gives a breakdown of the type of education or training that young people were participating in.

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<sup>6</sup> Tusla (2018) Quarterly Performance and Activity Data, Quarter 4 2017 – see the link <https://www.tusla.ie/data-figures/2017-performance-data/> (accessed 14<sup>th</sup> June 2018)



Over one half of Advocacy cases where young people were engaged in education/training were going to school, 52% (157), which accounts for the higher educational participation of young people aged under 18 compared to those aged 18 and over. Next came Further Education, e.g. Post Leaving Certificate courses, at 10% (31). Third level college/university and Youthreach each accounted for 9% (27) of cases. Compared to 2016, the participation of young people in Third level college/university and in Further Education doubled from 4% and 5% respectively. This is a positive finding and shows a growing participation in post second level education amongst young people engaging with EPIC.

### *Diagnosed special needs*

Almost one in six of EPIC's Advocacy cases in 2017, 16% (93), involved a child or young person with a diagnosed special need. Compared to the previous year 2016, this had fallen slightly from 20%. The type of special needs varied widely, and in some cases, young people had been diagnosed with more than one need (14 cases). The most common types of special needs were as follows:

- Intellectual/learning disability, 56 cases (including 19 mild, 5 moderate and 4 severe)
- Autistic Spectrum Disorder, 9 cases

- Asperger's Syndrome, 5 cases
- Attention Deficit Hyperactivity Disorder, 4 cases
- Epilepsy, 4 cases
- Brittle bone disease, 3 cases
- Mental health difficulties, 3 cases
- Acquired Brain Injury, 2 cases
- Global Developmental Delay, 2 cases
- Cerebral Palsy, 2 cases
- Non-verbal, 2 cases
- Bi-polar Disorder, 1 case
- Dyspraxia, 1 case
- Personality Disorder, 1 case
- Visual impairment, 1 case
- Physical disability, 1 case
- Attachment disorder, 1 case
- Obsessive Compulsive Disorder, 1 case

It is possible that these findings underestimate the actual prevalence of special needs amongst young people who engaged with EPIC, as it may not always have been disclosed or apparent, particularly in relation to mild learning difficulties. Furthermore, a special need may not yet have been diagnosed. However, these results show that many of the young people that EPIC's National Advocacy Service engaged with in 2017 had a diagnosed disability or special need.

### **Aspects of care placements**

Some information was collected on certain aspects of young people's care placements in terms of their care status, the nature of their current placement (or living circumstances for those who have left care) and the number of placements while in care.

## Care status

Chart 5 shows the care status of young people involved in EPIC Advocacy cases in 2017.

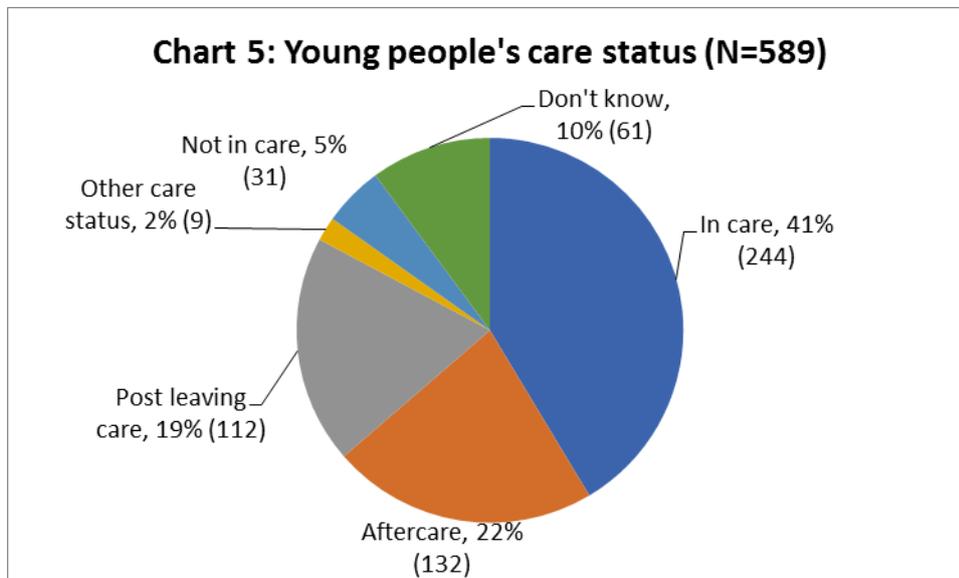


Chart 5 shows that four in ten of EPIC's Advocacy cases, 41% (244), represented young people who were currently in care and 22% (132) were in Aftercare. A further 19% (112) were categorised as 'post leaving care', having already left care (these young people were typically in their 20's or older). A small number of cases involved young people who were not in care, 5% (31), including a Children Detention School (8 cases), homeless (Section 5 of the Child Care Act 1991) (6 cases), residential disability service (5 cases) and at home with family (5 cases). Other types of care status included prison, respite care arrangement and adoption.

Compared to the previous year 2016, the proportion of cases involving children/young people in care had fallen from 46% (229) to 41% (244) in 2017, although the actual number of cases had increased in line with the overall increase in the total number of Advocacy cases between 2016-17. Also, between 2016-17, there was an increase in the number of cases involving a young person in aftercare, from 18% (88) in 2016 to 22% (132). Therefore, in 2017, a growing number of EPIC's Advocacy cases involved supporting a young person who had left care fairly recently or within the last few years.

### *Type of care placement/current living circumstances*

Chart 6 presents the findings on young people's type of care placement or current living circumstances in the Advocacy cases for 2017.

