DÁIL ÉIREANN

AN COMHCHOISTE UM LEANAÍ, COMHIONANNAS, MÍCHUMAS, LÁN-PHÁIRTÍOCHT AGUS ÓIGE

JOINT COMMITTEE ON CHILDREN, EQUALITY, DISABILITY, INTEGRA-TION AND YOUTH

Dé Máirt, 20 Meán Fómhair 2022

Tuesday, 20 September 2022

Tháinig an Comhchoiste le chéile ag 3 p.m.

The Joint Committee met at 3 p.m.

Comhaltaí a bhí i láthair / Members present:

Teachtaí Dála / Deputies	Seanadóirí / Senators
Holly Cairns,	Tom Clonan,
Patrick Costello,	Ned O'Sullivan,
Alan Dillon,	Lynn Ruane,
Jennifer Murnane O'Connor,	Mary Seery Kearney.
Mark Ward.	

Teachta / Deputy Kathleen Funchion sa Chathaoir / in the Chair.

Foster Care: Discussion

Chairman: Everyone is very welcome. We are delighted everyone is here and that we are reaching this item. It is something the committee wanted to look at for a long time. I am sure everyone has been following the committee proceedings. Many other issues have fallen on us as well.

The item for consideration is issues relating to foster care. We are meeting with the following representatives: from EPIC, chief executive, Ms Marissa Ryan, Ms Lauren O'Toole, and Mr. Rory Brown; from the Irish Foster Care Association, Ms Catherine Bond, chief executive, Mr. Raymond Nolan, chairperson, Mr. Brendan Gillen, treasurer, who is joining us remotely via Teams, and Dr. Helen Gogarty; from the Irish Association of Social Workers, Ms Aine Mc-Guirk, social worker, and Dr. Valerie O'Brien, chair of the IASW social workers in foster care special interest group and social worker and assistant professor in the school of social policy, UCD; and Ms Aoife Bairéad, independent social worker at Minds in Mind. They are all very welcome to the meeting.

In relation to parliamentary privilege, I would like to advise people that the chat function on Microsoft Teams is only to be used to make the team on-site aware of any technical issues or urgent matters that may arise. We ask people not to use to make general comments or statements during the meeting. I remind members of the constitutional requirement that members must be physically present within the confines of the Leinster House complex in order to participate in public meetings. Members will not be permitted to participate where they are not adhering to this constitutional requirement. Therefore, any member who attempts to participate from outside the precincts will be asked to leave the meeting. I ask any member who is participating via Teams that they confirm they are on the grounds of Leinster House before making their comments.

In advance of inviting the witnesses to deliver their opening statements, and in relation to parliamentary privilege, witnesses participating from the committee room are reminded of the long-standing parliamentary practice that they should not criticise or make charges against any person or entity by name or in such a way as to make him, her or it identifiable or otherwise engage in speech that might be regarded as damaging to the good name of the person or entity. If their statements are potentially defamatory in relation to an identifiable person or entity, they will be directed to discontinue their remarks and it is imperative that they comply with any such direction. Witnesses attending remotely from outside the Leinster House complex should note that there is uncertainty as to whether parliamentary privilege applies to evidence delivered from a location outside the parliamentary precincts of Leinster House, so if a witness is directed by the Chair to cease giving evidence in relation to a particular matter, it is imperative that they comply with any such direction.

Whoever is delivering the opening statement has been allocated five minutes. I ask people to adhere to that, if possible, so that there is plenty of time for questions. We will start with Ms O'Toole who will be followed by Ms Bond, Dr. O'Brien and Ms Bairéad

Ms Lauren O'Toole: I am 21 and I am part of the EPIC youth council. I have been with EPIC for seven years. We would like to thank committee members for inviting us here today and we are pleased to be joined by our colleagues from the Irish Foster Carers Association, IFCA, the Irish Association of Social Workers and Ms Aoife Bairéad. EPIC is a national children's rights organisation that works with and for children in the care system, young people

in after-care services and with care-experienced young people up to age of 26. We work with children in foster care, kinship care, and residential care, including high support and special care and those sentenced or remanded by the courts in Oberstown Children's Detention Campus. We are the only organisation in Ireland providing a direct, independent advocacy service to these children and young people, and their experience and perspectives inform our submission today.

