REPORT ON EPIC ADVOCACY CASES 2018

Fiona Daly
October 2019
ACKNOWLEDGEMENTS

EPIC would like to thank everyone who has accessed and supported its National Advocacy Service. In particular, thanks to the primary funders of the Advocacy Service in 2018, Tusla, The Child and Family Agency. During the course of its advocacy work, EPIC links in with a variety of different professionals working in statutory and voluntary organisations, as well as other individuals, who are dedicated and committed to meeting the needs of young people with care experience. EPIC would also like to acknowledge the young people’s involvement in, and engagement with its National Advocacy Service, which has resulted in this report. Finally, thanks to Enclude who have assisted EPIC with its Salesforce database and provided ongoing support.
<table>
<thead>
<tr>
<th>TABLE OF CONTENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>EXECUTIVE SUMMARY</td>
</tr>
<tr>
<td>INTRODUCTION</td>
</tr>
<tr>
<td>METHODOLOGY</td>
</tr>
<tr>
<td>MAIN FINDINGS</td>
</tr>
<tr>
<td>Number of Advocacy cases and Referrals</td>
</tr>
<tr>
<td>Advocacy cases</td>
</tr>
<tr>
<td>Referrals to EPIC</td>
</tr>
<tr>
<td>Socio-economic characteristics</td>
</tr>
<tr>
<td>Gender</td>
</tr>
<tr>
<td>Age</td>
</tr>
<tr>
<td>Country of birth</td>
</tr>
<tr>
<td>Ethnicity</td>
</tr>
<tr>
<td>Separated young people</td>
</tr>
<tr>
<td>Geographical location</td>
</tr>
<tr>
<td>Participation in education or training</td>
</tr>
<tr>
<td>Diagnosed special needs</td>
</tr>
<tr>
<td>Aspects of care placements</td>
</tr>
<tr>
<td>Care status</td>
</tr>
<tr>
<td>Type of care placement/current living circumstances</td>
</tr>
<tr>
<td>Private care provider</td>
</tr>
<tr>
<td>Length of time in current placement/living circumstances</td>
</tr>
<tr>
<td>Total number of care placements</td>
</tr>
<tr>
<td>Purpose of Advocacy cases</td>
</tr>
<tr>
<td>Main presenting issues</td>
</tr>
<tr>
<td>Case studies of presenting issues</td>
</tr>
<tr>
<td>Initial contact with EPIC</td>
</tr>
<tr>
<td>Person who initiated contact with EPIC</td>
</tr>
<tr>
<td>Form of initial contact</td>
</tr>
<tr>
<td>Initial EPIC response</td>
</tr>
<tr>
<td>Duration of Advocacy cases</td>
</tr>
<tr>
<td>Rating of outcome of Advocacy cases</td>
</tr>
<tr>
<td>CONCLUSIONS</td>
</tr>
</tbody>
</table>
EXECUTIVE SUMMARY

Number of Advocacy cases & Referrals
The number of EPIC advocacy cases increased from 61 in 2009 to 653 in 2018. Between 2017-18, the number of advocacy cases rose from 589 to 653, an increase of 11% (64). In 2018, there were 395 Referrals to EPIC.

Young people’s characteristics

Gender
55.7% (364) were female, 44.1% (288) were male and 0.2% (1) involved one young person in the ‘other’ gender category.

Age
On average, the age of children and young people who received advocacy support from EPIC was 19 years old. Chart 2 shows that over one half of cases, 60% (380) involved young people aged 16-21 years old.

Ethnicity
Data was available for 444 cases: 78% (345) were White Irish, 5% (21) were White Irish Traveller, 4% (16) from another White background. Also 10% (45) were Black African, 1% (4) from another Black background, 2% (7) were Asian and 1% (6) in the ‘other’ ethnicity category.

Separated young people
Just 1% (7) of Advocacy cases involved a separated young person, which fell from 2% in the previous year 2017.

Geographical location
- 24.7% (161) of young people lived in the Dublin North East area
- 34.5% (225) lived in Dublin Mid Leinster
- 21.7% (142) lived in the South
- 17.6% (115) lived in the West, and
- 0.2% (1) lived in Northern Ireland.
Data was unknown for the remaining 9 cases.

Care placement in the same region responsible for care
Out of the Advocacy cases that involved young people currently in State care (n=229), almost two thirds, 62% (141), were living in a care placement in the same geographical region to that responsible for their care. The breakdown within each of the four regions was as follows:
- Dublin North East, 80% (20)
- Dublin Mid Leinster, 81% (50)
- South, 76% (50)
- West, 68% (21)

Young people were placed in a different area to that responsible for their care in 19% (43) of cases. Data for the remaining 19% (45) was unknown.
Participation in education/training

Data was available for 510 cases. In 2018, 64% (326) of cases involved young people taking part in an educational or training course, which increased slightly from 61% in 2017.

