



Leaving and Aftercare Discussion Document and Recommendations

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1. Executive Summary

Aftercare is a continuum of support provided to young people who have been in care for a period of time before their 18th birthday and is governed by the Child Care Amendment Act 2015. Aftercare supports should build on the supports and skills that a child in care has been developing. Many young people fair very well in care and in aftercare, however, for a large percentage of young people, aftercare supports fall short of meeting their needs. EPIC has worked with children and young people in care and aftercare for over two decades. As a result, EPIC has built up in-depth experience of where the current supports require review, policy discussion and change. Growing up is a challenging and evolving process that requires tailored supports, guidance, and opportunity. The State, as corporate parent to children in care, has a responsibility to ensure that children are adequately prepared to leave care at 18 years and to start living life more independently. However, as everyone knows turning 18 does not suddenly make the child an independent adult. Many supports, services, guidance and care are still required to help the young person become independent. A result of being in care is that this can often be a particularly challenging time. EPIC would like to see greater discussion around the current provisions and for a holistic young person centric approach to be adopted.

This discussion paper seeks to highlight some of our concerns, as well as provide recommendations on how aftercare supports could evolve and improve to ensure young people with care experience have a better chance of living happy, independent, and fulfilling lives. The aim of revisiting current aftercare supports must be to ensure that children with care experience are given the same life chances as children in the general population and can achieve their full potential. For this to be possible, there needs to be an acceptance that additional supports, beyond what is currently in place, should be provided for the majority of children and young people leaving care. Furthermore, the current supports provided to children with care experience in the lead up to leaving care and indeed in aftercare and beyond can be improved on several levels. The average age in which young people in Europe leave the parental household is 26 years, and yet young people in care, who have often led fractured lives and experienced trauma and disruption, are expected to leave care at 23 years of age if they continue with education or training, or at just 21 years of age if they do not. This basic provision is simply inadequate and must be reviewed. In leaving care, young people are expected to make an accelerated transition from restricted to full social citizenship, which every other young person can do on a more gradual and individual trajectory. A more holistic approach is necessary and embracing the individual needs of each unique child and young person as they age out of care is essential. A robust interrogation of policy and practice must take place to ensure the correct supports are in place that allow these young people to develop into confident, participating, and happy adults in society.

At the end of Quarter 4 of 2020, 2,943 young persons were in receipt of aftercare services. Discussion around the type, quality and future training and employability following completion of some of the courses by young people with care experience is required. The aftercare plan that is developed sets

out the assistance that the Child and Family Agency may provide to the eligible child in their aftercare plan. Tusla emphasises that the *“most important requirements for young people leaving care is for secure, suitable accommodation as well as further education, employment or training or family support. These core requirements will be prioritised in the provision of aftercare services.”*¹ It must be acknowledged that some young people fare very well with aftercare supports and their education, but many struggle. EPIC has long called for better data gathering on children in care, aftercare and beyond, including a longitudinal study on children in care. Better and more robust data would allow analysis and comparison between children and young people in care and those in the general population, especially in terms of educational outcomes and independent living. Children in voluntary care do not have the same opportunities to have their voice heard and any review of aftercare supports must therefore take into account the specific situation of children and young people in voluntary care, to ensure they are not left behind. Mental health support and therapeutic supports for all children in care and in aftercare and beyond should be provided as a matter of course. Children in care have some of the lowest levels of educational attainment in comparison to their non-care experienced peers, and their outcomes continue to be a major concern in all the countries in which relevant data is collected. The implications of this are far reaching and extend beyond education and therefore require urgent attention, particularly for the average child in care. Data must be gathered and analysed, and the requisite supports put in place. Access to a consistent, named, knowledgeable single point of contact at 3rd level, who will advocate on behalf of students with care experience, can significantly improve the outcomes of this cohort young people.

Sibling contact, where appropriate, must be supported and encouraged between those siblings that have aged out of care and those that remain in care, and form part of any aftercare plan. The importance of a consistent and significant individual in a child’s life can make the difference between successful and unsuccessful outcomes in care, leaving care, and beyond and must be facilitated.

The review of the Child Care Act 1991 must include the provision of aftercare services on a legislative footing. Every aftercare plan should be enforceable, measurable, and consistent across the country. Tusla, as the corporate parent, should adopt the same approach as a caring supportive family, providing assistance and guidance for a significant amount of time beyond the current age limits, including to unaccompanied minors. All unaccompanied minors must be considered a child in care first and foremost and therefore appropriately supported. Family members and others can sometimes step up to support a child in what is referred to as a ‘special arrangement’ and these can be in a child’s best interest, but these arrangements must be documented, supported, and must not hinder a child or young person’s need to potentially access supports later on, if necessary. Unfortunately, the term ‘post code lottery’ is still relevant when it comes to accommodation, in particular transitional or supported housing, for care leavers. A geographical discrimination exists in parts of the country, and decent supported accommodation must be rolled out in all regions, including specialist supported accommodation for addiction or for young mums, for example. The problems associated with accommodation are compounded for many care leavers, and though the Tusla CAS scheme was a positive development, it is not sufficient to meet the need. For some older care leavers who have completed their education and are employed on an average wage, social housing is often not available

¹ *Aftercare Policy, Guidance and Legislation Briefing*, Tusla Child and Family Agency, 2017, p. 7.

due to their income being over the criteria, and they are at a significant disadvantage in terms of alternative ways to save for a deposit.

The provision of supports for care leavers must be conducted in a creative and holistic way. EPIC has made a number of suggestions and recommendations in this paper on how the situation things could be improved for care leavers, including learning from other jurisdictions. We look forward to discussing these with our colleagues in partners in DCEDIY and Tusla, as we work together to ensure all children in care and aftercare are protected, supported and achieve their full potential.

2. Recommendations:

- Aftercare should be placed on a statutory footing as a right for every child leaving state care.
- The provision of an aftercare plan, and importantly the implementation of such plans, must also be enshrined in legislation.
- Aftercare provision should be based purely around the needs of the child and not be dependent on resources. Having an escape clause within legislation (subject to finances) does not serve the best interests of children. New legislation should clarify the right of all children in care not only to have an aftercare plan, but to have that plan implemented and its implementation subject to review.
- Children in voluntary care must be provided with the same right to be involved in their care plans and must have a right to aftercare supports. Many of the safeguards in place for children on full care orders are not in place for those in voluntary care, this must not be allowed to continue and urgently requires review.
- All unaccompanied minors must be considered a child in care, first and foremost, and should be provided with aftercare, and all attendant safeguards and supports, until a decision is made on the child or young person's status.
- Aftercare supports, on a needs-assessed basis, should be provided up to the age of 26 years.
- Appropriate life skills should be assessed and measured, and additional necessary supports put in place as required.
- There must be consistency in the detail and standard of aftercare provision – aftercare plans should be monitored and reviewed on an ongoing basis to ensure every child has a suitable aftercare plan, and that no geographical bias exists.
- Consultation with a wider range of professionals is necessary in the development of aftercare plans. Teachers, career guidance professionals, health/mental health professionals, parents/guardians and other should be involved in aftercare planning as a matter of course.
- Accommodation should be a key support for young people leaving care and a range of funded accommodation models should be made available to care leavers.
- More and better mental health support and therapeutic support for all children in care should be provided as a matter of course, as well as continued therapeutic support in aftercare and beyond.
- Mentoring, work experience and job placements for children in care should be positively supported. The use of positive discrimination to this end should be considered.

