



# AMPLIFYING VOICES



Enshrining the Right to  
Independent Advocacy for  
Children in Care and  
Care-Experienced Young  
People in Legislation



empowering people in care



CARE AWARE

April 2023

**“Children in care are often isolated with their concerns, without an adult to whom they can talk. Children communicate best when they feel they have a protective figure in whom they can confide.”**

### **Commission to Inquire into Child Abuse Report, 2009**

## **What is independent advocacy?**

Independent advocacy is a process of helping children and young people to express themselves, empower them to have a say and be heard on issues that affect their life and bring about positive change (with the help of non-governmental professional, known as an Advocate).

Children in care and young people with care experience are often expected to engage with a complex array of systems and processes, as well as a range of professionals and state agencies that most adults would find difficult to navigate.

A child in care or young person with care experience will often seek independent advocacy when their care is at a critical juncture. While there can be many Advocates in a child in care’s life, including social workers, Guardians ad Litem, and other professionals, the independence of the Advocate is vital to ensuring the child’s views are heard and considered in line with Article 12 of the UN Convention on the Rights of the Child. An independent Advocate can also be necessary to ensure a child’s rights are upheld where they are not being fully realised or fulfilled by the state.

At EPIC, Empowering People in Care, we believe that all children and young people with care experience should have the right to independent professional advocacy, as this fulfils a crucial role in enabling them to communicate their wishes and feelings and play an active role in decision-making regarding key aspects of their lives. Children in care with whom we work often report a feeling of powerlessness, a lack of clarity on what is happening in their circumstances, and a sense that they are left behind in decisions that are fundamental to their lives and wellbeing.

Children have a right to an Advocate to speak on their behalf in their dealings with the care system, recognised in UN conventions and recommended in state inquiries (such as the UN Convention on the Rights of the Child and the Report into the Commission into Child Abuse (The Ryan Report)), however, this right has yet to be enshrined in law.<sup>1 2</sup>

Independent advocacy services already exist in Ireland and have proven beneficial for certain groups. For example, independent advocacy for persons with disabilities was established by the Citizens Information Act 2007 and is carried out by the National Advocacy Service for People with Disabilities (NAS).<sup>3</sup> In 2021, their Patient Advocacy Service was able to provide support to 1205 people on 3,382 separate issues. Such is the success of NAS that the Department of Health has expanded their remit, extended the coverage of their Patient Advocacy Service to include not only those in acute hospitals but to also cover those in nursing homes and are currently exploring independent advocacy potential in adult Mental Health Services. The NAS has a particular remit that is exclusive to certain persons with disabilities and does not cover those under the age of eighteen, but it is an example of where independent advocacy has assisted in the progressive realisation of the rights of marginalised groups, in line with Ireland’s commitments under the UN Convention on the Rights of People with Disabilities and national law.

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<sup>1</sup> UN Committee on the Rights of the Child (CRC), *General comment No. 12 (2009): The right of the child to be heard*, 20 July 2009, CRC/C/GC/12, available at: <https://www.refworld.org/docid/4ae562c52.html> [accessed 3 February 2023]

<sup>2</sup> *Commission to Inquire into Child Abuse Report*, Vol. IV, Dublin, 2009, p.463.

<sup>3</sup> NAS has a particular remit to work with people with disabilities over the age of eighteen who are in particularly vulnerable situations. This includes people with disabilities who live in residential services, who attend day-services, who live in inappropriate accommodation, who have communications differences, who are isolated from their communities or who have limited natural supports.

## What does an Advocate do for a child in care and young person with care experience?

**An Independent Advocate** is a person employed to provide children with information and advice, advocacy, representation, and support to ensure their wishes and feelings are heard, understood, and taken seriously by agencies making decisions about them. Independent Advocates are focused solely on the child's views, and they can take all necessary lawful action to assist the child, including supporting him or her to seek legal advice and representation.

Independence is essential for an Advocate to be able to act on behalf of the child or young person. In this instance, advocacy can only be made possible if children and young people are confident that Advocates are acting exclusively on their behalf and do not have apparent conflicting interests i.e., acting on behalf of the state (or another interest) simultaneously.