I am joined by the CEO of EPIC, Ms Marissa Ryan, and a member of the EPIC Youth Council, Mr. Rory Brown. Ms Ryan is happy to answer any questions on EPIC's policy on fostering and Mr. Brown and I will share our views based on our experience of living in foster care.

At the outset, we have several key messages we urge the committee to consider and we are happy to discuss these in more detail throughout this meeting. We particularly hope that these and other issues raised in EPIC's submission to budget 2023 are acted on. Foster carers who open their home to children who cannot live with their birth families change and save lives. They need to be celebrated and supported by the Government. The State relies on these people to look after the children in its care, but foster care is not invested in and carers do not receive the support they require.

Foster carers are often responsible for supporting a child that has been traumatised, while they also have to look after their birth children. They need to manage the logistics of family life, engage with social workers, birth families and other professionals. Politicians should regularly and vocally support fostering in their constituencies and at a national level. The fostering community must see that they are recognised and valued and that foster parents and foster children are an important part of our society. As we say in EPIC, "It takes a village to raise a child." Fostering allowances have not been increased since 2009 and there is now a cost-ofliving crisis, a housing crisis and other factors which mean foster care numbers are decreasing rapidly. It is far cheaper for the State to support children in foster families than in residential care. Research has shown that it is better for children to be placed with a family rather than in residential care, which is an institutional setting that lacks stability and a family environment. The Government should use the annual budget to increase the fostering allowance to ensure fosterers can afford to offer homes to children who need them and to ensure that foster children have the opportunities to thrive with their foster families, including by having the means to attend extracurricular activities, to go on holidays or to simply enjoy being a child.

The act of being taken into care is traumatic. Children can lash out, be angry, upset and feel incredibly isolated and vulnerable. This can cause problems with the foster families, including with the birth children of foster parents. Both foster carers and their birth children should be given regular training on trauma informed care, as well as access to counselling, as should the child in care who is living with them. The Government should ensure additional funds are ring-fenced in Tusla for the provision of counselling and therapeutic interventions to children in care and foster families, and that children in care are prioritised by the HSE for timely access to mental health services.

Foster families often do not receive enough support from social workers, fostering link workers or aftercare workers. They can be left responsible for managing everything in the child's life and this can become overwhelming. For example, where a social worker or access supervisor is not available to drive a child to see their birth family, or when a social worker needs those hours for something else, this can fall on the shoulders of the foster parents, and they must deliver all the logistics and manage the emotional issues that can arise during access visits between a child in care and their birth family. This is on top of all the other work that

needs to be done in a family home.

Tusla has a shortage of social workers and other professionals whose role it is to support families and children. More investment and political supports are needed to allow Tusla recruit and retain social workers and other professionals who can assist children in care and foster families, and have regular contact with them.

Normalising foster care is very important. Many foster children in EPIC were brought to local events for foster families run by the Irish Foster Care Association, IFCA, to meet other foster children. This helped to fight the stigma and isolation around fostering, and was often a place where young people in foster care could see their siblings who may have been placed in a different foster home in the area. Politicians should work with local authorities, city councils, IFCA and others to run days like this on a regular basis. They should attend them and publicise them too. At the same time the Government should examine other ways to normalise foster families, for example, through inclusion on the census form. I know when I filled out the recent census, in brackets beside the words foster family was the word "unrelated". I have never felt so heartbroken having to fill in a form in my life.

When a child is taken into care the State is acting *in loco parentis*, in the place of a parent. At the very least a child should only be removed from their home when the State can guarantee that they will be better cared for elsewhere. In Ireland the State has not been acting as a parent should. There are many cracks in the care system that politicians have ignored or are simply unaware of yet. It is this lack of investment and support that has led to the current fostering crisis, with the number of fosterers decreasing every year. This has a huge impact on children in State care and those around them. It is nearly ten years since the founding of Tusla and the development of our current child protection and welfare system. Perhaps it is time for the Government to invest in reviewing the care system, as has happened in England and Scotland in recent years.