Special needs

Almost one in seven cases, 15% (95), involved a child or young person with a diagnosed special need, which was similar to 16% in 2017.

Aspects of care placements

Care status

- 35% (229) were in care
- 24% (156) were in Aftercare
- 23% (148) were categorised as ‘post-leaving care’
- 3% (20) were not in care, e.g. detention, disability service, at home, Section 5. The remaining 3% (19) were in other categories and data on 12% (81) was unknown.

Type of care placement/current living circumstances

<table>
<thead>
<tr>
<th>Type of care placement</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unknown</td>
<td>149 (22.9%)</td>
</tr>
<tr>
<td>Other</td>
<td>84 (13.3%)</td>
</tr>
<tr>
<td>Prison</td>
<td>4 (0.6%)</td>
</tr>
<tr>
<td>Disability service</td>
<td>20 (3.0%)</td>
</tr>
<tr>
<td>Homeless</td>
<td>149 (22.9%)</td>
</tr>
<tr>
<td>Independent living</td>
<td>76 (11.5%)</td>
</tr>
<tr>
<td>Supported accommodation</td>
<td>37 (5.6%)</td>
</tr>
<tr>
<td>Supported lodgings</td>
<td>6 (0.9%)</td>
</tr>
<tr>
<td>Children Detention School</td>
<td>5 (0.8%)</td>
</tr>
<tr>
<td>Special Care Unit</td>
<td>3 (0.4%)</td>
</tr>
<tr>
<td>Residential care</td>
<td>240 (36.8%)</td>
</tr>
<tr>
<td>Relative foster care</td>
<td>16 (2.4%)</td>
</tr>
<tr>
<td>General foster care</td>
<td>18 (2.7%)</td>
</tr>
<tr>
<td>At home</td>
<td>145 (22.4%)</td>
</tr>
</tbody>
</table>

Chart 3: Type of care placement or current living circumstances for young people with EPIC Advocacy cases (N=653)

Private care provider

In 2018, 6% (37) of Advocacy cases involved a young person in a placement with a private care provider, which was similar to 7% (44) in 2017. Most young people (28) were in residential care.

Nature of Advocacy cases

Purpose of case

- 84.9% (555) for Advocacy
- 10.4% (67) for support only
- 4.3% (28) for information only. (Data for the remaining 0.5% was unknown)

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’.¹ The above three categories are likely to overlap as providing advocacy is also likely to involve giving support and providing information.

¹ 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 2018 were the same as those in 2017. Care placement remained the top presenting issue.

Duration of cases

- 26% (149) for less than 1 month
- 31% (170) for 1-2 months
- 19% (105) for 3-5 months
- 12% (69) for 6-12 months
- 11% (61) for more than one year

This was measured for closed cases only (n=554).

On average, Advocacy cases lasted for 143 days (just over four and a half months), which compared to an average of 124 days in 2017.

Rating of outcome

Chart 5: Outcome for closed Advocacy cases (n=554)

- Unknown (missing), 5% (26)
- Unknown at time of closing case, 25% (139)
- Negative (concerns not addressed and does not understand/not happy with decision), 4% (20)
- Fairly positive (concerns addressed and understands decision), 26% (144)
- Very positive (concerns addressed and happy with decision), 41% (225)
This report gives an overview of the EPIC Advocacy cases in 2018. 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 educational course or 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 tenth annual report on EPIC Advocacy cases, the first of which was in 2009. The number of Advocacy cases has increased substantially over these ten years – from 61 in 2009 to 653 in 2018. During the year 2018, 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 82 cases throughout the year, which has increased from an average of 73 cases in the previous year 2017, when there was a total of 589 EPIC Advocacy cases. In 2018, there were 395 Referrals to the EPIC National Advocacy Service. This number had fallen slightly compared to the previous year 2017, when there were 434 Referrals. However, between 2016-17 there was an increase of 17% in the number of Referrals from 370 to 434 respectively.

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 and individuals who receive support from EPIC’s National Advocacy Service.
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 all 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 by running reports in Salesforce and a final written report on the results is compiled. This report for 2018 is the fifth year that data on EPIC’s Advocacy cases has been compiled and analysed using Salesforce.

---

2 The figures presented in this report are based on figures that were correct when the data analysis was carried out in June 2019.

3 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

Advocacy cases

Chart 1 shows the number of EPIC Advocacy cases between 2009 and 2018.