- Every young person should have a qualified advisor in selecting appropriate further and higher education courses and have ongoing designated support through their studies.
- Care leaver bursaries should be available to all care leavers pursuing further and higher education.
- The option to defer entering further and higher education should be available to all care leavers.
- A longitudinal study of young people leaving care should be carried out up to the age of 30.
- Data on educational outcomes (primary, secondary and 3rd level) must be collated, and shared, as a matter of urgency.
- Young people should be assigned a new Aftercare worker if they move areas, to ensure that their Aftercare worker is as knowledgeable as possible about their local area.
- Special arrangements must be documented, supported, and not hinder a young person's need to potentially access supports later on, if necessary.
- Appropriate information and documents should be given to every young person leaving care, including their PPS number, birth certificate, garda clearance (vetting) etc., with their records and details of when and how they came into care.
- A next of kin (or equivalent) should be provided for all young people leaving care, someone who is accessible 7 days a week 24 hours a day, in case of emergency, and who can be identified on legal and financial documents.
- A saving scheme should be set up for every child in care to be accessible post aftercare and when deposits are needed on purchasing or renting property later in life.
- A full needs assessment of every young person moving from alternative care to independent living must be undertaken.
- Best practices from other jurisdictions must be examined and adopted.
- Discussions should take place on what entails a 'success' story for a young person leaving aftercare. This would help shape the planning around what practical, emotional and holistic supports a young person requires during these formative years to reach their own successful outcomes.
- The aftercare budget must be centrally managed to ensure equity of provision of supports and services.

3. Introduction

Children in care can often lead tumultuous and fractured lives. As a result, their life experiences can be very different to those children and young people who are not in care. They may lack the guidance, support and day to day conversations which help foster independence, and as a result some will need additional supports leaving care, in aftercare and beyond. This paper aims to address some of the reasons children with care experience require aftercare supports beyond what is currently in place and makes recommendations on what could be done to expand and improve supports. EPIC views this document as a basis for discussion and acknowledges that aftercare is an evolving area. As a result, the recommendations and points we raise may also evolve over time. The purpose of this document is to place a focus on aftercare and bring together policy makers, practitioners, and legislators to progress efforts to ensure all children with care experience receive the best possible supports as they prepare to leave care, after care and beyond. Growing up is an evolving process and aftercare

packages and supports must be viewed holistically to support children and young people as they develop into independent, happy and active members of society.

According to a 2018 Eurostat report² in the European Union (EU), more than one in four (28.5%) of young adults aged 25 to 34 were still living with their parents in 2016, and the average age in which young people in Europe leave the parental household is 26 years old. However, significant differences can be observed between Member States, and between males and females. In Ireland, the average age for females to leave the home is 26.1 years of age, versus males at 27.5 years.³ This is significantly older than the age at which young people in care must live independently and this merits reflection, particularly given the fact that children with care experience have often experienced trauma and disruption and may therefore require even greater support for longer periods. Furthermore, this data is from 2016 and given the general rise in housing costs in the interim period, as well as the shortage of supply, and the impact of COVID-19, it is reasonable to project that the current age of leaving home in 2021 would be even higher. For this reason alone, the current age at which aftercare in Ireland ceases should be examined.

The aim of revisiting current aftercare supports must be to ensure that children with care experience are given the same life chances as children in the general population and can achieve their full potential. For this to be possible, there needs to be an acceptance that additional supports, beyond what is currently in place, should be provided for the majority of children and young people leaving care. Furthermore, the current supports provided to children with care experience in the lead up to leaving care and indeed in aftercare and beyond can be improved on a number of levels.

The voice of the child should be listened to at the beginning of and during any process, and this includes the aftercare process. Children and young people provide valuable insight and are generally able and keen to articulate their views on matters affecting them. Children have a right to say what they think, have an opinion about decisions that affect them, and have their views taken into account. The role of the independent advocate, such as those in EPIC, supports this and should be formalised and put on a legislative footing. Children must be involved in decision making, in line with the provisions of the UN Convention on the Rights of the Child, and as enshrined in the Constitution, however they may require the support of an Advocate to do so. The importance of the voice is a central tenet of the current Child Care Act 1991, but it requires greater oversight than is currently provided. The specific and individual needs and requirements of each child differs greatly, and this must be taken into account in the development and roll-out of any aftercare plan, and aftercare supports. It must be acknowledged that the aftercare plan, and related supports, are evolving and will require constant review and updating as the needs of the young person evolve. Children and young people should have more of a voice in their care arrangements, including their aftercare plans, and this must include discussions on their longer term aims and aspirations, as well as on the realities of independent life following aftercare supports.

As stated, the Child Care Act 1991 is the overarching legislation that governs services for young people in and after care. The care system has been intended by the state as a place of safety and protection for children and young people when such a need has been identified. Once a young person turns 18,

² Eurostat; 2018; [Bye bye parents: when do young Europeans flee the nest? - Products Eurostat News - Eurostat \(europa.eu\)](#) (accessed 25.01.21)

³ Eurostat; 2018 [Eurostat - Data Explorer \(europa.eu\)](#) (accessed 25.01.21).

the state is under no obligation to support them. In leaving care, young people are expected to make an accelerated transition from restricted to full social citizenship which every young person must make, usually as a gradual process. Section 45 of the Child Care Act 1991 states that aftercare services may be provided to a person leaving care on their 18th birthday up to the age of 21 or 23, if in education. There has been inadequate discussion and focus on the need for extension of aftercare beyond the age of 21 or 23, and indeed for adopting a more holistic approach and embracing the individual needs of each unique child and young person as they age out of care. A more robust interrogation of policy and practice must take place to ensure the correct supports are in place that allow these young people to develop into confident, participating, and happy adults in society.

The weaknesses inherent in the current legislative framework have long been recognised, as there is no statutory mandate to provide aftercare services (Kelleher et al 2000; EPIC, 2011; Doyle et al 2012). Current legislation empowers the state to provide an aftercare service in the following ways: by visiting a young person; contributing to an education course; paying an admittance fee to a suitable trade and co-operating with housing authorities to arrange accommodation (The Irish Statute Book, 1991).