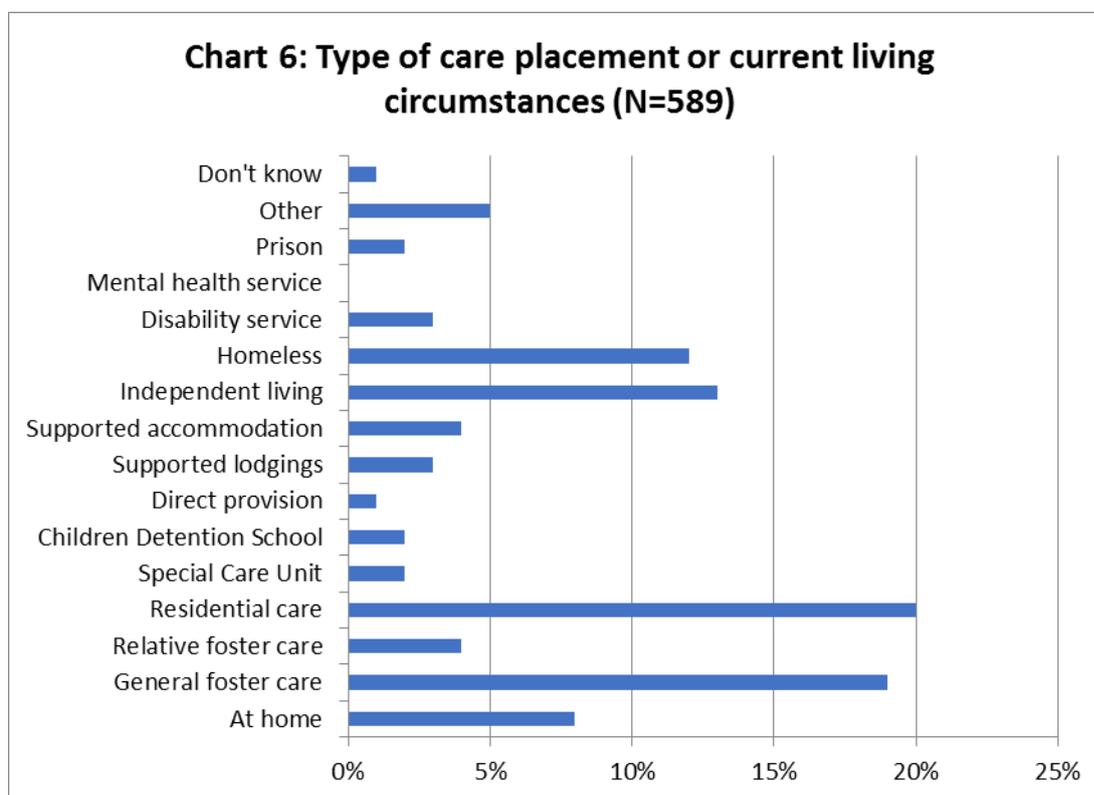


Chart 6 shows that Advocacy cases were most likely to involve young people who were in foster care – 19% (109) in general foster care and 4% (25) in relative foster care. Second came residential care, which accounted for 20% (119) of all Advocacy cases. In addition, there were a number of cases involving young people who were living at home, 8% (50), which included those under a Supervision Order and those who had left care and returned to live with family members. Also, there were a number of cases where young people were living in a Special Care Unit, 2% (14) or Children Detention School, 2% (12). A small number were living in Direct Provision, 1% (5).

Compared to the previous year 2016, the proportion of Advocacy cases involving a child or young person in foster care has increased from 16% (84) in 2016 to 23% (134) in 2017. It is interesting to note that between 2015-16, the percentage of Advocacy cases involving young people in foster care also increased from 12% in 2015 to 16% in 2016, so there has been an upward trend in recent years. This is an important finding as it marks the first year that the number of cases involving a young person in foster care has been higher than those in residential care. This finding cannot be explained by an increase in the number of young people in foster care in general. At the end of 2016, there were 4,102 children and young people in foster care nationally, which fell slightly to 4,041 at the end of 2017 (Tusla, 2018 and 2017).<sup>7</sup>

Chart 6 also shows the living circumstances for young adults who had left care – 13% (79) were living independently (typically in private rented accommodation), 3% (15) in supported lodgings and 4% (26) in supported accommodation. However, 12% (68) of all Advocacy cases in 2017 involved a young person who was currently homeless. Further analysis showed that this involved a total of 61 individual young people, which included seven who had two Advocacy cases in 2017.<sup>8</sup>

Between 2016-17, the number of Advocacy cases involving a homeless young people increased from 8% (42) in 2016 to 12% (68) in 2017, an increase of 62%. In 2017, there were seven homeless cases involved young people under the age of 18 (three aged 15, two aged 16 and two aged 17), which had increased from two homeless cases under 18 in the previous year 2016. In 2017, there were 27 Advocacy cases involving a young person aged 18-20 who was homeless. Therefore, young people under the age of 21 accounted for one half of all homeless

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<sup>7</sup> Tusla (2018) Quarterly Service Performance & Activity Report, Quarter 4 2017 – see the link [https://www.tusla.ie/uploads/content/Q4\\_2017\\_Service\\_Performance\\_and\\_Activity\\_Report\\_Final.pdf](https://www.tusla.ie/uploads/content/Q4_2017_Service_Performance_and_Activity_Report_Final.pdf) (accessed 14th June 2018)

Tusla (2017) Integrated Performance & Activity Report, Quarter 4 2016 – see the link [https://www.tusla.ie/uploads/content/Q4\\_2016\\_Integrated\\_Performance\\_and\\_Activity\\_Report\\_Final\\_V2\\_Table\\_8\\_Amended\\_08Mar2017.pdf](https://www.tusla.ie/uploads/content/Q4_2016_Integrated_Performance_and_Activity_Report_Final_V2_Table_8_Amended_08Mar2017.pdf) (accessed 14th June 2018)

<sup>8</sup> The definition of homelessness used here is in line with the Youth Homelessness Strategy (Department of Health and Children, 2001:11) which defines youth homelessness as sleeping on the streets, in temporary accommodation (e.g. hostels, B&Bs) or insecure accommodation with relatives or friends.