In 2018, there were a total of 653 EPIC Advocacy cases. This compares to 589 in the previous year 2017, which represents an increase of 11% between 2017-18. This is in addition to an increase of 18% between the years 2016-17, from 500 to 589 cases respectively. 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, between 2014-18, the number of cases was still increasing with the same number of staff, which reflects an increasing demand for the EPIC Advocacy service during this time.
In 2018, 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 2018, 133 young people had more than one Advocacy case: 101 had two cases; 23 had three cases; 4 had four cases; 4 had five cases; and one young person had six cases. Between 2017-18, the number of young people who had more than one Advocacy case rose from 88 in 2017 to 133 in 2018, representing an increase of 51%. This is in addition to an increase in the number of individuals with more than one case of 23% between 2016-17. Therefore, it can be said that over the last few years there is a consistent trend whereby many young people return to EPIC to receive additional support or help with a different presenting issue at some later stage.

While 133 young people had more than one Advocacy case, a further 340 young people had just one case in 2018. Therefore, the total number of individual young people involved in EPIC’s Advocacy cases in 2018 was 473. This was similar to the figure of 471 recorded in the previous year 2017. The percentage of all young people who linked in with EPIC and had more than one Advocacy case over the year was 28% (133 out of 473), which had increased from 19% in the previous year.

Referrals to EPIC

In 2018, there were 395 Referrals to the EPIC National Advocacy Service. This number had fallen slightly compared to the previous year 2017, when there were 434 Referrals. During 2018, a change was made to the referral process whereby only referrals from young people who had never engaged with EPIC in the past were entered as a referral in Salesforce. A new referral was not necessary for young people who had previously engaged with EPIC and sought Advocacy support for a
different issue. Therefore, the number of Referrals in 2018 is not comparable to that in 2017. Future figures compiled on Referrals to EPIC will measure the number of new Referrals to the National Advocacy Service where young people have not engaged in the past.

It should be noted that in previous years when re-referrals were counted, there was an upward trend in the number of Referrals. Between 2016-17, there was an increase of 17% in the number of Referrals from 370 to 434 respectively. While Re-referrals were still being entered in 2018, they represented just over one quarter of all Referrals in the year, 28% (109). Throughout the year, the number of Referrals coming into EPIC remained fairly stable.

- 99 Referrals in Quarter 1
- 100 Referrals in Quarter 2
- 102 Referrals in Quarter 3
- 94 Referrals in Quarter 4

Just over one in ten of these Referrals, 11% (45), were not activated into an Advocacy case. The reasons for this were as follows:

- the young person did not engage with the Advocacy Officer, 51% (23);
- the Advocacy Officer was not able to contact the young person following the referral, 16% (7);
- the young person changed their mind, 13% (6);
- the issue was resolved, 7% (3); or
- another reason, 13% (6).

The number of Referrals is lower than the number of Advocacy cases as several cases that were open in 2018 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 2018, 55.7% (364) of Advocacy cases involved females and 44.1% (288) involved males. The remaining 0.2% (1) case involved a young person whose gender was categorised as ‘other’. The male/female breakdown was very similar to the previous year 2017 – 56.9% female, 42.4% male and 0.7% other.

Age

In 2018, the age range of individuals who received advocacy support ranged from 5 years old (one case) to 68 years old (one case). This compares to a range of 4 years to 48 years in the previous year 2017. Therefore, the EPIC National Advocacy Service provided support to people with a wide range of ages from a young child of Junior Infants age up to older adults (with a care history). The average age of young people involved in EPIC Advocacy cases in the year 2018 was 19 years old, which was the same in 2017.

The data on age was divided into age groups. Chart 2 presents the results below. 4

---

4 Data on age was available for 630 cases and was unknown for the remaining 23 cases.
Young people were most likely to be aged 18-21 years old, making up 36% (227) of Advocacy cases. This was followed by 24% (153) where young people were aged 16-17 years old. Therefore, almost two thirds of all Advocacy cases, 60%, involved young people aged 16-21 years old. Compared to 2017, these findings were similar, with 33% aged 18-21 and 23% aged 16-17 years old. Almost one quarter of cases, 23% (147), involved young people over the age of 21 years old, many of whom were in aftercare.

Chart 2 also shows the breakdown of young people who were younger than 18 years old and those aged 18 and over – 41% (256) and 59% (374) respectively. Compared to 2017, the proportion of Advocacy cases involving a child or young person under the age of 18 fell from 54% to 41% in 2018, while those with young/older adults in aftercare aged 18 years and over increased from 46% to 59%.

*Country of birth*

Country of birth was known for 322 Advocacy cases. A majority of cases, 90% (289), involved young people who had been born in Ireland, which was similar to 89% in the previous year 2017. A further 2% (6 cases) involved young people born in the UK (including one in Northern Ireland), 5% (15) in Africa (including 3 in South Africa and 2 in Nigeria), and 1% (4) in Afghanistan. Other countries of birth included Albania, the Czech Republic, Latvia, the Netherlands, Pakistan, Poland, Romania, Serbia, Sierra Leone and Sudan. These results show that one in 10 Advocacy cases involved a young person who was born outside Ireland.