In practical terms, the nature of an Advocate's role can vary. From providing basic information and supporting a child or young person to know and understand their rights, to practical support, such as working with other professionals to ensure the best outcomes for the child, or a higher level of engagement, where an Advocate attends a care review or court proceedings with a child or young person.

An Advocate can often bring clarity and understanding of the child's perspective, ensuring the child remains everyone's focus throughout their care and child-centred practice is upheld. By providing the child with additional support and confidence, the Advocate ensures a fuller picture emerges of the child's life, wishes, and concerns.

Many children in care and young people with care experience who have used advocacy services have derived immense value and benefit at key times, such as when plans were being made for them by adults in charge of their care or entitlements. Children and young people reported that Advocates listened to them and conveyed their views, spoke for them when they were either too shy or embarrassed to speak, and explained circumstances and decisions that were often bewildering and disempowering.

In essence, an Independent Advocate works to uphold a child's right to be heard and that their views are given due consideration in their care arrangement, where it is essential to gain a clear picture of their wishes, thoughts, and feelings to ensure success of their placement.

Furthermore, independent advocacy demonstrates a clear value-for-money proposition by often resolving issues which might otherwise result in lengthy and costly court proceedings that are rarely in the best interests of the child, should there be the opportunity to avoid them. At a time in Ireland where the child protection and welfare system is under pressure due to inadequate social work and social care numbers, independent Advocates can ensure that some immediate concerns and issues affecting children in care are addressed in a timely manner.

## What does EPIC do?

Each year, on average, there are 6,000 children and young people in the care of Tusla. Therefore, EPIC estimates one child in every primary school and four young people in every secondary school in Ireland are living in care.

Children and young people in care are cared for by their extended family, by foster carers, in children's residential care homes, or special care placements.

EPIC is the only independent organisation working exclusively with children in care and young people who have care experience in Ireland. EPIC provides a direct 1:1 advocacy service to enable children and young people to have their views and concerns heard, to empower them to speak for

themselves, to resolve the issues and challenges they raise, to help them to obtain the services and resources they need and bring about positive change in their lives.

In 2021, EPIC Advocates worked across Ireland supporting 491 children and young people on a total of 777 advocacy cases. Nearly half (46%) of all requests for advocacy were initiated by children or young people themselves.

The demand for EPIC Advocates is also increasing, seeing a 56% increase in demand from 2016-2021. A range of issues were addressed across the 2021 caseload; however, the five main presenting issues were:

1. Accommodation
2. Care placement
3. Aftercare
4. Family contact
5. Legal Support

**“Children need independent advocacy to ensure their wishes and feelings are listened to, and their rights are respected. The child in care that is being moved from area to area against her wishes because money must be saved. The teenager leaving custody still not knowing where he will live the next day. The autistic child in hospital, who is regularly being chemically restrained, and has no discharge date in sight. The care leaver being refused accommodation because the councils involved can’t agree who is responsible. The teenager in a secure mental health hospital who can’t go on home visits because there are staff shortages, and no-one is available to carry out an assessment. The child who has been trafficked into this country and must interact with an overwhelming number of professionals to get appropriate support. The child in a residential special school who is frequently restrained and desperately unhappy. The child in a secure hospital, ready to go back to the community, but stuck in the institution because money can’t be found to pay for it. The child in custody who has been segregated for over a week and feels overwhelmed and unable to challenge the decision. The disabled child who is not getting the support that is theirs by right. The child facing exclusion from school after a violent outburst whose teachers don’t realise, he witnesses domestic abuse most nights at home. Finding your way through systems and services is a challenge for most adults but for the most vulnerable children who depend on them, it can be impossible.”**

**Children’s Commissioner for England “Advocacy for children - Children and young people’s advocacy in England” (July 2019)**

**What are the current laws (and supporting reports) regarding a right to independent advocacy for children in care and young people with care experience?**

[The UN Convention on the Rights of the Child](#)

Where the State is acting in loco parentis for children and young people it bears significant responsibility for their health, wellbeing, and socio-economic outcomes. The foundation of this relationship is upheld by Ireland’s ratification of the United Nations Convention on the Rights of the Child (UNCRC).