Aftercare is a process of preparation and support for leaving care and moving into independent living for young people who have been in the care of the state. It can be defined as ‘the provision of advice, guidance and assistance with regard to the social and emotional support, accommodation and vocational support’ (EPIC, 2011, p. 1)⁴.

Shortcomings in the provision of aftercare services in Ireland have been highlighted in numerous reports. For example, objective four of The Youth Homeless Strategy (2001) noted the importance of aftercare as an integral part of the care system and that young people should be actively involved in the planning and preparation of their leaving care process. The Ryan Report (2009) echoed these recommendations and stressed that aftercare should provide flexible support to young people exploring independence and should not be a discretionary service.

The Health Service Executive (HSE) made a commitment in their 2009 Service Plan to ensure that all Local Health Offices would operate a formal leaving and aftercare support service for young people with 100% coverage. In light of this commitment a National Policy and Procedures Document for a Leaving and Aftercare Service was developed and rolled out across the country. The policy framework provided an opportunity to deliver a standardised service across Ireland, interagency and multidisciplinary workings being key themes within the document (HSE, 2012) – however this was not achieved.⁵

4. Current situation in Ireland⁶

⁴ Available at: [Aftercare \(epiconline.ie\)](https://www.epiconline.ie) (accessed 04.21).

⁵ HSE; National Policy and Procedure Document, Leaving and Aftercare Services; 2011; p10.

⁶ **Basic Data:** *Tusla, Quarterly Service Performance and Activity Report, Q4 2020*; available at: [2020 Performance DataTusla - Child and Family Agency](#) (accessed May 2021).

- 2,943 young persons were in receipt of aftercare services at the end of Q4 2020, 43 more than Q3 2020 (2,900) and 169 (6%) more than Q4 2019 (2,774).

i) **Background in numbers: Participation in Aftercare**

The participation of those in receipt of Aftercare supports is generally positive, and 2,943 young people were in receipt of aftercare services at the end of Q4 2020.⁷ This compares to the end of 2019 when there were 2,744 young people in receipt of aftercare services, of which 82% (2,265) had an aftercare plan in place. The total number of referrals for aftercare services for the year 2020 was It is very positive that 98% of aftercare clients were engaged in some form of education/training,⁸ however, discussion of the type, quality and future training and employability following completion of some of the courses, as discussed above, is required.

ii) **Legislation:**

Legislation in Ireland relating to aftercare is the *Child Care Act 1991*, amended by Statutory Instrument 296 of 2017 to comply with *Child Care (Amendment) Act 2015*. It is hoped that the current review of the *Child Care Act 1991* will make positive amendments to the area of aftercare, and EPIC would hope that this discussion paper will lead to further conversations and developments on aftercare.

Specifically, section 45 of the *Child Care Act 1991* states that:

(1) Subject to section 45A and subsection (3), the Child and Family Agency shall, in accordance with sections 45B or 45C, prepare an aftercare plan for an eligible child or an eligible adult, as the case may be, setting out the assistance that may be provided by the Agency to the eligible child on or after he or she attains the age of 18 years or to the eligible adult.

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- 2,900 young people in receipt of aftercare services at the end of Q3 2020, 200 (7%) more than Q3 2019 (2,700).
 - 128 referrals in Q4 2020, bringing to 660 the number of referrals for 2020. A total of 714 referrals were received in 2019.
 - 2,943 young persons were in receipt of aftercare services at the end of Q4 2020, 43 more than Q3 2020 (2,900) and 169 (6%) more than Q4 2019 (2,774).
 - 76% (1,697/2,243) of those 18-22 years inclusive in receipt of an aftercare service were in education/accredited training.
 - 82% (2,421) of young persons in receipt of aftercare services at the end of Q4 2020 had an aftercare plan, down one percentage points from Q3 2020. A total of 522 were awaiting a plan, 34 more than Q3 2020 (488).
 - 92% (2,051/2,238) of those assessed as needing an aftercare worker had an aftercare worker at the end of Q4 2020, up one percentage point from Q3 2020. A total of 187 young people were awaiting an aftercare worker at the end of Q4 2020, down one from Q3 2020 (188).

⁷ Tusla, *Quarterly Service Performance and Activity Report, Q4 2020*; available at: [2020 Performance DataTusla - Child and Family Agency](#) (accessed May 2021).

⁸ *Ibid.* p.42.

(2) The Child and Family Agency shall, in accordance with section 45D, update an aftercare plan referred to in subsection (1).

(3) The assistance that may be provided by the Child and Family Agency to an eligible child or an eligible adult, as the case may be, in accordance with an aftercare plan referred to in subsection

(1) or an updated aftercare plan referred to in subsection (2) may be provided for so long as

(a) The Agency is satisfied as to his or her need for the assistance, and

(b) subject to subsection (4), he or she has not attained the age of 21 years.

(4) Where the Child and Family Agency is providing assistance to a person in accordance with an aftercare plan or an updated aftercare plan by arranging for the completion of his or her education and by contributing to his or her maintenance while he or she is completing his or her education, and that person attains the age of 21 years, the Child and Family Agency may continue to provide that assistance until —

(a) the completion of the course of education in which he or she is engaged, or

(b) the end of the academic year during which the person attains the age of 23, whichever is the earlier.

(5) The Child and Family Agency may, subject to its available resources, implement an aftercare plan or an updated aftercare plan.⁹

This legislation now places a statutory duty onto Tusla “prior to preparing an aftercare plan under section 45B or 45C, [to] carry out an assessment (in this Act referred to as an ‘assessment of need’).¹⁰

When a need has been identified and the assessment has been carried out and the child is deemed eligible the “Child and Family Agency shall prepare an aftercare plan for that child.”¹¹ The aftercare plan that is formulated “shall set out the assistance that the Child and Family Agency may provide to the eligible child”¹² and they shall prepare the aftercare plan “at least 6 months before he or she attains the age of 18 years”¹³ or “at least 6 months before he or she attains the age of 18 years”¹⁴ whichever is latest. Tusla emphasises that their “most important requirements for young people leaving care is for secure, suitable accommodation as well as

⁹ 1991 Child Care Act Section 45.

¹⁰ *Ibid.* Section 45A(1).

¹¹ *Ibid.* Section 45B(3).