*Ethnicity*

Ethnicity was known for 444 Advocacy cases. Out of these, 78% (345), were White Irish, 5% (21) were White Irish Traveller and 4% (16) were from another White background. A further 10% (45) were Black African, 1% (4) from another Black background, 2% (7) were Asian and another 1% (6) in the other ethnicity category.
including mixed background. Compared to 2017, the figures were largely the same except for a small increase in the Black African category (7% in 2017).

**Separated young people**

In 2018, 1% (7) of EPIC Advocacy cases involved a separated young person, which had fallen from 2% in the previous year 2017.

**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:

- 24.7% (161) of young people lived in the Dublin North East area
- 34.5% (225) lived in Dublin Mid Leinster
- 21.7% (142) lived in the Southern region
- 17.6% (115) lived in the Western region, and
- 0.2% (1) lived in Northern Ireland.

The results show that over one half of cases, 59.2% (386), involved young people living in the Dublin North East or Dublin Mid Leinster regions, which was slightly higher than 57% in the previous year 2017. The number of cases involving young people living in the Dublin Mid Leinster increased from 2017-18: from 29% to 34.5%. 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

---

5 The categories for ethnicity were taken from the Census of Population compiled by the Central Statistics Office.
6 Data was not known for the remaining 9 cases.
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 one quarter of cases, 24.5% (160), involved young people whose care came under the remit of Dublin Mid Leinster, while a further 13.8% (90) were Dublin North East. Therefore, almost 4 out of 10 Advocacy cases involved young people whose care was the responsibility of social work/aftercare services in the Dublin region and surrounding areas. Another 17.9% (117) were under the remit of the Southern region and 10.6% (69) in the West. A small number of cases, 0.4% (2), were the responsibility of child care services outside the Republic of Ireland, one case in Northern Ireland and another in the UK. The region responsible for a young person’s care was not known for one third of all cases, 32.9% (215). It is likely that many of these cases involved young people who had aged out of the care system.

Further analysis found that 12% (81) of EPIC Advocacy cases involved a young person living in a different area to that which was responsible for their care in 2018. This figure has fallen compared to previous years – 15% in 2017 and 21% in 2016, however it still represents a sizeable number of one in eight cases. A breakdown by age group found that 54% (44) of such cases involved young people under the age
of 18, while 43% (35) related to young adults aged 18 years or older. 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 more than one half of 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. This figure had fallen from 63% in the previous year 2017.

Additional analysis was carried out to compare the geographical region responsible for a young person’s care and where they were living for those Advocacy cases where a young person’s care status was in care (n=229). Table 1 shows the results.

Table 1: Region responsible for care by current geographical location for Advocacy cases where young people are currently in care (n=184)

<table>
<thead>
<tr>
<th>Region responsible for care</th>
<th>Region living in</th>
<th></th>
<th></th>
<th></th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>DNE</td>
<td>DML</td>
<td>South</td>
<td>West</td>
<td></td>
</tr>
<tr>
<td>DNE</td>
<td>20</td>
<td>2</td>
<td>3</td>
<td>0</td>
<td>25</td>
</tr>
<tr>
<td>DML</td>
<td>6</td>
<td>50</td>
<td>5</td>
<td>1</td>
<td>62</td>
</tr>
<tr>
<td>South</td>
<td>7</td>
<td>4</td>
<td>50</td>
<td>5</td>
<td>66</td>
</tr>
<tr>
<td>West</td>
<td>1</td>
<td>3</td>
<td>6</td>
<td>21</td>
<td>31</td>
</tr>
<tr>
<td>Total</td>
<td>34</td>
<td>59</td>
<td>64</td>
<td>27</td>
<td>184</td>
</tr>
</tbody>
</table>

- Dublin North East – Out of a total of 25 cases in care which were under the remit of DNE, 80% (20) involved young people living in a placement in the same region. The remaining 5 cases were placed in a different region: 2 in DML; and 3 in the South.
- Dublin Mid Leinster – Out of 62 cases in care under the remit of DML, 81% (50) involved young people living in a placement in the same region. The remaining 12 cases were placed in a different region: 6 in DNE; 5 in the South; and one in the West.

---

7 Data on age was unknown for the remaining two cases.
8 Data was not known for one of the variables for 45 cases, therefore the Table is based on 184 cases.
• South – Out of the 66 cases in care under the remit of the South, 76% (50) involved young people living in a placement in the same region. The remaining 16 cases were placed in a different region: 7 were in DNE; 4 in DML; and 5 in the West.

• West – Out of the 31 cases in care under the remit of the West, 68% (21) involved young people living in a placement in the same region. The remaining 10 cases were placed in a different region: 1 in DNE; 3 in DML; and 6 in the South.