Children in care can often be marginalised and their voices are seldom heard. In addition, they may lack regular access to a social worker or another professional. Independent advocacy, which helps a child to have their voice heard, is extremely important. Article 12 of the United Nations Convention on the Rights of the Child states that all the children have the right to be heard and to participate in decision-making about their lives. At present, EPIC is the only organisation providing a direct advocacy service to care-experienced children and young people. We believe that independent advocacy for children in care should be enshrined in legislation. Organisations like EPIC should be fully funded to meet the needs of all care-experienced children, and young people who may require an advocate to help them have their views heard and acted on.

Dr. Valerie O'Brien: I am the chairperson of the special interest group on foster care in the Irish Association of Social Workers, IASW. I am also an associate professor at UCD and a research practitioner with substantial experience in service delivery in relation to foster care. I am joined by my colleague, Áine McGuirk, member of IASW and an experienced senior practitioner with significant experience in foster fare and former chair of IASW.

A key priority goal of the IASW is to influence a change agenda in the delivery and development of foster care services. By way of background, the Irish Association of Social Workers was founded in 1971 and has approximately 5,000 registered social workers. Social work is the key profession in the recruitment, assessment, review and support and supervision of families providing foster care services in Ireland, as well as the primary support for children placed in foster care.

As the professional representative group for social workers there are five main issues I want talk about very briefly. The first one is the recruitment and retention of both foster carers and social workers. The second is support services for birth parents of children in care. The third is access to services for children and families, and we will show how it is a central dilemma for Government. The fourth is child-centred issues, particularly adoption and placement breakdown. The fifth is foster service delivery.

The first issue, which is the recruitment and retention of foster carers and which my colleague, Ms O'Toole, already referred to, poses significant difficulties. Currently, our foster carers provide care for 90% of all children in foster care. The central concern is that is a decreasing number. I was 92% two years ago and 95% about seven years ago. This is linked to changing demographies, ongoing stresses of living, the effect of significant traumas experienced by children prior to coming into care, the need to satisfy regulatory requirements and the challenge of ensuring safe care for all in the foster household. Providing foster care placements in the child's community is a challenge, with children being placed far from home. This impacts significantly on their relationship with their birth family and wider community and on their identify formation. This poses significant difficulties in facilitating good access arrangements.

The retention of foster carers in the system is affected by the manner in which complaints about them are processed and these concerns have not been alleviated by aspects of the implementation of the child abuse substantiation policy, CASP, introduced by Tusla in 2022. The recruitment and retention of social workers has been presented as a major challenge to various Oireachtas committees over the years. The allocation of a sufficient number of social workers is imperative to developing a fully supportive working relationship and support system with the foster family but also, I would advocate, with the birth family.

On support services for birth parents of children in care, there are almost no services dedicated to the support of birth parents. Parents who lose their children to care represent one of the most vulnerable sections of Irish society and their already immense problems are compounded by the loss of their children to the care system. Previously, social workers working with children in care were named the child and family social worker. However, in recent years those social workers have been framed as the children in care social worker, thus reference to the birth family is lost.

On access to services for children in care, interdepartmental action is required to address the complexity of ensuring that the State, acting *in loco parentis*, can fulfil its responsibility towards this cohort of children because the State is the parent for children in care while addressing its responsibilities towards all children, including those who are vulnerable and not in State care. That we see as the single biggest challenge for the Government.

While there has been some development in addressing the individual child's needs, therapy services specifically aimed at addressing multiple and complex relationships in the networks of relationships, including professionals, are urgently required. The difficulties of children who require state care are well documented, and placement in a foster home is just the beginning of the process to cater for the full range of a traumatised child's needs. However, services geared only to a child's needs will not address the wider relational issues. Structures in Tusla need attention to ensure flexible service delivery and provide a consistent, knowledgeable, and holistic service for children in care and their foster carers. A greater organisational focus on task over role would be an important first step.