The right of the child to be an active participant in this relationship is underpinned by Article 12 of the UNCRC (UN Convention on the Rights of the Child), which explicitly calls for legislation to be

introduced to ensure that “children in all forms of alternative care, including in institutions, are able to express their views and that those views be given due weight in matters of their placement”.<sup>4</sup>

Additionally, the UNCRC clearly asserts that all “State Parties shall assure to the child who is capable of forming his or her own views the right to express those views freely in all matters affecting the child, the views of the child being given due weight in accordance with the age and maturity of the child. For this purpose, the child shall in particular be provided the opportunity to be heard in any judicial and administrative proceedings affecting the child, either directly, or through a representative or an appropriate body, in a manner consistent with the procedural rules of national law.”

UNCRC Art. 12 maintains that children are competent humans who have the inherent right and capability to contribute to decisions that affect their lives. Independent Advocates play a critical role in ensuring that a clear picture of a child’s wishes, thoughts and feelings is central to their care.

In their 2023 report, the UN Committee on the Rights of the Child issued their Concluding Observations where the Committee recommended that the Irish state ensure both:

- “The right of all children to express their views and to have them taken into account in all decisions affecting them”; and
- “That children’s views and best interests are taken into consideration in child care proceedings”.<sup>5</sup>

#### [Article 42A of Bunreacht na hÉireann, the Irish Constitution](#)

As a result of a referendum held by the State on 10th November 2012, where majority of 58% to 42% passed the proposed thirty-first amendment and the insertion of Article 42A to the constitution. This amendment echoed Article 12 of the UNCRC and stated that “Provision shall be made by law for securing, as far as practicable, that in all proceedings referred to in subsection 1° of this section in respect of any child who is capable of forming his or her own views, the views of the child shall be ascertained and given due weight having regard to the age and maturity of the child.”

#### [Report into the Commission into Child Abuse \(The Ryan Report\)](#)

The Report of the Commission to Inquire into Child Abuse (The Ryan Report) was published on 20 May 2009. The report included 20 recommendations and focused on government departments and institutions responsible for services in the period in question. Following the publication of the report, a detailed Implementation Plan was prepared and published in July 2009.

The Implementation Plan recognised the role of independent advocacy in advancing the rights of children in care and stated that: “The HSE and IYJS will ensure that all young people in care and detention are made aware of the work of IAYPIC<sup>6</sup> and will support children should they wish to contact or become involved with the service.”<sup>7</sup>

The Report gave the following rationale for this recommendation “Children in care are often isolated with their concerns, without an adult to whom they can talk. Children communicate best when they

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<sup>4</sup> UN Committee on the Rights of the Child (CRC), *General comment No. 12 (2009): The right of the child to be heard*, 20 July 2009, CRC/C/GC/12, available at: <https://www.refworld.org/docid/4ae562c52.html> [accessed 3 February 2023]

<sup>5</sup> UN Committee on the Rights of the Child (CRC), *Concluding Observations No. 5-6 (2023) CRC/C/IRL/CO/5-6*, available at: [https://tbinternet.ohchr.org/\\_layouts/15/treatybodyexternal/Download.aspx?symbolno=CRC%2FC%2FIRL%2FCO%2F5-6&Lang=en](https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=CRC%2FC%2FIRL%2FCO%2F5-6&Lang=en) [accessed 10 February 2023]

<sup>6</sup> IAYPIC (Irish Association of Young People in Care) is the former name of EPIC.

<sup>7</sup> Office of the Minister for Children and Youth Affairs, *Report of the Commission to Inquire into Child Abuse, 2009, Implementation Plan*. 2009, p.463.



feel they have a protective figure in whom they can confide. The Department of Health and Children must examine international best practice to establish the most appropriate method of giving effect to this recommendation.”<sup>8</sup>

In July 2009, the Irish Government committed to all 99 actions contained in the Implementation Plan, including the realisation of the child’s right to be heard via independent advocacy.