This data shows that 43 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 229 cases where children and young people were currently in care, this represents 19%. This percentage had fallen from 23% in the previous year 2017, however it still accounted for 2 out of 10 cases where young people were currently in care. Additional analysis on these 43 cases in 2018 showed that placements in a Children Detention School or Special Care Unit were fairly small, 6 in total (14%), and did not explain this finding. More than six in ten of these cases, 63% (27), 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 510 Advocacy cases – 64% (326) were currently involved in education or training while 36% (184) were not. Compared to the previous year 2017, there was a small increase in the likelihood of being engaged in education/training from 61%.

Further analysis found that participation in education or training is higher for young people aged under 18 years old, 81% (176), compared to those aged 18 years or over, 51% (142). National figures published by Tusla (2019) show that at the end of 2018, 98% of children in care aged 6-15 years old and 93% of those aged 16-17 years old are reported to be in full-time education.9 The educational participation of

young people under the age of 18 who engaged with EPIC is below this national figure. Nevertheless, the results show that 8 out of 10 young people under the age of 18 who engaged with EPIC in 2018 were participating in education, which typically involved attending school.

Chart 4 gives a breakdown of the type of education or training that all young people with Advocacy cases in 2018 were participating in.

Almost one half of all Advocacy cases where young people were engaged in education/training comprised going to school, 49% (159). Next came Further Education, e.g. Post Leaving Certificate courses, at 12% (40). Third level college/university and Youthreach each accounted for 10% (31) of cases. Compared to 2017, the results are very similar.

**Diagnosed special needs**

Almost one in seven of EPIC’s Advocacy cases in 2018, 15% (95), involved a child or young person with a diagnosed special need. Compared to the previous year 2017, this was similar to the figure of 16%. The type of special needs varied widely,
and in some cases, young people had been diagnosed with more than one need (15 cases). The most common types of special needs were as follows:

- Intellectual/learning disability, 39 cases (including 8 mild, 4 moderate and 3 severe)
- Autistic Spectrum Disorder, 18 cases – which has doubled from 9 cases in 2017
- Asperger’s Syndrome, 4 cases
- Attention Deficit Hyperactivity Disorder, 6 cases
- Epilepsy, 5 cases
- Mental health difficulties, 5 cases
- Global Developmental Delay, 2 cases
- Cerebral Palsy, 2 cases
- Non-verbal, 7 cases – which has increased from 2 cases in 2017
- Bi-polar Disorder, 1 case
- Personality Disorder, 1 case
- Scoliosis, 1 case
- Paraplegia, 1 case
- Down Syndrome, 1 case
- Muscular Dystrophy, 1 case
- Fragile X, 1 case
- Reactive attachment 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 2018 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 2018.

Chart 5 shows that just over one third of EPIC’s Advocacy cases, 35% (229), involved young people who were currently in care. A further 24% (156) of cases were with young people in Aftercare. A similar percentage, 23% (148), involved individuals categorised as ‘post leaving care’, who had left care and were typically in their early 20’s. A small number of cases, 3% (20), were with young people who were not in care, which comprised the following: at home with family (6 cases), which involved young people with care experience who had returned home to their family; residential disability service (5 cases); Children Detention School (4 cases);
homeless (Section 5 of the Child Care Act 1991) (3 cases); and Direct Provision (2 cases). Other types of care status include prison and private arrangement.

Compared to the previous year 2017, the proportion of cases involving children/young people in care had fallen from 41% (224) to 35% (229) in 2018. This was in addition to a decrease between 2016-17 from 46% (229). Therefore, the proportion of cases involving a young person currently in care has fallen from almost one half of all cases to just over one third in the last three years. This decline corresponds to an increase in the number of cases involving young people in aftercare, from 22% (132) in 2017 to 24% (156) in 2018, as well as a rise in the ‘post leaving care’ category, from 19% (112) in 2017 to 23% (148) in 2018. Therefore, in 2018, a growing number of EPIC’s Advocacy cases involved supporting an individual who had left care and, in many cases, sought support a number of years later.

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 2018.
Chart 6 shows that Advocacy cases were most likely to involve young people in foster care or residential care: 17% (108) in general foster care; 4% (23) in relative foster care; and 20% (130) in residential care, which represented 4 in 10 Advocacy cases. There were also a number of cases where young people were living at home, 6% (38), which included those under a Supervision Order or had returned to live with family members. A smaller number were in a Special Care Unit, 2% (15) and Children Detention School, 2% (10). Compared to the previous year 2017, the results were fairly similar.