¹² *Ibid.* Section 45B(4)

¹³ *Ibid.* Section 45B(5)a

¹⁴ *Ibid.* Section 45B(5)b

further education, employment or training or family support. These core requirements will be prioritised in the provision of aftercare services.”¹⁵

In launching the new aftercare legislation in August 2017, Minister Zappone acknowledged that “the transition to independent adulthood can be challenging for many young people.” This is particularly true for children and young people in care. Planning a young person’s new independent living needs to begin years prior to leaving care and continue as part of the care planning process.”¹⁶

iii) **Tusla’s Policy:** Eligibility for financial support from Tusla

To qualify for an Aftercare Allowance at 18 years of age an eligible adult must:

- Have turned 18 in the care of the Child and Family Agency having spent 12 months in the care of the Agency between the age of 17-18 years
- Be attending an accredited education course, third level course or training programme as outlined in the young adult’s Aftercare Plan.
- Agree to engage with Aftercare Service requirements and provide progress updates from course to which he/she is attending.¹⁷

5. Areas requiring exploration and improvement:

There are several specific gaps that EPIC believes could be addressed to provide better and more holistic aftercare support for children and young people in care. The following are some of the issues that EPIC would like to see discussed:

- i) **Lack of data:** EPIC has long called for better data gathering on children in care, aftercare and beyond, including a longitudinal study on children in care. A longitudinal study on children leaving care was proposed as an action by the Health Service Executive (HSE) in response to a recommendation by the Report of the Commission to Inquire into Child Abuse (2009). The action, contained within the Report’s Implementation Plan (no. 65), stated that the HSE would conduct a longitudinal study to follow young people who leave care for 10 years, to map their transition to adulthood. This action was subsequently included in the National Strategy for Research and Data in Children’s Lives, 2011- 2016 (DCYA, 2011). As part of the implementation of this Strategy the HSE commissioned the UNESCO Child and Family Research Centre (UCFRC) at the National University of Ireland, Galway (NUIG) to undertake a scoping study to identify and document the key issues for consideration in undertaking a research project of this kind. The scoping study provided

¹⁵ *Aftercare Policy, Guidance and Legislation Briefing*, Tusla Child and Family Agency, 2017, p. 7.

¹⁶ *Children leaving care receive extra rights 500-600 children entitled to aftercare plans as they begin adult life “Resources in place to deliver for young people to begin independent living”* Minister Zappone, 31 August 2017. <https://merrionstreet.ie/en/New-Room/Releases/Children-leaving-care-to-be-granted-extra-rights-from-September-500-600-children-a-year-will-have-statutory-right-to-Aftercare-Plan-State-ment-by-Minister-Katherine-Zappone.html> [accessed: 12 November 2020].

¹⁷ Tusla, *Financial Support in Aftercare*, Child and Family Agency, 2017. p.1.

findings on a number of key issues relating to the design and implementation of longitudinal studies and was published by the Department of Children and Youth Affairs (Devaney, 2013). Following this, a feasibility study built on that scoping exercise. This latest study was published in 2018 entitled *The Feasibility of Conducting A Longitudinal Study on Children in Care or Children Leaving Care Within the Irish Context*¹⁸ and is a much-needed addition to the data currently being gathered by Tusla. Being able to analyse data for children in care and leaving care, over an extended period, and to be able to compare this to the non-care population would provide a level of insight and understanding that is currently unavailable. It would enable better policy development and the ability to address current gaps in supports for children in care and aftercare. Growing Up in Ireland (GUI) is the national longitudinal study of children in Ireland funded by DCEDIY and managed by DCEDIY in association with the Central Statistics Office (CSO). Established in 2006, the purpose of the study is to examine the factors that contribute to, or undermine, the well-being of children and, to contribute to the setting of effective policies and services for children and their families and is an invaluable resource.¹⁹ The *Growing up in Ireland* research should have included a cohort of children in care, for comparisons to be drawn.

The State of the Nation's Children is a report published by the then Department of Children and Youth Affairs.²⁰ This report was published every two years between 2006 and 2016 and was designed to provide a comprehensive picture of Irish children's lives by presenting key information in areas such as health and education as well as social, emotional, behavioural and self-reported happiness outcomes. It also presents data on supports and services available to children and their families, along with children's relationships with their parents and peers. While these reports identified separated children seeking asylum, traveller children, foreign national children and children as carers as vulnerable cohorts, it failed to identify children in care as such, and merely provided data on the number of children in care. This was another missed opportunity in terms of assessing how children in care and aftercare compare to other children across vital socio-economic and health indicators. This lack of data for analysis stymies the ability of policy makers and practitioners to develop informed and robust measures to meet the needs of this cohort.

- ii) **Voluntary Care:** Voluntary care was originally designed as a short-term measure, and many of the safeguards in place for children on full care orders are not in place for those in voluntary care. However, over 3,000 children in care today are in voluntary care, and therefore missing many safeguards and supports. This includes returning to court at 16 years of age for aftercare support and the allocation of an aftercare worker, as well as having their voice heard and their views taken into account. As a result, some legal practitioners, as well as Judges have voiced their concerns with the use of Voluntary Care

¹⁸ Devaney, C.; Rooney C; 2018; *The Feasibility of Conducting A Longitudinal Study on Children in Care on Children Leaving Care Within the Irish Context*; available at: [Feasibility Study on Longitudinal Study.pdf \(tusla.ie\)](#) (accessed January 2021).

¹⁹ Available at: [Growing Up in Ireland – National Longitudinal Study of Children](#) (accessed 01.21).

²⁰ Available at: [gov.ie - State of the Nation's Children \(www.gov.ie\)](#) (accessed 04.21).

for extended periods of time. It is welcome that this issue is being considered within the current review of the Child Care Act 1991. Fewer safeguards and supports are in place for a child in a voluntary arrangement unless the agreement is subject to a court application. Children in voluntary care do not have the same opportunities to have their voice heard and any review of aftercare supports must therefore take into account the specific situation of children and young people in voluntary care, to ensure they are not left behind.

- iii) **Mental health support, therapeutic intervention and unresolved trauma:** EPIC has long called for mental health support and therapeutic support for all children in care as a matter of course, as well as continued therapeutic support in aftercare and beyond. The current access route is too slow, and often inaccessible to those who have aged out of care but still require support due to having been in care as a child. Gary Broderick of the [Learning Curve Institute](#), an organisation that provides training to those working with trauma-affected groups, has highlighted how unresolved trauma can shape how young people respond to everyday life experiences, including how they respond to the services provided by professionals. Trauma-informed practice is a framework that is based on knowledge and understanding of how trauma affects people's lives and their service needs. Many children in care will have been removed from their family in very traumatic circumstances and will have experienced feelings of fear, rejection and powerlessness. Unfortunately, similar feelings re-emerge when children and young people prepare to leave care, and then leave care at 18. Unresolved trauma can shape how young people respond to everyday life experiences, including how they respond to the services provided by professionals, and these feelings can emerge or re-emerge when transitioning from care to aftercare, or to independence. This highlights the need for priority access to mental health supports for children in care, leaving care, aftercare and ageing out of care.
- iv) **Educational supports and guidance:** As a specific cohort, children in care have, on average, some of the lowest levels of educational attainment in comparison to their non-care experienced peers, and their outcomes continue to be a major concern in all the countries in which relevant data is collected. The implications of this are far reaching and extend beyond education, since the educational outcomes of children and young people with care experience are strongly linked to subsequent employment (Hook & Courtney, 2011), housing (Davison & Burris, 2014), mental and physical health (Dixon, 2008) and offending (Cusick et al. 2012).