Advocacy cases in 2017 (total of 34). In addition, a gender analysis of homeless cases in 2017 showed that 63% (43) involved females and 37% (25) were male. Compared to 2016, the gender breakdown was 60% (25) female and 40% (17) male. Therefore, between 2016-17, Advocacy cases involving a female young person who was homeless increased slightly from 60% to 63%.

#### *Private care provider*

In 2017, a total of 7% (44) of Advocacy cases involved young people in the care of a private provider. Compared to the previous year 2016, this figure had fallen from 14% (70). Further analysis showed that most cases involved young people in residential care (36), while another 3 were in a disability service and one in foster care. In contrast, figures published by Tusla (2018) show that the number of children in care in private placements has increased from 538 at the end of 2016 to 614 at the end of 2017.<sup>9</sup>

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<sup>9</sup> Tusla (2018) Quarterly Service Performance and Activity Report, Quarter 4 2017 – see the link [https://www.tusla.ie/uploads/content/Q4\\_2017\\_Service\\_Performance\\_and\\_Activity\\_Report\\_Final.pdf](https://www.tusla.ie/uploads/content/Q4_2017_Service_Performance_and_Activity_Report_Final.pdf) (accessed 14th June 2018)

*Length of time in current placement/living circumstances*

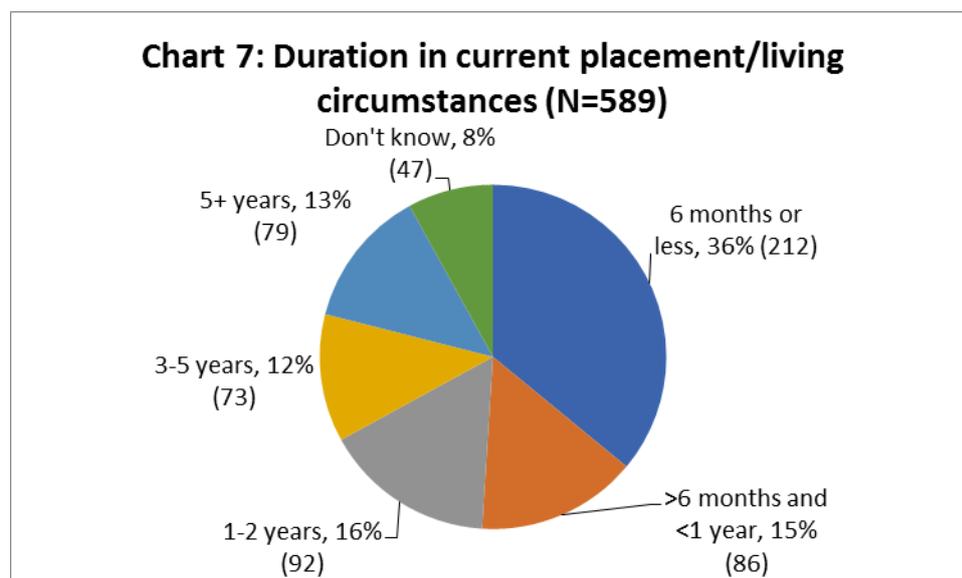
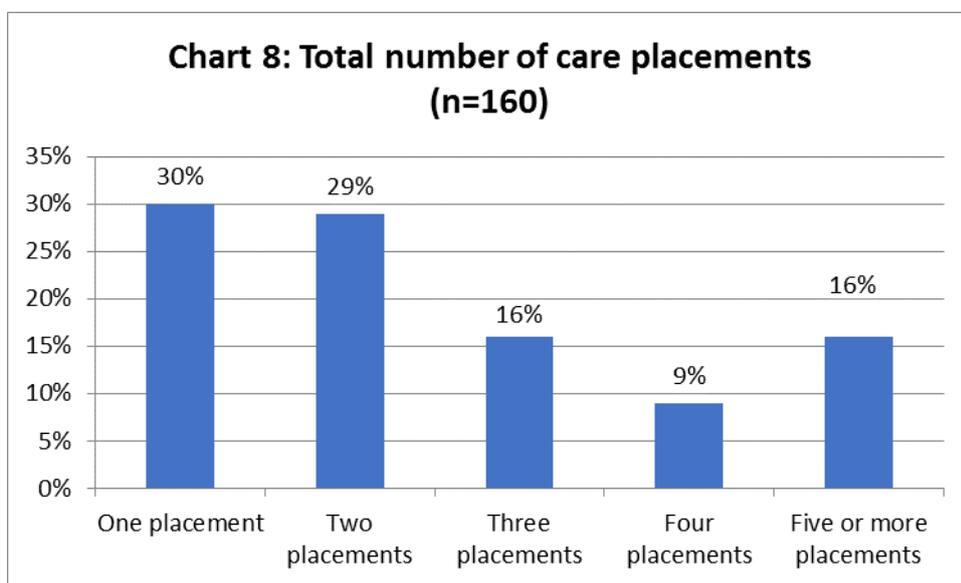


Chart 7 shows the length of time spent in the current placement or living circumstances of young people who were involved in EPIC Advocacy cases in 2017. Just over one third of cases, 36% (212), involved a young person being in the same placement or living circumstances for six months or less, while another 15% (86) had been there for more than six months and less than one year. Therefore, just over one half of cases (51%) comprised young people being in the same placement or living circumstances for less than one year, which was slightly down from 53% in 2016. This compared to 41% (244) of Advocacy cases involving young people who had been in the same placement/living circumstances for one year or more. Data was missing for the remaining 8% of cases. Compared to the previous year 2016, these findings were very similar.