Chart 6 also shows the living circumstances for young adults who had left care – 14% (94) were living independently (typically in private rented accommodation), 5% (32) in supported accommodation and 1% (9) in supported lodgings. However, 10% (63), involved a young person who was currently homeless.10

In recent years, the number of Advocacy cases involving young people or adults who were homeless has been increasing. Between 2016-17, the number of Advocacy cases involving a homeless young person rose from 8% (42) in 2016 to 12% (68) in 2017, an increase of 62% in the absolute numbers over the two years. While it has fallen slightly between 2017-18, one in ten Advocacy cases dealt with by EPIC in 2018 involved a homeless young person or adult.

In 2018, there were 12 homeless cases involving a young person under the age of 18 (one aged 14 years old, two aged 15, six aged 16 and three aged 17). This figure increased from seven young people under the age of 18 in the previous year 2017. Therefore, the number of homeless young people under the age of 18 rose between 2017-18. In 2018, there were 18 homeless young people aged 18-20 years old and 33 homeless young adults aged 21+ years old. Therefore, young people under the age of 21 represented almost half of all homeless Advocacy cases in 2018 (30 out of 63). In addition, a gender analysis of homeless cases in 2018 showed that 57% (36) involved females and 43% (27) were male.

10 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.
**Private care provider**

In 2018, a total of 6% (37) of Advocacy cases involved young people in the care of a private provider. This was similar to the 7% (44) recorded in the previous year 2017. Further analysis found that most cases involved young people in residential care (28) and another 5 were in a disability service. In contrast, figures published by Tusla (2018) show that 11% (653) of children in care in Quarter 4, 2018, were in the care of a private provider, most of whom (60%) were in private foster care.11

**Length of time in current placement/living circumstances**

![Chart 7: Duration in current placement/living circumstances for young people with EPIC Advocacy cases (N=653)](chart)

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 2018. Almost one third of cases, 30% (198), involved a young person being in the same placement or living circumstances for six months or less. A further 9% (57) had been there for more than six months and less than one year. Therefore, almost 4 in 10 cases (39%) comprised young people being in the same placement or living circumstances for less than one year, which had fallen from 51% in the previous year.

---

2017. Young people who remained in the same current placement/living circumstances for one year or more comprised almost one third of all cases, 31% (204), which was lower than the figure of 39% in the previous year 2017. In 2018, data was unknown for a relatively high number of cases, 30% (194), which makes it difficult to identify any particular trends from the results.

**Total number of care placements**

Another indicator of stability in current placement is the total number of care placements for young people who engaged with EPIC in 2018. This information was available for 87 cases, which represents 13% of all Advocacy cases. Chart 8 shows the results.

Out of these 87 cases, 20% (17), had just one placement in care, and 34% (30) had two placements, which represented a good degree of stability for over half of young people while in care. However, compared to the previous year 2017, this figure had fallen from 59%. In 2018, one in five Advocacy cases, 20% (17), involved young people who had five or more care placements, which had increased from 16% in the previous year 2017. Therefore, between 2017-18, there was an increase in the number of Advocacy cases involving young people who experienced some degree of
instability of placement whilst in care based on the number of placements they experienced.

Across all 87 Advocacy cases, the total number of care placements ranged from one (17 cases) to 45 (one case). These results were similar to those for 2017 with the average number of placements being 3.7 in 2018, which was slightly higher than 3.3 in the previous year 2017.

**Purpose of Advocacy cases**

Chart 9 shows the main purpose of Advocacy cases in 2018.

![Chart 9: Purpose of Advocacy cases (N=653)](chart)

The majority of cases, 85.0% (555), 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’.\(^\text{12}\) Providing support was the main purpose for 10.3% (67) of cases and giving information was the primary reason for 4.3% (28) of cases. Compared to the previous year 2017, the figure for Advocacy increased from 77%, while the figures for providing support and giving information both fell – from 14% and 8% respectively. It should be noted here that giving information and support are also

\(^{12}\) This definition is taken from EPIC’s *Advocacy Policy and Practice Document*, March 2013 (p.4)
likely to be involved where the main purpose of the case is Advocacy, so the categories are not completely exclusive.

**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. 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 2018 Advocacy cases.

---

13 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 2018 were as follows:

- Care placement, 19% (126)
- Accommodation, 17% (108)
- Aftercare plan/support, 14% (94)
- Family contact, 11% (70)
- Parental rights, 9% (61)

It is important to state that the data recorded here refers to the main *overriding* presenting issue. However, in relation to 173 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.\(^{14}\)

Compared to 2017, the top five presenting issues in 2018 have remained the same. Chart 11 presents the results.

\(^{14}\) 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 2% of Advocacy cases in 2018. 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 22% in 2017 to 19% in 2018. 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. Apart from care placement, the results were similar between 2017-18.

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.  