On child-centred issues, there are two major issues. The first is adoption for children in

care. The availability of adoption to those children in care, where this is the appropriate and proportionate response, is a welcome development, but caution is also required. Statistics from the annual reports of the Adoption Authority of Ireland show that there has been little significant growth and the vast majority of children currently being adopted, because the process takes about three years, are aged close to 18 years of age. Greater attention to this context, and greater attention to how adoption is currently being used within the care planning process, are needed. Currently, we only have data coming from the Adoption Authority of Ireland, which captures the end of the process, not what is currently happening in the system. We also need enhanced placement and aftercare planning for the cohort of children seeking asylum.

Placement breakdown is a particular concern for IASW. Placements can break down, including after a child has spent a significant part of their life with the foster family. There is an urgent need for research into placement disruption as well as into placements that do not break down, as each cohort may provide useful information for the other and for our overall understanding of the relevant issues. In the short term, Tusla information systems need to collate this information at a national level while considering the complexity of pathways into care, and breakdown processes and outcomes. Some children are coming into care at infancy and placements break down when they are 12 years old. Other children come into care at 16 years of age and the placement breaks down. The cohort of children is very different, but we do not have a national picture.

In terms of foster care service delivery, we are particularly concerned about the place of privatisation in the child welfare system. We see that the commodification of care through privatisation is a serious policy issue that requires immediate attention. It is not just within foster care and children's services but elsewhere.

A Government-mandated working party to take on the task of reviewing foster care policy, the legislation, resources and best practice is required. IASW, through a publication in 2017, and further through a publication in 2018, laid out the structures for this working party in great detail with a perspective very much on the lived reality and how it needs to take account of the wider policy but also current Government structures. The paper concludes with a range of recommendations that are intended to provide a basis for discussion between the various stake-holders.

Our view is that the following measures would enhance the service delivery. First, there is a need for a Government-mandated working party, on which I believe our colleagues in IFCA will further expand. This group would review foster care policy, the legislation, resources, and best practice and consider outcomes in alignment with the United Nations Convention on the Rights of the Child. Leadership is key and the project should be sufficiently resourced to manage it at a level that reflects the importance of this work for the children of Ireland.

Under the leadership of the Minister for Children, Equality, Disability, Integration and Youth, the working party would establish a shared, objective assessment of the suitability and availability of foster care for a range of different childhood care needs across Ireland. It would engage with relevant Departments, in particular the Departments of Children, Equality, Disability, Integration and Youth, Education, Social Protection and Justice. It would co-ordinate the contribution of key executive agencies, including Tusla, the Child and Family Agency, the Health Service Executive, education, local authorities, An Garda Síochána, professional and representative bodies, academia, and the private and voluntary sector. It would collect key contributions from those with lived experience of foster care and their representatives, including EPIC, birth families, social workers and foster carers. Finally, it would build and support a

coalition of stakeholders to establish a vision for fostering in Ireland that would support, champion, and promote the delivery of shared objectives.

Foster care is the backbone of the child welfare system in Ireland. It is one of the great successes of our child welfare system. However, we are very concerned that with the diminishing numbers, we are beginning to see a major slippage.

Ms Catherine Bond: The Irish Foster Carers Association, IFCA, would concur with a number of the points raised by the Irish Association of Social Workers. On behalf of IFCA, I would like to thank the committee for the invitation to address the joint committee on issues relating to foster care. I am accompanied by the chairperson of IFCA, and a foster carer, Mr. Raymond Nolan, Dr. Helen Gogarty, expert in children's attachment, and Mr. Brendan Gillen, who is on-line, and who is an IFCA director. I have included supplementary information on IFCA in appendix 2 in the opening statement.

As already said, foster care is the backbone of care for children who are in the care of the State in Ireland. Ireland is quite unique in that the majority of the children who are in State care live with foster care families where they experience family life, which is testament to the value and importance of the family in our society and this is reflected in our legislation. Ms O'Toole has already attested to this. However, IFCA would view that foster care is at a critical juncture in Ireland with extreme challenges to the system at present. The predominant challenges are the complex issues for children who are received into care and the lack of services to respond to their needs, the challenges for foster care families in supporting those needs and the absence of investment in supporting foster care.

When a child comes into the care of the State, it is assessed that they are at risk and required care and-or protection. Foster care is the predominant type of care for children in the State, where foster families offer warm, caring family life to children, tending to their physical, social, emotional and other needs, which are underpinned by the stability of family life. Foster care families support children who may be dealing with issues of neglect, abuse, or abandonment and to help them to feel supported, loved and accepted unconditionally. This was also attested to by Ms O'Toole.