### Total number of care placements

Another measure of stability is the total number of care placements for young people who were engaged with EPIC in 2017. This information was available for 160 cases, which represents 27% of all Advocacy cases. Chart 8 shows the results.

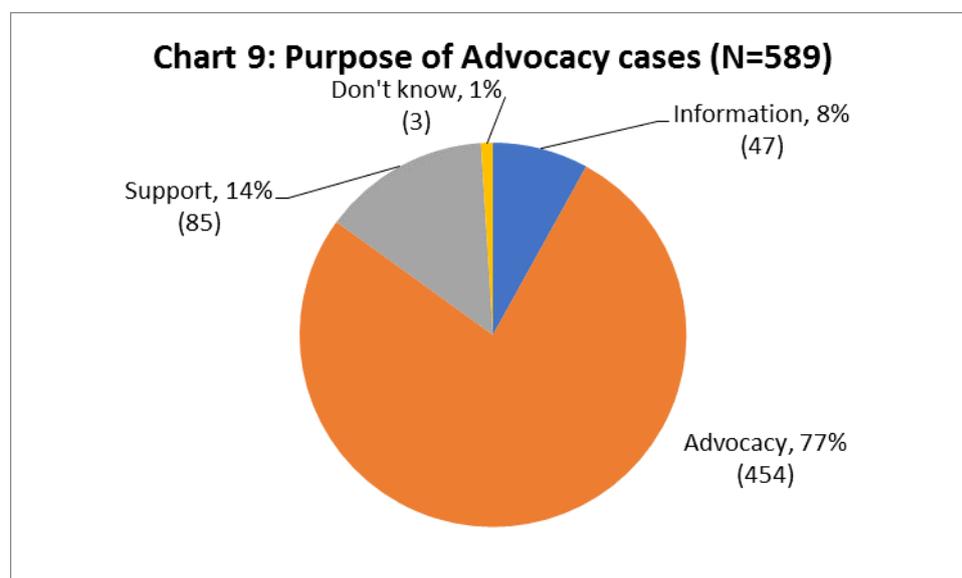


Out of these 160 cases, 30% (48), had just one placement in care, and 29% (47) had two placements. By contrast, one in six Advocacy cases, 16% (25), involved young people who had five or more care placements. Therefore, while 6 in 10 cases had just one or two placements, a sizeable number of Advocacy cases involved young people who experienced some instability of placement during their time in care.

Across all 160 Advocacy cases, the total number of care placements ranged from one (48 cases) to 47 (one case). Results were similar to those for 2016 with the average number of placements being 3.3 in 2017, just slightly down from 3.5 in the previous year 2016.

## Purpose of Advocacy cases

Chart 9 shows the main purpose of Advocacy cases in 2017.