### Child Care Act, 1991

A suite of Regulations pursuant to the Child Care Act, 1991 section 42 were commenced in 2004 regarding Child in Care reviews, a periodic review by the social worker of child’s care placement. The regulations require that the Child and Family Agency, Tusla, afford the child an opportunity “to be heard in person on the review or otherwise to be consulted” and shall have regard to “any views or information furnished by the child.”<sup>9</sup>

### Child Care (Amendment) Act 2022

The Child Care (Amendment) Act 2022 formalised the right to a Guardian Ad Litem (GAL) for children in legal proceedings. It creates a presumption in favour of appointment of a GAL in proceedings before the District Court, and provision for automatic appointment in special care cases before the High Court.

It further established the child’s right to be heard in proceedings that affect them and that their views must be heard by the courts and given due regard in said proceedings having regard to the child’s age and maturity.<sup>10</sup>

While a GAL and an Advocate have distinct and separate roles in supporting a child or young person, it is very welcome to see their role in ensuring that the views of the child are heard and ascertained in child care proceedings being established on a statutory basis, as well as the establishment of the national standardised GAL service. EPIC believes a similar approach should be taken with the provision of independent advocacy services.

In this instance, placing the appointments of GAL on a statutory basis is a substantial step forward in vindicating the child’s constitutional right to be heard in matters relating to them.

While the underpinning of the child’s right to be heard in judicial proceedings (via a GAL) is hugely welcome and brings us some way towards realising this right, the UNCRC is explicit in stating that this right should be facilitated not only in judicial settings but in all significant matters relating to care placement, where decisions beyond a care order are made.

We should also be mindful that legal proceedings relating to care order hearings are only a small part of the child’s care journey, and [most] hearings are short, with 81.7% taking less than an hour, when recorded.<sup>11</sup> Whereas many of the critical meetings in relation to the care of the child (such as child in care reviews) happen following an order being made.

Prior to the 2022 Act, a Guardian ad Litem had been appointed in just over half of these cases (53%) before the family courts.

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<sup>8</sup> *Commission to Inquire into Child Abuse Report*, Vol. IV, Dublin, 2009, p.463.

<sup>9</sup> Reference latest submission when finalised

<sup>10</sup> At the time of writing, Child Care (Amendment) Act 2022 Section 5 is yet to be commenced.

<sup>11</sup> Coulter, C. (2015). Final report - childcare law reporting project. [https://www.childlawproject.ie/wp-content/uploads/2015/11/CCLRP-Full-final-report\\_FINAL2.pdf](https://www.childlawproject.ie/wp-content/uploads/2015/11/CCLRP-Full-final-report_FINAL2.pdf).

## Recognising the value of independent advocacy – UK model

Under UK legislation, all local authorities with social services and/or responsibilities were directed to ensure that advocacy services are provided for children and young people making or intending to make a complaint under the Children Act 1989.

It further imposes on local authorities the duty to plan for the provision of advocacy services for care leavers making or intending to make representations.

The UK government also developed a set of *National Standards* for the provision of advocacy services and *Guidance for the provision of advocacy services* under *The Advocacy Services and Representations Procedure (Children) (Amendment) Regulations 2004*.

These standards were developed to help all agencies and staff commissioned by councils with social service responsibilities to provide advocacy for looked after children and for those in need – including care leavers and disabled children. The standards set the minimum level that children and young people can expect from professionals providing advocacy services.

Not only are these guidelines for children and young people making or intending to make a complaint, but they are also understood to cover representations which are not complaints. For example, children and young people should be able to secure the support of an Advocate in putting forward representations for a change to be made in the service they receive, or the establishment they live in, without this having to be framed first as a specific complaint. They also allow for variations where circumstances are deemed exceptional.