While the number of children being received into care has fallen from 6,044 in 2018 to 5,836 at the end of June 2022, so too has the percentage of children placed in foster care, falling from 92% in 2018 to just 90% in June 2022. This decrease relates to higher numbers of children being placed in non-foster care placements. This trend is worrying and one which we will be required to watch.

By the time a decision is made to place a child in care, they have already experienced many adverse early life events. These may include exposure to alcohol *in utero*, which can result in children having foetal alcohol spectrum disorder, substance abuse *in utero*, insecure or disorganised attachments and trauma. Research shows that children in care present with attachment profiles and are significantly more insecure than children in the general population who are not in care. In a 2002 study, only 6% of children in care were classified as having secure attachments, compared to the general population. This presents great challenges in responding to the needs of children in foster care. For many children these adversities remain undiagnosed.

However, as children settle into the security of the foster care family, emergent expressed unmet needs are presented, whereby foster care families are required to support the child through ranges of emotions and behaviours. To support these needs, foster care families re-

quire supports and responsive services for children. Prior to the establishment of Tusla, foster care services were located within the HSE, and had access to professional services. These included speech and language therapists and other relevant professionals to meet the needs of children. Children in the care of the State were also prioritised for such services as stipulated in the national standards for foster care. With the establishment of Tusla and the transferring of foster care services to that agency, this is no longer the case. The outcome of this decision is that children in care who have experienced early life trauma do not have access to, nor priority for, the required services.

The challenges in recruiting and retaining social workers have been identified by Tusla, which in its 2021 annual report stated there is "a risk to operational service delivery in terms of social work resources available". Tusla also identified in its annual report the risk "to the safety, welfare and wellbeing of children in foster care, due to inadequate capacity/resources/systems to ensure compliance with national standards for safeguarding". This is a perfect storm. Placing children with high levels of need with foster carers without adequate resources or supports places these foster care families under severe pressure. This can result in placement endings, as attested by Dr. O'Brien, whereby insufficient services and the absence of social work resources place unrealistic demands and pressures on foster care families.

IFCA is the only independent organisation in Ireland that supports foster carers. During 2021, IFCA supported 30 foster care families whose children's placements were in crisis and at risk of ending, which would result in a move for the child to another foster care placement if one were available. Another stress for foster care parents is the risk of allegations of abuse being made against them. The challenges faced by foster parents are great and, without support placements, flounder and can fail. It is reported that the outcomes for children in care are poor if they have a higher number of placements.

Foster carers have expressed that they do not feel valued or recognised by the State for their contribution to the State's alternative care system. This manifests in the lack of supports offered to them. These include on-the-ground support as provided by IFCA, financial supports as outlined in the pre-budget submission to the Government, and recognition by the State of pension rights. There is a shortage of foster care families to meet the demand of children coming into the care of the State, as advertised by Tusla in its most recent recruitment campaign. Foster care is the lynchpin of the State's alternative care system. Without foster carers, more children will be placed in residential care, which, as evidenced, does not offer outcomes that are as favourable for children.

There is an urgent need for investment in foster care services. We need investment in the provision of psychological and other assessments for each child entering care and the provision of appropriate assessments for existing children in care. We then need the provision of timely services as recommended by these assessments. We need more social workers and foster care families to be recruited. We need a review of social work administrative tasks to provide for more relational time with foster carers and children in care. This is the essence of social work practice. Some foster care tasks should be delegated to IFCA to reduce the workloads of social workers. These tasks could include training new foster carers, the provision of local foster care support groups and the addition of advocacy support services as an early intervention for complex foster care placements to prevent placement breakdowns. IFCA's national advocacy and counselling services should be extended. There should be financial and pension recognition of foster parents.

IFCA recommends greater investment in foster care. The contract between Tusla and foster

carers must be strengthened to give due recognition to the role foster carers play on behalf of the State in the provision of the alternative care system. We advocate the establishment of a permanent advisory panel on alternative care, comprising those with in-depth knowledge of the subject, by the Department of Children, Equality, Disability, Integration and Youth. This permanent advisory group's remit should review the current provision of foster care services and make recommendations for their enhancement and future developments. The advisory group should act as a resource for Tusla in the development and maintaining of alternative care services in Ireland.