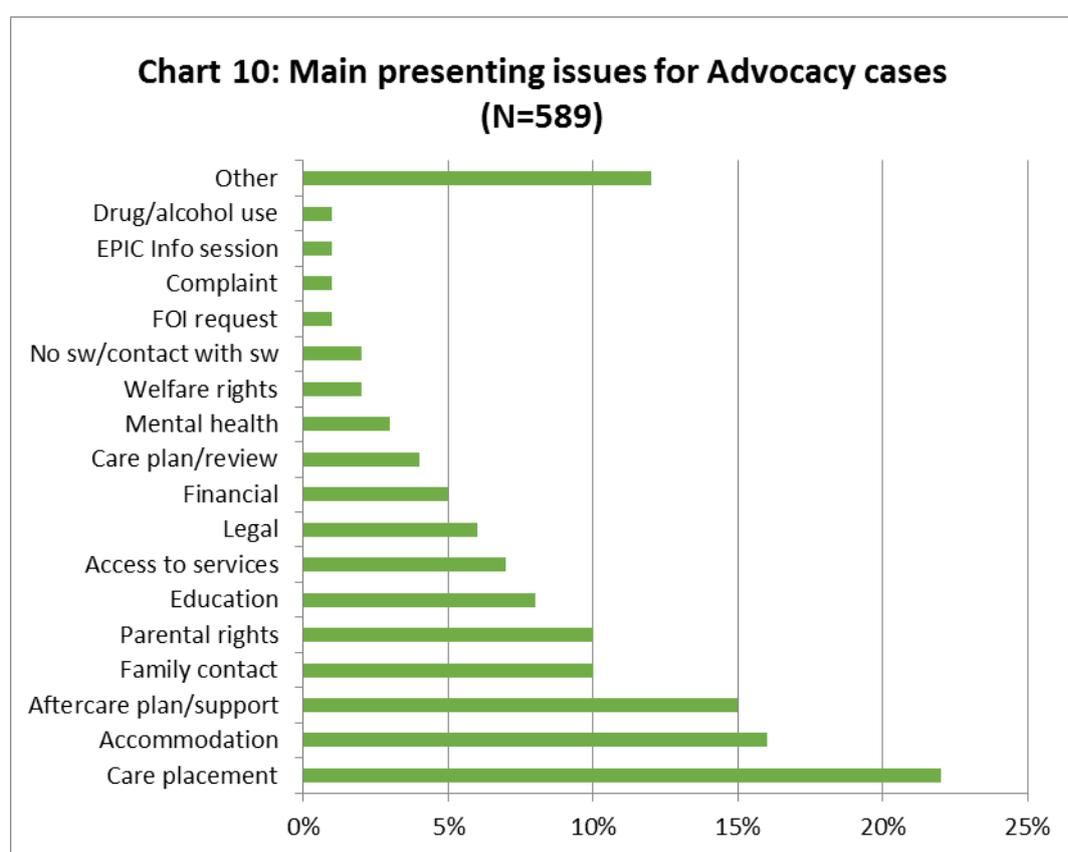


Over three quarters of cases, 77% (454), were opened to provide advocacy support to a child or young person. Advocacy is defined here as ‘providing a skilled and independent person to give a voice to and represent the rights of children and young people in care’.<sup>10</sup> Information was the main purpose for 8% (47) of cases and providing support was the primary reason for 14% (85) of cases. Compared to the previous year 2016, the figure for Advocacy has fallen from 83% while that for support has increased from 8%. It should be noted here that giving information and support are also likely to be involved where the main purpose of the case is Advocacy, so the categories are not completely exclusive.

<sup>10</sup> This definition is taken from EPIC’s *Advocacy Policy and Practice Document*, March 2013 (p.4)

## Main presenting issues

Advocacy cases record the main presenting issues that resulted in children and young people seeking advocacy support from EPIC. This records the presenting issue(s) at the time of the start date of the case.<sup>11</sup> This information provides an insight into the issues or difficulties facing children and young people who seek advocacy support from EPIC. Chart 10 shows the results for the main presenting issues for the 2017 Advocacy cases.



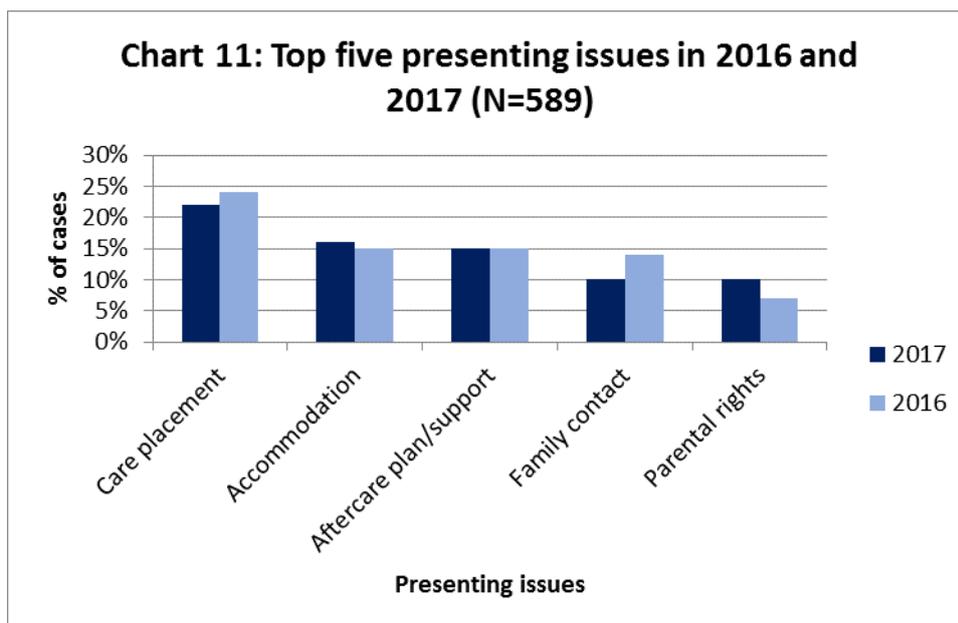
<sup>11</sup> While presenting issues can change over time, these results are based on the initial presenting issue(s) that led to the opening of an Advocacy case. If a different presenting issue emerges during a case, a new Advocacy case is opened to provide more accurate data on the nature of presenting issues and to capture the work involved.

Chart 10 shows that the top five main presenting issues in 2017 were as follows:

- Care placement, 22% (132)
- Accommodation, 16% (94)
- Aftercare plan/support, 15% (87)
- Family contact, 10% (61)
- Parental rights, 10% (58)

It is important to state that the data recorded here refers to the main *overriding* presenting issue. However, in relation to 165 cases, two issues were recorded and are included in the results presented here. Many Advocacy cases involved complex issues which may only emerge over time. In order to keep the data analysis and reporting manageable, it was necessary to keep the data entry to one or two responses.<sup>12</sup>

Compared to 2016, the top five presenting issues have remained the same. Chart 11 presents the results.



<sup>12</sup> It is acknowledged that this could have had an impact on the interpretation of the findings reported in Chart 10. For example, mental health is recorded as the main presenting issue for just 3% of Advocacy cases in 2017. However, this is not to say that mental health issues did not arise in other cases, but rather it was the key presenting issue for these cases.

Chart 11 shows that the percentage of Advocacy cases where care placement was the main presenting issue has fallen slightly from 24% (120) in 2016 to 22% (132) in 2017. However, care placement remains the top main presenting issue for EPIC Advocacy cases. Accommodation, which includes homelessness, and aftercare plan/support are the second and third most prevalent presenting issues in both years respectively. The proportion of cases where family contact was the main presenting issue fell between 2016-17, while there was an increase in the prevalence of parental rights.

The next section presents one case study for each of the top five presenting issues. They are presented here to give examples of real life situations being experienced by young people who seek advocacy support from EPIC.<sup>13</sup>

### **Case studies of presenting issues**

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<sup>13</sup> Each case study gives an overview of the main issues arising and summarises the work done by EPIC to address the concerns raised. In order to protect young people's anonymity, all names have been changed along with other identifying information including gender, age, geographical location, family background and care history details.

## **Case study 1: Care placement**

### Background

Chloe is 13 years old and lives in long term foster care in the Western region. She has been told that she will be moving placement and is anxious about this. She doesn't want to move too far from her siblings and friends. Her foster carer contacted EPIC. The case lasted for one year.