There is also a requirement for the participation of children and young people in day-to-day decision-making in their own care spelt out in The Government's Objectives for Children's Social Services (September 1999). Objective 8 requires local authorities actively to involve service users and carers in planning services, and in tailoring individual packages of care, and to ensure effective mechanisms are in place to handle complaints.

### **Children Act 1989 (UK)**

#### **Section 26A - Advocacy services**

- (1) Every local authority shall make arrangements for the provision of assistance to—
  - (a) persons who make or intend to make representations under section 24D; and
  - (b) children who make or intend to make representations under section 26.
- (2) The assistance provided under the arrangements shall include assistance by way of representation.
- (3) The arrangements—
  - (a) shall secure that a person may not provide assistance if he is a person who is prevented from doing so by regulations made by the Secretary of State; and
  - (b) shall comply with any other provision made by the regulations in relation to the arrangements.
- (4) The Secretary of State may make regulations requiring local authorities to monitor the steps that they have taken with a view to ensuring that they comply with regulations made for the purposes of subsection (3).
- (5) Every local authority shall give such publicity to their arrangements for the provision of assistance under this section as they consider appropriate.

**“All young people need to know that they have access on a regular basis to an advocate, external to the centre, to whom they confide any difficulties or concerns they have in relation to any aspects of their care.”**

**Ombudsman for Children, 2014**

## How a right to independent advocacy for children in care and young people with care experience might be enshrined in law

At EPIC, we believe that:

- Independent advocacy services can and do support statutory authorities to effectively meet their duties as corporate parents to children in care by improving both children’s experience of the care system and their outcomes beyond the care system.
- Statutory obligations to support independent advocacy are inadequate, resulting in significant inconsistency in a child or young person’s access to an independent Advocate.

EPIC’s position is that the following objectives should be pursued to enhance the right to independent advocacy provision in Ireland:

- Independent advocacy should be recognised in legislation, and a monitoring and reporting system for advocacy services should be introduced to ensure that learning from individual advocacy cases leads to improvements in services for all children and young people in care or with care experience.
- The development of a statutory framework for advocacy provision should be prioritised, including National Standards and statutory guidance, to improve access to quality independent advocacy services for children and young people in the care system.
- The commissioning of advocacy services should consider the full range of legislation and regulation, and services should be commissioned on a minimum three-year basis.
- Statutory authorities should work to make children and young people in the care system, and the professionals and other adults involved in their lives, better aware of independent advocacy services and the benefits these services can bring.

## Review of the Child Care Act, 1991

The principal legislation that governs alternative care in Ireland is the Child Care Act, 1991 (as amended), which will require amendment to establish the right to independent advocacy.

The government has undertaken a review of the 1991 Act and is currently in the process of drafting the Heads of Bill.<sup>12</sup> The review and subsequent reform were a recommendation of Better Outcomes Brighter Futures – The National Policy Framework for Children and Young People 2014-2020.

While the scope of this bill remains unclear, EPIC believes this upcoming legislation presents a unique opportunity to enshrine the right to independent advocacy for children and young people who are in or have been in the care of the state in law.

Given recent advancements in formalising the right to a Guardian Ad Litem, the bill can achieve an effective, child-centred protection and welfare system that recognises the separate and complementary roles and safeguards provided for by Social Workers, Guardians ad Litem and Advocates. EPIC would welcome all representations to make the right to independent advocacy a reality for children in care and young people with care experience.

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<sup>12</sup> Department of Children, Equality, Disability, Integration and Youth ‘Review of the Child Care Act 1991’. Available at: <https://www.gov.ie/en/publication/97d109-review-of-the-child-care-act-1991/>



# Advocacy Case Studies



# Jeremy | Aftercare Plan

## Background

Jeremy, a wheelchair user, requested independent advocacy when he was approaching his 18th birthday. With only two weeks to go, he still had no formal aftercare plan in place in relation to where he would live and what supports he could expect to have after turning 18.