Under achievement at primary and secondary level means that young people who have been in the care system are significantly less likely to go on to further and higher education than not only their non-care experienced peers, but also than other disadvantaged cohorts of young people. According to the UK Office for Fair Access (Ofa) just 12% of care-leavers in England progressed to higher education in 2012, compared with 48% of the general population (aged 17-30). Unfortunately, comparable statistics are unavailable in Ireland and therefore we must draw on statistics from other jurisdictions, such as the United Kingdom (UK). The UK Office for Students (OFS) found that care leavers had:

- lower school attainment
- a lack of positive role models and low expectations from carers and advisers
- low aspirations and concerns about being able to afford higher education
- lack of information and advice before and when applying to higher education
- difficulty accessing the financial support they needed and problems with accommodation.

Other research in the UK has shown that despite the mass expansion of Higher Education over recent decades, care leavers remain an underrepresented cohort of students, with less than 11.8% (ages 18-23) attending university (Harrison, 2019), significantly below the 43% for all 18-year-old entrants (DfE, 2018). Importantly, it should be recognised that while care leavers ‘occupy one end of a continuum, with other disadvantaged groups’ (Harrison (2017:68) 26% of other disadvantaged young people still go on to study at university.

In general terms, care leavers are far more likely to start a degree later in life than most young people. They are also more likely to drop out or take longer to complete higher education and their time at university is more likely to be affected by their personal health, financial concerns, and accommodation difficulties. The situation in Ireland also requires focus. An exploratory study carried out in 2013 by the ESRI and Trinity College, funded by the Ombudsman for Children’s Office, found that children and young people with care experience in Ireland tend to face more challenges than their peers in fulfilling their potential in education, due to their personal and familial circumstances.²¹ Despite this, children and young people in care and care leavers have been largely overlooked in Irish educational policy measures or statements to date, and were not, for example, identified in the National Plan for Equity of Access to Higher Education 2015-2019.

Other plans and reviews have similarly overlooked this significantly disadvantaged cohort of children and young people. By way of example, they were not identified in:

- The Higher Education Authority 2018-2022 Strategic Plan
- CUMASÚ Empowering through learning Statement of Strategy 2019-2021
- The National Strategy for Higher Education to 2030.

Similarly, and as mentioned previously, successive *State of the Nation’s Children* Reports have included Traveller children, foreign national children, children with a disability and children as carers, but failed to recognise and name children in care as a specific cohort.

Overall, in Ireland, data on care-experienced young people’s entry to further and higher education is limited to the data published via the Higher Education Access Route (HEAR) reporting since 2016. There is no data published on special educational needs among

²¹ Darmody, M.; McMahon, L.; Banks, J.; ESRI; Gilligan, G.; Children’s Research Centre; Trinity College; *Education of Children in Care in Ireland: An Exploratory Study*; 2013. Available at: [\(PDF\) Education of children in care in Ireland: An exploratory study | Merike Darmody - Academia.edu](#) (accessed 05.21).

children and young people in state care. There is no data published on school attendance rates or school exclusions for children and young people in care. There is no data published on literacy levels among children and young people in care. All this data should be collated, shared and cross compared with the general population, and policies developed on foot of the findings to ensure children in care or with care experience are appropriately supported and their educational outcomes are not negatively impacted as a result of their care experience.

A working group set up by Dr Paul Downes in Dublin City University has sought action from the Department of Children Equality Disability Integration and Youth on a range of issues, including specifically:

- how children and young people with care experience can be better recognised as a distinct group as part of a higher education access strategy
- how they can be strategically supported by schools and other services in the transition from post-primary to higher education
- why it seems that children in care in Ireland are often encouraged to opt for ‘easier’ and shorter occupational training to become economically independent as soon as possible, rather than pursuing higher education qualifications
- a need to recognise and address the particular needs of care leavers in accessing further and higher education.

In 2018, the UK Government launched the Care Leaver Covenant which acts as a “commitment from public, private, and voluntary sector organisations to support people leaving care.” As part of this, higher education institutions are expected to support and encourage care leavers, by amongst other things, identifying and supporting care leavers before they enter and offering financial and practical supports once they have entered. In March 2019 the UK Government published the ‘Higher Education Principles’. These principles called on universities and higher education institutions to do more for young people leaving care by giving them personal support, helping them pay for accommodation and providing money to buy books and join social clubs. With just 6 per cent of care leavers aged 19-21 going into higher education, and those that do being twice as likely to drop out than their peers, Universities Minister Chris Skidmore and Children and Families Minister, Nadhim Zahawi, have called for a shift in culture at universities to welcome care leavers and provide wraparound support to help them thrive. As a result, many universities in the UK, including most universities and higher education institutions in Northern Ireland, now offer tailored supports for care leavers. These include care leavers bursaries, grants, assistance with accommodation etc. and almost all feature a designated person to support care leavers within the institution.

Access to a consistent, named, knowledgeable single point of contact at 3rd level, who will advocate on behalf of students with care experience, can significantly improve the outcomes of these young people. To try to manage the support effectively, the majority of institutions have staff designated as named contacts for care experienced students. These named contacts frequently advocate for individual students (both within institutions and externally) and are highly valued and appreciated by students. Indeed, for

many students they have made the difference between withdrawal and persistence in their chosen course.

Following discussion and planning over the past twelve months, EPIC and the Munster Technological University (Cork and Kerry Campuses) have launched an initiative to support care leavers entering further and higher education. Each campus has appointed a designated person to support care leavers in their journey through third level education. The designated staff members will work alongside the university's student services function and act as personal support advisors for care leavers in their journey through college. EPIC is hopeful that this initiative will be replicated across the further and higher education sector with a view to enhancing the educational experience of this vulnerable student cohort and improving outcomes for care leavers in further and higher education.

- v) **Support for continued access to siblings in care:** The United Nations has stated in its *Guidelines for the Alternative Care of Children* that siblings with existing bonds should in principle not be separated by placements in alternative care, unless there is a clear risk of abuse or other justification in the best interests of the child. It goes on to state that every effort should be made to enable siblings to maintain contact with each other, unless this is against their wishes and feelings.²²

There is strong acceptance of the importance of sibling relationships, and they are referred to as 'the most enduring' or 'longest-lasting' relationships in most people's lives.²³ They are increasingly considered a relevant factor in care and adoption proceedings, but their significance is often outweighed by practical realities. Sibling contact must be supported and encouraged between those siblings that have aged out of care and those that remain in care.