### Main presenting issues

- Chloe's proposed new foster care placement is in a different area and would mean changing school.
- Chloe is worried that she will be moved around to many different placements as her behaviour has been an issue.
- Chloe would like to communicate her concerns to her Social Worker and to have some input into the final decision made.

### Key actions by EPIC

- Discussed the key issues of concern with Chloe.
- Contacted Chloe's Social Worker on her behalf and sent an email listing the points that Chloe wants her Social Worker to know. Attended a meeting with Chloe and her Social Worker to discuss the issues raised.
- Attended Chloe's Child in Care Review supporting her to speak at the meeting.
- Met Chloe in her new foster care placement and encouraged her to contact EPIC again for any support in future.

### Outcome

Chloe's new placement was going well and a review was agreed six months later to see how the placement was going. Chloe was happy with this decision.

## Case study 2: Accommodation

### Background

Lisa is 20 years old and was in residential care as a teenager. She lives in the Dublin Mid Leinster area and has been homeless for nearly six months. She has two children both of whom are in care. This case was on-going and lasted for 18 months.

### Main presenting issues

- Lisa was looking to find somewhere to live with her partner as she wanted her two children to be returned to her care.
- Lisa and her partner were looking for more access with their two children.
- Lisa was looking to access local community supports to deal with addiction issues.

### Key actions by EPIC

- Arranged to meet Lisa and her partner to find out their concerns.
- Contacted and met with Lisa's Aftercare Worker to discuss the issues raised.
- Attended a meeting in the local Social Work Department regarding access issues.
- Linked Lisa in with local homeless and addiction services.
- Remained in contact with Lisa to give support when needed.

### Outcome

Lisa moved to private rented accommodation. Her children remained in care while she received support for addiction issues. Lisa did not engage with EPIC after this.

### **Case study 3: Aftercare plan/support**

#### Background

Gerry was 20 and had been in care for six months when aged 17 years old. He was from the Dublin North East region and was now living in the Southern region. He was told he was not entitled to aftercare support. The case lasted for two months.

#### Main presenting issues

- Gerry wanted to follow up about his entitlement to aftercare.
- Gerry was currently in the first year at university and was looking for some financial support to continue with his studies.
- He was at risk of becoming homeless as he was having difficulty paying his rent despite working in a part-time job.

#### Key actions by EPIC

- Met Gerry to talk about his concerns and find out what support he was looking for.
- Helped Gerry to write a letter to the local Social Work Department to follow up his aftercare entitlement.
- Supported Gerry to apply for educational financial assistance and for a place in the college halls of residence.
- Continued to link in with Gerry for a while to offer any further support that was needed.

#### Outcome

Gerry did not receive aftercare support as he was in care for less than one year. However, he received financial help and was allocated a room in the college halls of residence so he could continue with his course.

#### **Case study 4: Family contact**

##### Background

Sean is 16 years old and lives in residential care in the Dublin North East region, where he had been for nine months. He wanted more contact with his mother. The case lasted for three months.

##### Main presenting issues

- Sean was looking to have some overnight stays with his mother and more contact at weekends.
- Sean wanted to find out when he would be leaving the residential care unit.

##### Key actions by EPIC

- Arranged to meet Sean to discuss his Advocacy issues and give him some information on EPIC.
- Contacted Sean's Social Worker to pass on his views.
- Attended Sean's Child in Care Review at his request
- Informed Sean he could contact EPIC for future advocacy support if needed.

##### Outcome

Increased access with Sean's mother was not granted at this time due to his challenging behaviour in the residential unit. This was going to be reviewed at a later date.

## Case study 5: Parental rights

### Background

Sarah is 30 years old and lives in private rented accommodation in the Southern region. She has three children who are in care. Sarah was in long term foster care as a child and teenager and she contacted EPIC for support. The case lasted for nearly two years.

### Main presenting issues

- Sarah would like her three children to be returned to her care. She is looking for information on her parental rights and support with court hearings.
- She is also looking for support in relation to understanding her own care history.

### Key actions by EPIC

- Meet Sarah to talk about her concerns and issues of importance to her.
- Contacted a Social Worker involved in Sarah's case.
- Attend an Interim Care Order hearing with Sarah and provide support to help her understand what was happening.
- Support Sarah through the Parental Assessment process – help to fill in forms and attend meetings.
- Attend an access review meeting with Sarah.

### Outcome

Sarah's children remained in care while she received the necessary support to understand her own care background and address some mental health issues.

## Initial contact with EPIC

### *Person who initiated contact with EPIC*

In 2017, one half of all Advocacy cases, 50% (296), were initiated by young people, which increased slightly from 48% (239) compared to the previous year 2016. Next came Social Workers at 15% (86), which increased from 11% (54) in 2016, followed by Social Care Workers at 6% (34). After this came foster carers, 5% (28) and Aftercare Workers, 5% (27).

### *Form of initial contact*

Chart 12 shows the form that initial contact with EPIC took in relation to the Advocacy cases in 2017.