**Case studies of presenting issues**

---

15 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
Shauna is 13 years old and lives in long term foster care in the Southern region. She has been in her current foster care placement for just under one year. A plan had been made for Shauna to return to her birth mother. Shauna’s Social Worker contacted EPIC to help support her. The case lasted for six months.

Main presenting issues
- Shauna was looking for more frequent overnight stays with her mother before eventually returning home. She also asked for more regular contact with her two siblings.
- Shauna had many questions about what would happen when she left foster care and was looking for help to communicate this to her Social Worker.

Key actions by EPIC
- Discussed the key issues of concern with Shauna.
- Contacted Shauna’s Social Worker for more information after the referral.
- Attended several meetings with Shauna, her current foster parents and Social Worker to discuss her feelings around the plan for her to return home and get her questions answered.
- Met Shauna prior to moving home and encouraged her to contact EPIC again if she needed advocacy support in future.

Outcome
Shauna returned home to her mother. It was a positive outcome as she was happy with the decision and her concerns were addressed.
Case study 2: Accommodation

Background
Derek was 23 years old and was in residential care as a teenager. He lives in the Western region and has been homeless for a number of years. This case lasted for 6 months.

Main presenting issues
- Derek was looking for accommodation and was currently linked in with local homeless services.
- Derek had a mild intellectual disability and sought appropriate local supports to help with independent living.
- Derek was in contact with his sister on an adhoc basis and wanted to have more regular contact with her, which might be helped by having a secure base.

Key actions by EPIC
- Arranged to meet Derek to find out about his concerns.
- With Derek’s consent, contacted the relevant professionals in his case to arrange for a professionals meeting to discuss his case. When this was agreed, an EPIC Advocate attended this meeting also.
- Supported Derek to arrange an emergency Passport.
- Met Derek when moving to his new accommodation and discussed his responsibilities to maintain the accommodation placement.

Outcome
Derek secured a one bed apartment through a local homeless service and applied for HAP. He is very happy with this outcome.
Case study 3: Aftercare plan/support

Background
Sean was 17 years old and had been living in residential care in Dublin North East for the last two years. He engaged with EPIC during Visiting Advocacy after being told that he would have to leave his current placement before sitting the Leaving Certificate exam. The case lasted for four months.

Main presenting issues
- Sean wants to remain in his current residential placement to complete his Leaving Certificate. He said he was told that this would happen until recently when he was informed that his placement would end before this, which was part of his aftercare plan.
- Sean feels that the current uncertainty is having a negative impact on his educational progress and mental health.

Key actions by EPIC
- Met Sean to find out how he felt about his placement finishing and how this would affect him. Helped him to write a letter to his Social Worker.
- Contacted Sean’s Social Worker as well as the Team Leader, Principal Social Worker and Aftercare Worker.
- Attended a meeting of professionals with Sean.
- Supported Sean to make a complaint to Tusla.
- Discussed the outcome of the case with Sean.

Outcome
Sean was able to remain in the same residential unit for another year but was told he would have to leave a year before he was due to sit the Leaving Certificate. The outcome was fairly positive as his concerns were addressed and he understood the reason for it.
Case study 4: Family contact

Background
Anne is 15 years old and has been living in relative foster care with her maternal grandparents in Dublin Mid Leinster for most of her life. Anne’s Social Worker contacted EPIC. The case remains open and has lasted for almost 8 months so far.

Main presenting issues
- Anne was not happy with how her mother and grandfather were getting on at present. There were often arguments which upset her. She wanted to make her views known with the support of an EPIC Advocate.
- Anne’s next child in care review was coming up soon and she requested that the Advocate attend with her.

Key actions by EPIC
- Met Anne to find out how she felt about the current situation.
- Contacted Anne’s Social Worker.
- Attended the care review meeting. Discussed the outcome of this with Anne in relation to access arrangements over Christmas.
- Attended the next Access review meeting at Anne’s request. Met Anne before the meeting to discuss it with her.
- Discussed the outcome of the Access review meeting with Anne.

Outcome
Still awaiting a final outcome in this case as the key issues have not been resolved.
Case study 5: Parental rights

Background
Susan is 25 years old and lives in private rented accommodation in the Southern region. She has two children who have recently been placed in care. Susan was in long term foster care as a child and teenager and she contacted EPIC for support. The case lasted for two years.

Main presenting issues
- Susan is looking for support at an upcoming Interim Care Order court hearing and to help her with a Parental Capacity Assessment.
- Susan has some addiction issues and receives help from local services around these.
- She is also looking for support in relation to understanding her own care history.

Key actions by EPIC
- Met Susan to talk about her concerns and issues of importance to her.
- Attend the Interim Care Order hearing with Susan.
- Attend meeting with Susan and her children’s Guardian ad Litem.
- Support Susan at the final session of the Parental Capacity Assessment.
- Attend an access review meeting with Susan and support her to make her views heard.
- Encouraged Susan to contact EPIC again if requires support in the future.