- vi) **Key individuals in a child's life / Adequate role models:** It is widely accepted and recognised that a consistent and significant individual in a child's life can make the difference between successful and unsuccessful outcomes in care and leaving care. However, there is less discussion around the importance of role models for children in care, who may sometimes have a smaller network of significant role models in their lives. The establishment of a *Big Brother, Big Sister* type programme would be a positive development for children preparing to age out of care, and those in aftercare and beyond.
- vii) **Aftercare plans must be enforceable in legislation:** Despite improvements to the provision of aftercare to young people preparing to leave care and leaving care, EPIC has recommended that the review of the Child Care Act 1991, must include the provision of aftercare services on a legislative footing. Every aftercare plan should be enforceable, measurable, and consistent across the country.

²² United Nations General Assembly, Resolution: 64/142. *Guidelines for the Alternative Care of Children*, 2010, para 17.

²³ Monk D.; Macvarish J.; *Summary Report: Siblings, contact and the law: an overlooked relationship?*; 2018; p2; available at: [Final Siblings Summary.pdf \(nuffieldfoundation.org\)](#); accessed 05.21.

- viii) **Aftercare supports must be extended to 26 years of age:** Aftercare supports must be extended beyond the age of 21 and 23 years. The ultimate aim of the aftercare plan and supports should be to ensure that young people are independent and able to be self-sufficient by the time they age out of aftercare. It is with this in mind that EPIC is firmly of the view that aftercare supports should be extended to 26 years of age, or beyond, depending on the individual needs of the young person in question. Tusla, as the corporate parent, must adopt the same approach as a caring supportive family, providing assistance and guidance for a significant amount of time beyond the current age limits.
- ix) **Aftercare must be adequately and equitably funded:** The improvements and amendments to aftercare over the last number of years are very welcome, but the fact remains that providing an aftercare plan is a hollow statement if it is not supported by adequate resources and funding. The provision of access to aftercare supports throughout the country remains inconsistent. This provision must be strengthened in legislation.
- x) **Aftercare support should follow the young person:** Young people who move areas because of education, or any other reason, should always be allowed to continue to access personal aftercare support in the area to which they move.
- xi) **Aftercare planning must be improved:** Currently there is significant inconsistency in aftercare planning. The right for every child in care to have a comprehensive, needs assessed plan should be reviewed to ensure sufficient resources and consistency.

Section 45 of the Childcare Act 1991 must be amended to state that the authorities 'will' (rather than 'may') assist him/her for so long as the board is satisfied as to his/her need for assistance and, subject to paragraph (b), he s/has not attained the age of 21 years.

(b) Where a health board is assisting a person in accordance with subsection (2) (b), and that person attains the age of 21 years, the board 'will' (rather than 'may') continue to provide such assistance until the completion of the course of education in which s/he is engaged. In preparing an aftercare plan, social workers must be required to involve other professionals including teachers, career guidance professionals, mental health professionals and others to ensure that the plan is tailored to the particular needs and competencies of that young person.

- xii) **Unaccompanied Minors:** Unaccompanied minors (separated children) who have not had their status determined before they turn 18 are a small category of children that must not be overlooked. It is EPIC's view that all unaccompanied minors must be considered a child in care first and foremost, and should be provided with aftercare, and all attendant safeguards and supports until a decision is made on the child or young person's status. This is in the best short and long-term interest of the child and the State.
- xiii) **Special Arrangements:** Conor O'Mahony, Ireland's Special Rapporteur on Child Protection, has noted that families can feel compelled to agree to special arrangements,

but often do not have a full understanding of what they are agreeing to. He has noted that these arrangements can sometimes be seen to be promoted by Tusla, the Child and Family Agency, because they don't require support or other resources. It must be acknowledged that there are instances when special arrangements are in a child's best interest, but these arrangements must be documented, supported, and must not hinder a child or young person's need to potentially access supports later on, if necessary.

- xiv) **Geographical discrimination:** Unfortunately, the term 'post code lottery' is still relevant when it comes to accommodation, in particular transitional or supported housing, for care leavers. A geographical discrimination exists in parts of the country. For example, in Cork there are several examples (Cork Foyer and Bishops Grove) of successful supported accommodation available, whereas in the Midlands there is nothing similar available. In Naas, Dublin South West, Kildare West Wicklow for example, there is a potentially very good example of supported accommodation that is available, but that is not being considered by Tusla. Transitional supported accommodation in South Dublin, in the form of Saint Catherine's Foyer and the YMCA, were closed down and were not replaced. This has been a huge loss and has created a big gap. A discussion on the necessity of transitional supported accommodation is needed.

Similarly, there are very few options available for young mums who may require support for the first few months after giving birth. Some new mums would prosper under and alongside a supported accommodation and guidance model and enable them to develop their parenting skills at the same time as overcoming the shock and potential isolation of being a young mum without a strong social network.

- xv) **Re configuration of the aftercare budget:** The aftercare budget requires reconfiguration in order to avoid situations where each area is making decisions as to availability of supports based on their own local budget and is not able to provide the necessary supports to young people leaving care. The budget must be centrally managed so as to ensure equity of provision of supports and services.
- xvi) **Capital Assistance Scheme (CAS):** The Capital Assistance Scheme (CAS) is designed for the provision of rented accommodation for those with special needs i.e., elderly, disabled, homeless etc. The introduction of the Tusla CAS scheme was a very positive development but unfortunately it is not sufficient to meet the housing needs of all care leavers and must be for all young people across the board.
- xvii) **Property for care leavers:** For some older care leavers who have completed their education and are employed on an average wage, social housing is often not available to them due to their income being over the criteria, nor can this group of care leavers return home to their family like the majority of peers their age in order to save for a deposit, yet
- xviii) they cannot afford the housing costs of the normal rental market, particularly in Dublin.

6. Proposal to extend aftercare, where needed, to 26 years of age:

Key elements:

- Each young person would retain access to their aftercare worker up to 26 years.
- The aftercare worker would retain formal contact with the young person, such as a minimum of two update meetings per year after the age of 23.
- Each young person must retain an entitlement to support, on a needs-assessed basis, up to 26 years of age, for:
 - Education
 - Accommodation
 - Health, including mental health
 - Life-skills training
 - General advice and support, including legal support.

Referrals for support after 23 years would then, for example, be made by either the young person themselves or a professional, such as an aftercare worker or advocate, and the level of support would depend on the individual in question.