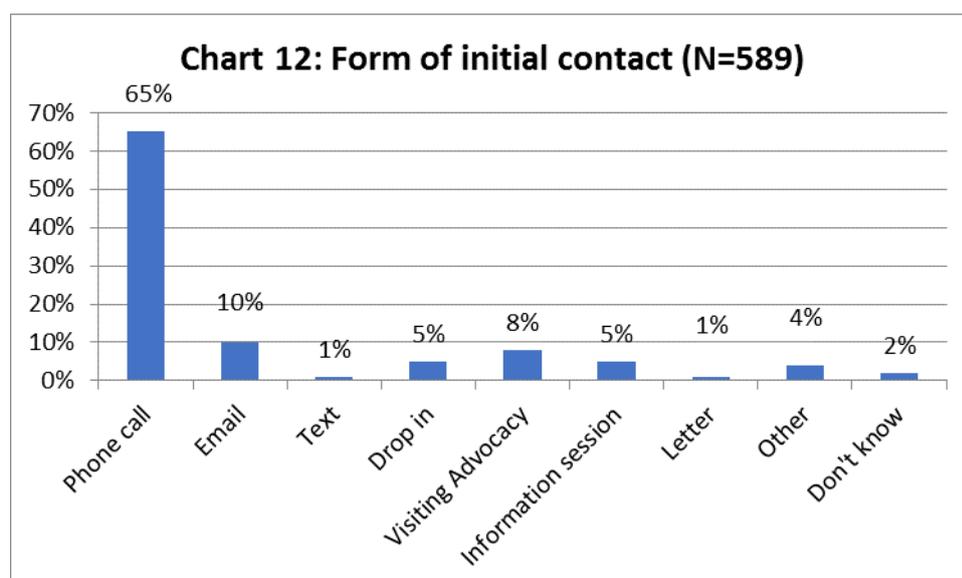


Chart 12 shows that almost two thirds of cases, 65% (384), were opened after a phone call, which was the most common form of initial contact. This result was similar to that for the previous year 2016, 66% (328). One in ten cases were opened following an email, 10% (56), which had increased from 6% in 2016. A further 8% (45) of cases were opened after Visiting Advocacy had taken place, which was

similar to 9% in 2016. Another 5% (31) of cases were initiated following a drop in visit from a young person (when they called into an EPIC office without an appointment) and another 5% (28) after an information session by an EPIC Advocacy Officer.

### **Initial EPIC response**

Information was recorded on the initial response from EPIC following the opening of Advocacy cases in 2017. Arrangements were made by EPIC Advocacy Officers to meet young people in 70% (412) of all cases, while other contact with young people was made in another 4% (26) of cases. Therefore, the initial EPIC response was to contact the young person in almost three quarters, 74%, of all cases, which was the same in 2016.

A further 29% (168) of cases involved an EPIC Advocacy Officer contacting the young person's Social Worker or Key Worker as the initial response, very similar to 28% in the previous year 2016. While 1% (8) of cases involved contact with a foster carer, which had fallen from 3% in 2016. Similarly, another 1% (7) of cases involved contact with a young person's parent, which was the same in 2016.

More than one response was recorded where appropriate, so the total adds up to more than 100%. It should also be stated that this indicator recorded EPIC's initial response just after the opening of an Advocacy case, therefore the extent of contact with these stakeholders is likely to increase as the case continues.

## Duration of Advocacy cases

The duration of Advocacy cases in 2016 was measured by calculating the number of days between the start date and the last action date for each case. This was analysed for closed cases only (n=469).<sup>14</sup> On average, Advocacy cases lasted for 124 days, i.e. just over four months. Compared to the previous year 2016, this had decreased from an average of 158 days.

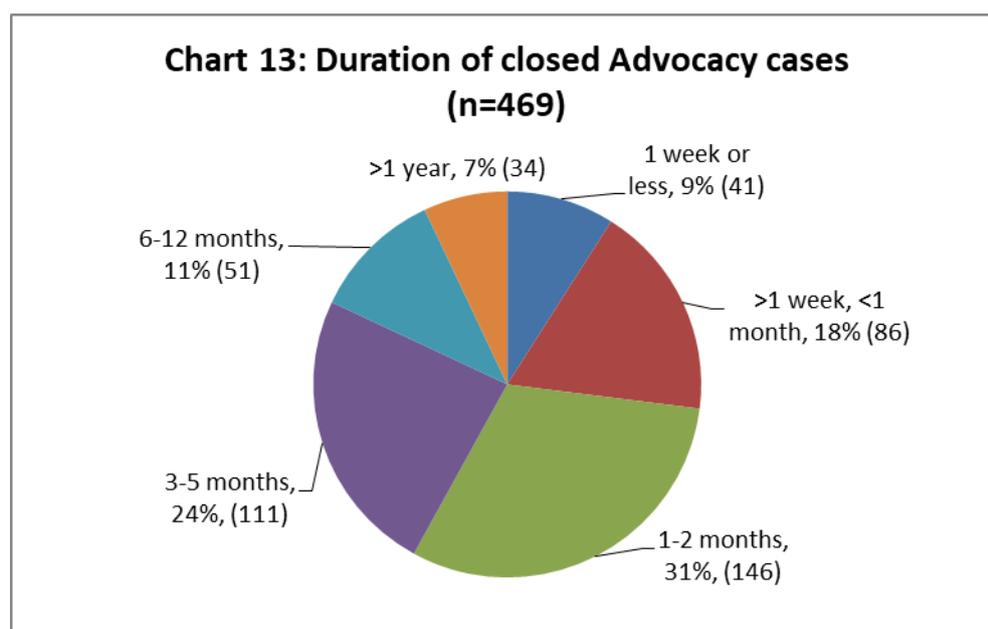


Chart 13 presents the results for the duration of closed Advocacy cases in 2017 grouped into categories. It shows that almost one third of closed cases, 31% (146), lasted between 1-2 months. This was followed by 24% (111) of cases that comprised 3-5 months. Compared to the year 2016, the results were largely the same. Between 2016-17, cases lasting for 1-2 months increased from 27% to 31% and those continuing for more than one year fell from 13% to 7%.

<sup>14</sup> Cases were included once they were closed by the time of carrying out the data analysis, i.e. May/June 2018.