We advocate the retention of the 2003 national standards for foster care. We recommend adequately funding IFCA, the only independent national organisation that supports foster care in Ireland, to meet the support needs of foster care families and to aid recruitment and retention of foster carers. We recommend the provision of manageable caseloads and higher levels of support for social workers to improve recruitment and retention and the introduction of a parttime social work degree to facilitate those currently in employment who wish to train as social workers. As an urgent measure the Government should seriously consider IFCA's pre-budget submission regarding financial supports for foster carers.

Foster care is the backbone of the care of children in the State and requires robust infrastructure to support it. As it stands today, foster care is at a precarious juncture. Children coming into the care system must be prioritised and receive all necessary assessments and supports. Foster carers must also receive the supports required to enable them to care for children with very complex needs on behalf of the State. Supports must be timely and available. Investment is required in the foster care system and in IFCA to provide supports that foster carers require in their role. I thank the Chairperson and committee members.

Ms Aoife Bairéad: I thank the committee for inviting me today. My role is as an independent social worker. This is not a common role in Ireland and is different from roles such as guardian *ad litem*. I specialise in attachment and trauma and I mainly do assessments and therapeutic work with children, their parents and their foster families. I primarily work with children in care. My colleagues have highlighted the immediate needs of foster carers and foster families in terms of support, payments and retention. I support this and I am very happy to answer any questions on the necessity of these changes.

Given my role, I am going to focus on relationships and recovery for children in foster care. We all have attachment behaviours and they are organised around what we know. If our care is safe, we develop flexible emotional responses to dangers. If we see toddlers trying to pull something down on top of themselves, we might shout at them and a minute later we will comfort them if they are hurt. Insecure attachment means we are no longer flexible in this set of responses. We have a smaller set of responses. The more insecure we are, the narrower this set of responses is and the more widely we apply it.

Children who are abused and neglected have been hurt, frightened and left alone. They have developed responses that keep them safe in this context. When they are in their first foster care placement, they have an opportunity to develop an alternative worldview. In the first few months that children are placed in care, we often see a remarkable burst of development, such as walking, talking and feeding themselves. Emotional development can take longer and, depending on the trauma experienced by the child, this can take a serious toll on foster carers. Sadly, because of this, some foster placements end. Children find understanding the loss of this attachment figure much more difficult to comprehend than the more overt dangers they might have experienced at home. When they move into the next placement, they try to predict dangers

they know they do not understand and cannot recognise. This can result in more heightened emotional and behaviour responses that become more profound over time. After three or more moves, the ability of children to achieve attachment security becomes unlikely if not impossible.

The Judiciary would benefit from understanding the need to prioritise the child's relationship with the carers in their first placement over all other relationships in the first 12 months the child is in care. This is true whether or not reunification is planned. Children can move from one secure attachment to another with relative ease but not from one insecure attachment to another. Judges, with the best intentions, seek to ensure children see their birth parents frequently. This is fine if the relationship is healthy, but often these relationships are full of pain and hurt on both sides. The children's experience can be that their carers, with whom they feel safe, frequently leave them with people or in places where they feel unsafe. These experiences can lead to lasting issues between the children and their foster carers even when the decision is made that the child will remain in the placement permanently. Judges should be provided with ongoing professional training to ensure they have the most up-to-date knowledge and evidence. They should also have access to an independent panel of experts to inform their decisions in the best interests of the children.

The most important factor for children recovering from abuse and trauma is finding safety in an attachment relationship. This requires that parents or carers have the right supports, resources and training so they can offer this to the children. I strongly welcome the therapeutic support hubs being rolled out in Tusla. Every child in care should have a therapeutic support plan that considers the impact of his or her experiences at home and implements a therapeutic plan promptly, rather than waiting for behaviours to emerge before intervening.