## Main Presenting Issues

- Jeremy was worried about the breakdown of his foster placement upon 18 and with no clarity on where he would live, he feared ending up in homeless accommodation.
- Jeremy had great support in his school and did not want to have to suddenly give this up. Jeremy was due to sit his Leaving Cert the following summer and so it was important to him that he remained in the same school.
- Jeremy wanted to know what supports he would receive to enable him to live a full and active life, including transport to and from school and medical appointments; the ability to link in with social networks and supports and to see friends and family; and to access educational and training opportunities moving forward. Jeremy would also need supports in relation to personal care tasks and wanted clarity on provision of such.

## Key Actions taken by Jeremy's Advocate

1. Jeremy's Advocate worked with him to identify each of the areas that were most concerning to him and offered advice and support.
2. The Advocate received Jeremy's permission to liaise with the relevant professionals involved in his situation. Through this engagement, the Advocate was able to explain to Jeremy what stage the planning was at, and what the considerations were.
3. The Advocate obtained legal advice on Jeremy's behalf with Jeremy's consent and supported Jeremy to request an in-person meeting with the relevant professionals with responsibility for his care. At this meeting, Jeremy was supported to explain his lived experience and the stress the uncertainty of his circumstances had caused.
4. The Advocate continued to attend meetings with Jeremy's permission to track progress and support Jeremy's input.

## Outcome

Jeremy received a commitment in writing from the relevant agencies involved in his care on the planned provision of supports and services as part of his aftercare plan. It also stated that Jeremy would be accommodated in a location where he could access these. This offered Jeremy the reassurance he needed, particularly regarding his being able to remain in his school. While this case is ongoing and resolution has yet to be reached, Jeremy has felt supported to have his views heard and considered, and he continues to work with his Advocate in the hope of securing the supports and services to which he is entitled.



# Sarah | Care Placement

## Background

Sarah is twelve years old and had lived with her foster family since birth. Due to circumstances outside Sarah's control, she could no longer live with her foster mum and dad. As an interim measure, Tusla placed Sarah in the care of her foster sister who was starting the process of applying to be a foster carer for Sarah. Sarah was aware that her foster sister may not be approved as a foster carer and requested independent advocacy to support her to have her views heard in relation to where she wanted to live.

## Main presenting issues

- Sarah was worried she may not be able to continue living with her foster sister.
- She wanted to know more about the fostering assessment process.
- Sarah wanted to know who makes the decisions and how she could share her views with the decision makers.

## Key Actions taken by Sarah's Advocate

1. Sarah met with her Advocate a number of times which allowed for a safe and trusted relationship to be built. This enabled her to open up about her fears and anxieties.
2. Sarah gave her consent for her Advocate to speak with her Social Worker and GAL who were key stakeholders in her care planning.
3. Over the following months, Sarah's Advocate attended several Child in Care reviews and professional meetings on her behalf to represent her views and thoughts in relation to where she wanted to live. In addition to these meetings, Sarah's Advocate supported her in writing a letter to the Foster Care Committee Chair detailing her position on where she wanted to live.
4. Throughout the whole process Sarah was supported by her Advocate to speak to all the key stakeholders in her life.

## Outcome

Sarah's foster sister was approved as a foster carer which meant Sarah could continue to live with her. Sarah was at the centre of all decisions that were made, and she was kept informed of the fostering process in a child-centred way during the assessment, with her views taken into consideration throughout. Sarah told her Advocate that she valued the support she received from EPIC and that she felt that the advocacy helped her in feeling less uncertain about her future.



# Joyce | Accommodation

## Background

Joyce was in the care of Tusla for most of her childhood. As such, she qualified for aftercare services when she turned 18 until her 21st birthday. During this time, Joyce was supported to apply to her local housing authority for housing support. When she was 23, Joyce self-referred to EPIC due to the extremely difficult and challenging environment she was living in at that time and spoke of how the stress of her housing situation was negatively impacting her mental health.

## Main Presenting Issues

- Joyce remained on the waiting list of her local housing authority but in the meantime had no safe place to live. Joyce had no family members to support her or that she could reside with temporarily and had no means to rent or secure accommodation on her own due to high rents in the area.
- Joyce was also concerned that her precarious housing situation would affect her ability to complete her college course.