7. Creative flexible solutions:

- i) Flexibility with the criteria for eligibility for aftercare: EPIC firmly believes that the eligibility criteria for aftercare must be flexible. The overall time spent by a child in care, or indeed the time the child is known to or involved with social workers, should be included as part of the assessment for qualifying for aftercare supports, rather than a strictly designated 12 consecutive months in care prior to a child's 18th birthday. EPIC has been involved in several cases where the provision of aftercare supports hinged on a matter of months.
- ii) Extending supports based on need not age: Not all young people leaving care will require the same amount of support, but each individual must be given the necessary supports to suit their individual needs and life circumstances. The additional cost of extending supports to some individuals into their mid-twenties will pay dividends in the long run, but more importantly, it is the right thing to do for that particular young person, by its corporate parent, Tusla.
- iii) Accommodation, Supported Accommodation and risk of homelessness: Creative solutions to accommodation needs for young people leaving care should be assessed and embraced. An example of this is in relation to supported accommodation for young people leaving care. Supported accommodation could take many different guises and these need to be explored and supported.

The Department of Children Equality, Disability, Integration and Youth has reiterated that "The most important requirements for young people leaving care are for secure, suitable

accommodation, access to further education, employment or training and supportive relationships”.²⁴ Likewise, Tusla in its National Aftercare Policy for Alternative Care quotes the Childcare Amendment Act in recognising that “the most important requirements for young people leaving care is for secure, suitable accommodation as well as further education, employment or training and family support”. Despite this, accommodation is not included in the support funded by Tusla. Tusla will fund other supports for care leavers but not accommodation, despite this being widely recognised as fundamental. Stable accommodation is a serious problem for young people in aftercare, and while funding is available to Approved Housing Bodies to acquire accommodation for young people leaving State care under the Capital Assistance Scheme (CAS) operated by the Department of Housing, Planning & Local Government, only 37 care-leavers were accommodated under this scheme between the beginning of 2018 and the end of June 2019, with a further 34 properties in the process of being purchased and renovated to accommodate young people under the scheme. Housing for young people leaving care is not guaranteed. A joint working protocol between the Child and Family Agency and the Local Authorities has, to date, failed to ring-fence properties for young people leaving care. Instead, these young people are left to the mercy of the market and local authority schemes.

Addressing the housing needs of care-leavers is a fundamental aspect of aftercare support. Some care-leavers may be ready to progress to independent living, while others will require a more supportive setting. Both options must be available, as international and Irish research has found that periods in State care constitute a significant pathway into long-term homelessness.

In 2019, the Irish Aftercare Network conference in Athlone identified that young people currently coming through residential care are far more at risk of entering homeless services than young people who are in secure foster placements. Colm O’Gorman, Executive Director, Amnesty International Ireland, on opening the conference, said: “In the middle of the worst housing and homelessness crisis in our history, which is affecting us all, there are some in our society who are especially vulnerable. The State has an obligation to ensure that the right to housing of all people is respected, protected and fulfilled. But it also has an obligation to pay particular attention to the needs of especially marginalised groups in its housing policy.”

- iv) Mentoring: Mentoring for all children in care should be provided where necessary. This could be peer led (young people who have left care and are functioning independently), as well as through volunteers (Big brother Big sister type programmes) as well as through encouraging organisations and industry to support young people in care to access work experience and job placement opportunities - by providing employers with positive incentives, for example.

²⁴ See <https://www.gov.ie/en/policy-information/86ee99-aftercare-provision/> for more information (accessed 26.04.21).

- v) Appropriate Information and Documentation: The EPIC Youth Council suggested that a suite of documents should be given to each young person leaving care, which would include their PPS number, birth certificate, medical card, a letter stating and proving that the individual was in care or aftercare, and a list of care leavers rights and entitlements, as well as contact information of services that can support care-leavers. All young people should also have a passport, Garda Age card and medical card when leaving care. Each young person leaving care should be registered with and have the details of their local GP and dentist, and any other service that they would regularly need to interact with.

- vi) Next of Kin: Each young person on leaving care should be provided with an equivalent of a next of kin, to be used by the young person on any relevant document. Not having a next of kin can impact many aspects of a young person's life; when starting a new course, job, or undergoing medical treatment for example. Student loans also require a next of kin blood relative. Not having an official substitute for a next of kin is a significant hurdle for a young person to overcome. Tusla, as the corporate parent, should be able to provide a next of kin substitute that is officially and legally recognised.

- vii) Savings Scheme: A saving scheme should be set up for every child in care to be accessible post aftercare and when deposits are needed on purchasing or renting property later in life.

8. Learning from other jurisdictions:

i) Scotland:

The main legislation regarding aftercare in Scotland emanates from *The Children and Young People (Scotland) Act 2014*, which became law on 27th March 2014. Aftercare in Scotland is defined as “advice, guidance and assistance.”²⁵

Parts 10 and 11 of *The Children and Young People (Scotland) Act 2014* provide for the extension of aftercare services and continuing care provisions respectively.²⁶ Part 10 extends the age for the eligibility for aftercare from 21 years up to their 26th birthday,²⁷ which extends support both to those currently in aftercare and those who may have disengaged who will be able to re-apply for support.²⁸

Part 11 of the Act is a new legal term which further extends the legal obligation for the care of “looked after children” and states that “continuing care means the same accommodation and other assistance as was being provided for the person by the authority, in pursuance of this Chapter of this Part, immediately before the person ceased to be looked after.”²⁹

²⁵ *Children (Scotland) Act 1995*, Section 29(1).

²⁶ *Children & Young People's Commissioner Scotland*, I Have-You Have-We Have Rights to Care. Extra Info, Part 10 Aftercare. p.1.

²⁷ *The Children and Young People (Scotland) Act 2014*, Part 10 2C(i).

²⁸ *Children & Young People's Commissioner Scotland*, I Have-You Have-We Have Rights to Care. Extra Info, Part 10 Aftercare. p.3.

²⁹ *The Children and Young People (Scotland) Act 2014*, Part 11 (4).