## Rating of outcome of Advocacy cases

When each Advocacy case is closed, the EPIC Advocacy Officer is asked to give a rating for the outcome of the case. This rating is based on two factors: firstly, whether the young person's concerns were addressed; and secondly, the young person's satisfaction with the final decision. At the time of compiling this data, there were 469 closed cases. Chart 14 shows the results.

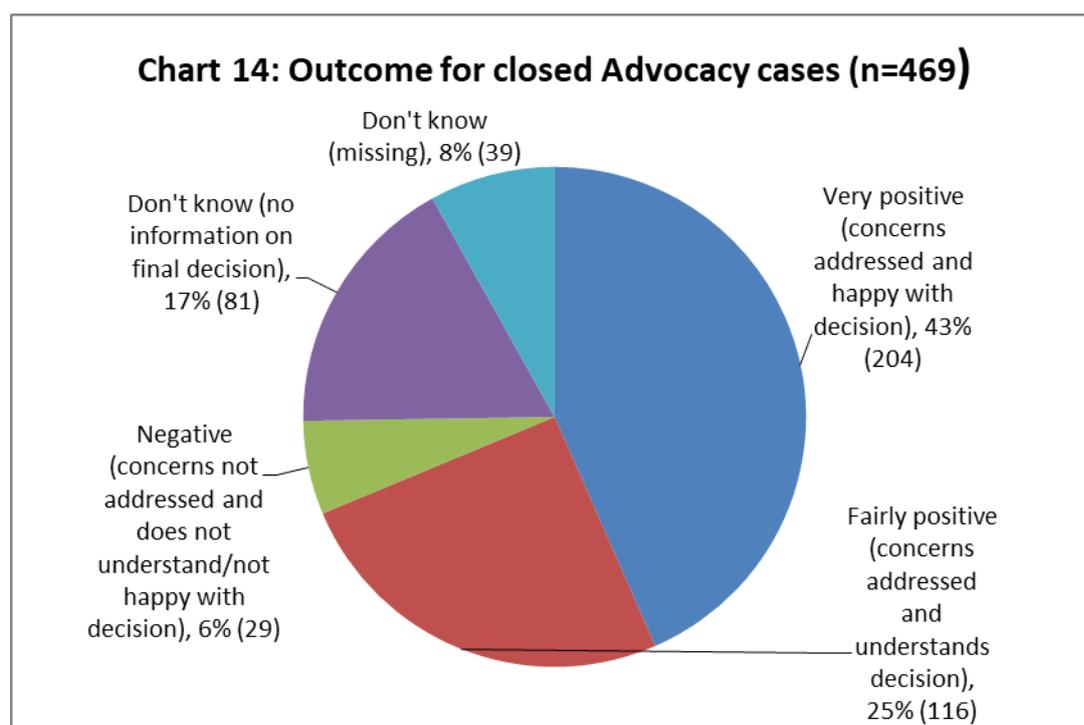


Chart 14 shows that 43% (204) of closed Advocacy cases were deemed to have a very positive outcome in that the young person's concerns were addressed and they were deemed to be happy with the final decision. Another 25% (116) of cases were given a fairly positive outcome as the young person's concerns were addressed and they understood the decision. Therefore, just over two thirds of all closed cases, 68%, were deemed to have a positive outcome, which was similar to 67% in the previous year 2016. Just 6% (29) of cases were deemed to have a negative outcome, although this has increased from 4% in the previous year 2016.

Information on the outcome for the remaining 25% (120) was not known. There were two possible reasons for this: firstly, the Advocate may not have known the final

outcome when the case was closed, which accounted for 17% (81) of cases (e.g. the young person may not be engaging with the Advocate); and secondly, missing data in the case file on this variable, which represented 8% (39) of cases. It is reasonable to suggest that some of these unknown cases may have had a negative outcome, especially where a young person chose to disengage from the EPIC Advocacy Service. More information is needed to establish the reason for unknown or missing data in this regard. However, based on the data that is available for Advocacy cases in 2017, a positive outcome was reported for almost seven out of ten Advocacy cases. Therefore, engaging with the EPIC Advocacy Service was likely to help children and young people to have their concerns addressed and at least be able to understand the final decision made.

## CONCLUSIONS

This report has presented data on the 589 Advocacy cases that were responded to by EPIC in 2017. It considers the profile of the young people who contacted EPIC for support and the nature of their presenting issues. The top five presenting issues remain similar to those for previous years, which indicates that certain difficulties are coming up repeatedly for individual young people in care and with care experience. In particular, care placement has been the most prevalent issue since compiling these reports over the last nine years. In addition, accommodation needs, support with aftercare, issues around family contact and parental rights are recurring themes when it comes to the reason why young people seek Advocacy support from EPIC.

The findings in this report show that the EPIC National Advocacy Service is asked to respond to a diverse range of support needs amongst young people as well as an increasing demand for Advocacy support. Between 2016-17, the average number of cases per EPIC Advocacy Officer increased from 63 to 73. This was in line with the rise in the total number of Advocacy cases from 500 to 589 over this time while the number of staff remained the same. Furthermore, a sizeable number of cases involved young people with particular support needs: an increase in Advocacy cases where young people were homeless, especially females; and a greater number of cases involving young people in aftercare. One in six cases involved a young person with a diagnosed special need or disability. Such cases are likely to involve multiple presenting issues and last for a longer period of time.

This report highlights the great need for an independent Advocacy service for children in care and young people with care experience in Ireland today. Furthermore, almost one in five individual young people who engaged with EPIC in 2017 sought Advocacy support for another presenting issue or returned to EPIC at a later stage during the year. EPIC has a vital role to play in complementing statutory supports for this vulnerable group and promoting the welfare and well-being of this cohort of children and young people.