## Key Actions taken by Joyce's Advocate

1. On her Advocate's advice, Joyce agreed to submit an Exceptional Social Grounds (ESG) application to her local housing authority seeking priority housing.
2. With Joyce's permission, her Advocate contacted her previous Aftercare Service and they agreed to support her application. They wrote a letter to the local housing authority confirming that Joyce had been in the care of Tusla and advocated for priority housing for her, as did her Advocate.
3. Joyce and her Advocate made a list of other professionals and services she felt comfortable to approach to ask for letters to support her ESG application. This resulted in support letters from Joyce's college and her GP being obtained.
4. Once the supporting documents had been gathered, Joyce and her Advocate completed the ESG application together.
5. Her Advocate also assisted her in writing her own advocacy letter in support of her ESG application.

## Outcome

Joyce gained a greater understanding of her rights and entitlements regarding her housing needs and learnt about the ESG application scheme which she was not aware of previously. She also gained a greater understanding of the housing process overall. Shortly after submitting her application, Joyce was granted priority housing with her local authority. Joyce communicated to her Advocate her relief and happiness with this positive outcome and thanked her Advocate for their support and guidance. Joyce also communicated the importance of a stable home while completing her 3rd level course, and the positive impact this security had on her mental health overall.



# Joe | Aftercare

## Background

Joe had been living in a children's residential centre for unaccompanied minors when his Advocate first met him at age 17. He had arrived in Ireland when he was 16 years old and was in the process of applying for refugee status. This process had been delayed in part due to the COVID-19 pandemic. As Joe's application for refugee status was still ongoing when he turned 18, he would be moved out of his residential care placement and into an International Protection Accommodation Service (Direct Provision) centre in another county. Joe wanted clarification in relation to his aftercare entitlements.

## Main Presenting Issues

- Joe requested independent advocacy to understand aftercare and clarify his rights and entitlements as he awaited a decision on his refugee status.
- Joe was anxious about moving to another county and living in Direct Provision where he would be sharing a bedroom with people who were unknown to him.
- Joe was also concerned about his ability to continue attending a course he had started. He was not eligible for an aftercare allowance as he had not received a decision on his asylum application, and he therefore would not be able to afford the costs of traveling to and from another county each day to attend his course.

## Key Actions taken by Joe's Advocate

1. The Advocate, with Joe's permission, contacted his Tusla Social Worker and Aftercare Worker to raise his concerns with them. A meeting was arranged between Joe, his Advocate and Tusla to discuss his aftercare plan and entitlements in further detail.
2. When Joe moved out of his residential placement and into a Direct Provision Centre, the Advocate and Joe's Aftercare Worker met with him regularly to ensure that he was settling in and felt safe in his new accommodation and county.
3. Joe's Advocate liaised with Tusla regarding the financial situation concerning his travel to and from his course without the support of an aftercare allowance. However, due to Tulsa's current aftercare policy, this could not be processed until a decision had been made on Joe's asylum application.
4. With Joe's consent, his Advocate made an application to EPIC's Education Fund on his behalf for financial assistance for transport to and from his course each day.
5. Joe's Advocate also supported him in liaising and corresponding with his solicitor to ensure he was kept updated on his asylum application.



# Joe | Aftercare

## Outcome

Joe was supported to better understand aftercare and his rights and entitlement and supported in his move to the IPAS centre with regular check-in meetings occurring with both his Advocate and Aftercare Worker. Through the EPIC Education Fund, Joe's Leap card was topped up each week so he could continue to attend his course, while awaiting a decision on his refugee status and subsequent aftercare allowance.

Joe has since been granted refugee status and is now eligible for the full aftercare allowance. Joe has registered for council housing and is planning his transition out of the IPAS centre. Joe thanked his Advocate for helping him to feel that he was not alone in navigating these difficult transitions and after a challenging period, Joe feels very positive about his future in Ireland.





**empowering people in care**

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