As clearly stated in the accompanying briefing on the legislation, “it is important to remember that it is not a new placement; it is the right for the young person to ‘stay put’ in the same placement.”³⁰ It has been acknowledged in Scotland that you people leaving care need extra supports over a longer period of time than had previously been provided and it is stated that “for most care leavers it will also be necessary to offer a more graduated transition out of care with continuity of relationships, and support and assistance provided at levels similar to when they were formally looked after for a continuing period.”³¹ However, it is important to note that “a care leaver receiving Continuing Care is not eligible for Aftercare. If a care leaver has opted for Aftercare, they cannot later choose Continuing Care, as this is only available to eligible care leavers at the point at which they cease to be looked after.”³² However, “once a young person leaves their Continuing Care placement they will be entitled to request Aftercare support.”³³ When the advice, guidance and supports of being looked after [aftercare] cease, energy is orientated towards establishing interdependence for young people. Acknowledging that relationships are of crucial importance and that the transition into adulthood and associated decisions about allocation of resources should be at a pace suited to each young person’s preparedness, not simply a matter of chronological age. Interdependence more accurately reflects the day-to-day reality of an extended range of healthy inter-personal relationships, social supports and networks.³⁴

The importance of relationships for the young person leaving care is further supported by the declaration that all “local authorities and corporate parents will want to ensure that their systems, procedures, processes and practice supports the primary focus on relationships for the young person, both within their care experience and beyond.”³⁵

An outlook and focus on ensuring that young people with care experience and beyond are supported to maintain and develop relationships is crucial to successful outcomes.

ii) **Australia**

Legislation for aftercare in New South Wales in Australia is governed by Section 165 of the *Children and Young Persons (Care and Protection) Act 1998*. Under the Section of the Act entitled: Provision of assistance after leaving out-of-home care:

(1) The Minister is to provide or arrange such assistance for children of or above the age of 15 years and young persons who leave out-of-home care until they reach the age of 25 years as the Minister considers necessary having regard to their safety, welfare and well-being.

³⁰ *Children & Young People’s Commissioner Scotland*, I Have-You Have-We Have Rights to Care. Extra Info, Part 11: Continuing Care. p.4.

³¹ *Children and Young People (Scotland) Act 2014: Guidance on Part 10: Aftercare*. Scottish Government, 2016, Edinburgh, Section 28, p.8.

³² *Children & Young People’s Commissioner Scotland*, I Have-You Have-We Have Rights to Care. Extra Info, Part 11: Continuing Care. p.5.

³³ *Ibid.* p.6.

³⁴ *Children and Young People (Scotland) Act 2014: Guidance on Part 10: Aftercare*. Scottish Government, 2016, Edinburgh, Section 31, p.8.

³⁵ *Ibid.* Section 32, p.8.to

(2) Appropriate assistance may include:

- (a) provision of information about available resources and services, and
- (b) assistance based on an assessment of need, including financial assistance and assistance for obtaining accommodation, setting up house, education and training, finding employment, legal advice and accessing health services, and
- (c) counselling and support.

(3) The Minister has a discretion to continue to provide or arrange appropriate assistance to a person after he or she reaches the age of 25 years.

(4) The Minister may cause to be published guidelines specifying the circumstances in which assistance may be granted under this section.³⁶

In conjunction with the above legislation, under an agreement in action on homelessness, special priority and importance is given to care leavers to ensure that they are housed immediately on leaving care; *“Under the National Partnership Agreement on Homelessness (NPAH), state and territory governments committed to implement a policy of ‘no exits into homelessness’ from statutory, custodial care and hospital, mental health and drug and alcohol services for those at risk of homelessness. Under this strategy, young people leaving child protection and juvenile justice systems were identified as a priority.”*³⁷ Extra funding is also available for those leaving care to help them make that transition to independence. A “Transition to Independent Living Allowance (TILA) is an Australian Government payment of up to \$1500 per person to assist young people leaving care to meet some of the costs associated with the transition to ‘independent living’”.³⁸

Australia is divided into eight States/Territories. From these eight territories there is an equal divide between those that work under a legislative system and those that administer aftercare from a policy basis. The four regions that use legislative powers for post care support are the Northern Territory, which begin their planning for aftercare at 15 years. The support provided is to the age of 25 and is on an “as needed” basis.

- In Victoria, where aftercare is also on the legislation, their planning begins above the age of 15 years and at least 12 months prior to the young person exiting care.
- Western Australia begins their planning at any time after the young person reaches 15 years of age and continue support up to 25 - again on an “as needed” basis.
- Finally, the last region with legislative standing is New South Wales where planning for aftercare begins at or above the age of 15 years and at least 12 months prior to a young person exiting care (2 years in the case of a young person with a disability). The support again is on an “as needed” basis up to 25 years of age (or after at the discretion of the Minister under exceptional circumstances).

The other 4 regions of Australia work from policy as opposed to legislation concerning aftercare.

- **South Australia** begins planning at 15 years of age and provides support up to the age of 25 under the Transiting from Care Policy or through the Post Care Service for which there is no specified age limit. Again, it is proposed as being available on an “as needed” basis.

³⁶ *Children and Young Persons (Care and Protection) Act 1998*. Section 165.

³⁷ Young people transitioning from out-of-home care to adulthood -Review of policy and program approaches in Australia and overseas. T. Beauchamp, UnitingCare Children, Young People and Families, p.14.

³⁸ *Ibid.*

- **Tasmania** begin planning at the age of 15 and the support is limited to one year following discharge from care but may be extended up to three years (or age 21 years). Financial support can be provided from the age of 19 years through referrals to the After Care Support Program and continue up to the age of 25 years “as needed.”
- **Queensland** begin their planning one month prior to 15th birthday. Support is provided to 18 and if further support is considered necessary after 18, a Special Services Case must be opened. There is no upper limit to the duration of support stated, either in legislation or policy however the expectation articulated in the policy is that the duration of a Special Service Care intervention generally should not exceed 12 months, but also “as needed”.
- **Australian Capital Territory** leaving care plans are to cover a 5-year span, including the years that the young person is still in care. Planning should commence no later than 16 ½ years. Support can continue up to the age of 21 ½ depending on the age at which planning commences “as needed”.³⁹

9. Other Work in Relation to Aftercare by EPIC:

Further work in relation to aftercare is currently taking place which may be of interest. IFCA and EPIC have set up a Joint Working Group to develop a response to the Review of Tusla’s Leaving and Aftercare Policy 2017. Both IFCA and EPIC support foster carers and children in the foster care system and are developing a joint submission to Tusla and the DCEDIY on the strengths and weaknesses of Tusla’s current policy and its impact on children and those who care for them. Tusla’s leaving and after care policy (hereafter referenced as the policy) is now in its third year of delivery to support young people leaving care. Much learning has been generated from three years of the policy’s implementation from both the foster carer’s perspective and from the young person’s perspective as well as organisations which support them. IFCA and EPIC are now assessing both the positive aspects and impediments of the policy and wish to contribute to the review of the policy through the development of a formal submission, drawing on the learning and experiences of children in care who move to independence.

10. Going Forward:

EPIC looks forward to engaging with the DCEDIY and Tusla on the issue of aftercare, in order to work towards a more holistic, and focused approach to ensuring young people in care are able to lead happy, rewarding and fulfilling lives, are able to be part of a community, and contribute to society.

³⁹ *Transitioning from out of home care to independence*, Dept. of Families, Housing, Community Services and Indigenous Affairs together with the National Framework Implementation Working Group. 2010. p,11.