Outcome
Susan’s children remain in care. She is engaging with social work supports to look at her own care history. The outcome was fairly positive as Susan’s concerns were addressed and she understands the decision.
Initial contact with EPIC

Person who initiated contact with EPIC

In 2018, 49% (320), were initiated by young people, which was similar to 50% (296) in the previous year 2017. Next came Social Workers, 13% (84), followed by Social Care Workers, 7% (43). After this came residential care managers, 5% (31), aftercare workers, 4% (29) and foster carers, 4% (29). The rest of these findings were similar to those in 2017.

Form of initial contact

Chart 12 shows the form that initial contact with EPIC took in relation to the Advocacy cases in 2018.

Chart 12 shows that more than one half of cases, 56% (367), were opened following a phone call, which was the most common form of initial contact. Compared to the previous year 2017, this result had fallen from 65% (384). The second most popular form of initial contact was email, 14% (89), followed by Visiting Advocacy, 7% (45).
and information session, 5% (35). Therefore, just over one in ten cases were opened following a visit or information talk by an EPIC Advocacy Officer.

**Initial EPIC response**

Information was recorded on the initial response from EPIC following the opening of Advocacy cases in 2018. Arrangements were made by EPIC Advocacy Officers to meet young people in 70% (459) of all cases, while other contact with young people was made in another 5% (34) of cases. Therefore, the initial EPIC response was to contact the young person in three quarters of all cases, 75% (493). This was similar to the figure of 74% recorded in the previous year 2017.

A further 25% (160) of cases involved an EPIC Advocacy Officer contacting the young person’s Social Worker or Key Worker as the initial response, which had fallen from 29% in the previous year 2017. While 2% (13) of cases involved contact with a foster carer, which had increased slightly from 1% in 2017, and a further 1% (9) involved contact with a young person’s parent.

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, as well as contact being made with other stakeholders during the case.
Duration of Advocacy cases

The duration of Advocacy cases in 2018 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=554). On average, Advocacy cases lasted for 143 days, i.e. just over 4 and a half months. Compared to the previous year 2017, this had increased from an average of 124 days.

Chart 13: Duration of closed Advocacy cases (n=554)

Chart 13 presents the results for the duration of closed Advocacy cases in 2018 grouped into categories. It shows that 3 in 10 cases lasted for 1-2 months, 31% (170). This was followed by 19% (105) that went on for 3-5 months and then 18% (102) that lasted for more than one week but less than one month. One in ten cases, 11% (61), lasted for more than one year, which had increased from 7% in 2017.

---

16 Cases were included once they were closed by the time of carrying out the data analysis, i.e. 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 554 closed cases. Chart 14 shows the results.

Chart 14: Outcome for closed Advocacy cases (n=554)

Chart 14 shows that 41% (225) 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 26% (144) 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, 67%, were deemed to have a positive outcome, which was similar to 68% in the previous year 2017. Just 4% (20) of cases were deemed to have a negative outcome, which had fallen slightly from 6% in 2017.
Information on the outcome for the remaining 29% (165) of cases was unknown. There were two reasons for this: firstly, the Advocate may not have known the final outcome when the case was closed, which accounted for 25% (139) of cases (e.g. the young person may not be engaging with the Advocate by returning phone calls); and secondly, data was missing on this variable, which represented 5% (26) of cases. Compared to the previous year 2017, the number of cases where data was unknown increased from 25%. 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 data in this regard. However, based on the data that is available for Advocacy cases in 2018, 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 653 Advocacy cases that were responded to by EPIC in 2018. 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 individuals with care experience. In particular, care placement has been the most prevalent issue since compiling these reports over the last ten 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 2017-18, the average number of cases per EPIC Advocacy Officer increased from 73 to 82. This was in line with the
rise in the total number of Advocacy cases from 589 to 653 over this time while the number of staff remained the same. Furthermore, a sizeable number of cases involved young people with particular support needs. For example, there was an increase in the number of cases involving individuals in the care status category ‘post leaving care’. One in seven cases involved a young person with a diagnosed special need or disability: the number in the autistic spectrum increased from 9 in 2017 to 18 in 2018; and non-verbal young people increased from 2 in 2017 to 7 in 2018. Such cases are likely to involve multiple presenting issues and last for a longer period of time. This was reflected in the rise in the duration of cases from an average of 124 days in 2017 to 143 days in 2018.

This report highlights the need for an independent Advocacy service for children in care and young people with care experience in Ireland today. Furthermore, one in five individual young people who engaged with EPIC in 2018 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.
EPIC Empowering People In Care’s Advocacy Service is funded primarily by Tusla the Child and Family Agency.