However, the impact of trauma on development means other services will be needed. Over the past 17 years of working with children in care, I have repeatedly seen children's referrals batted between Tusla, child and adolescent mental health services, CAMHS, and disability services, each claiming the referrals are the others' responsibility. Children who are in care are the State's responsibility and so the responsibility of all of these services. There should be a structure in place to scaffold these services around children in a systemic way. This is not a critique of any professional in these services. They all suffer from the same problem: too many referrals and too few staff and resources. As has been acknowledged by various professional bodies, every area of health and social care needs more graduates to fill posts, and they need the structures in place to keep those workers and avoid the disastrous turnover of staff that, from my experience, seems endemic in every area of the country, particularly in Tusla. Children, parents and foster carers have repeatedly said that, when they have a consistent social worker, their experiences with Tusla are largely positive. They frequently highlight multiple changes of social workers as undermining their trust in and experience of the service that is designed to protect them.

Positive relationships with their birth families are linked with more positive experiences of being in care. Difficult relationships with their birth family can undermine even the strongest of placements. Given this, every parent of a child in care needs specific, strategic support to help them build this. The national parent advocacy service that is being proposed needs to be in place so that the right supports can be offered to parents. To meet this need, in addition to the various addiction, mental health and pragmatic supports many parents require, they should have their own specialised supports focused on meeting their therapeutic needs as parents and attending to the therapeutic repair of the relationship with their children. Whether the child is

staying in care or not, that remains equally important.

The needs of children in care are systemic, and while they are in care, the foster placement is the central pillar of that system. We must begin treating children, their foster families and their birth families holistically if we want their care experience to be what it should be: a place of safety, recovery and love.

Chairman: Thank you. Those are all very interesting opening statements and I am sure there will be questions.

Senator Ned O'Sullivan: I welcome the witnesses. It is very interesting listening to what they have to say and reading their presentations. I am very thankful for the additional information I now have that I did not have before, and I would say many others like me did not have it before. The question of fostering does not arise very often on the political agenda - the witnesses might say that is part of the problem - unless there is some sort of scandal, be it sexual or otherwise, in which case it is in all the newspapers then. I found it very enlightening. I have a few comments and questions to all the speakers.

Ms O'Toole made a statement that foster carers are to be celebrated and supported. I agree with her 100% and I am sure every reasonable person would. We all know families, indeed they are in my constituency, who are in that position and you could not speak highly enough of them. It is only that I am thinking that perhaps there are a whole lot of problems for them that I never was aware of. I probably took it for granted they were doing a function and, just like every other parent, they were just getting on with it. I can see clearly now they are in a different position. Ms O'Toole said was that politicians should regularly and vocally support fostering in their constituencies at national level. My question for her, and perhaps she could comment briefly on it when I am finished, is how we can do that. I would be happy to do it. I engage with nearly all voluntary and community effort and I would certainly like to find a way I could be more forthcoming and of assistance there.

Dr. O'Brien's main point was the establishment of the working party, which sounds very interesting. I will be devil's advocate, if she does not mind. We have countless committees, acting committees and broad-based committees. Will this just be another one of those? That is the question the taxpayer will be asking. Dr. O'Brien spoke of an 18-month period for a report. I have yet to see a report brought in on time. That is being devil's advocate, but that said, I am fully in support of it because it makes sense to me, except that it may be yet another layer of bureaucracy.

One or two points in Dr. O'Brien's presentation interested me. The adoption rate is disappointing. Who would be the target group to adopt? I might be totally ignorant here. Is it the foster parents who adopt finally or would it be a third party? Ms O'Toole is nodding for the first. That is very good.

Then there is the decline and that 90% of children are catered for in the fostering services. What becomes of the other 10%? I think it was described as non-foster placement. I would like to know what that is.

Ms Bairéad's statement was very detailed. It is probably very micro for the likes of us. We are laymen. I am a former teacher so I have some idea of children's needs but I am not Jean Piaget. I will study this a bit more closely, and if I can be of any assistance, I will.

Chairman: There were specific questions for Ms O'Toole and Dr. O'Brien, but there are

others here with the groups who did not give opening statements. I always leave it up to the groups if they want to come in. We always have to be conscious of time. I would ask them to indicate. Does Ms O'Toole want to come in first?

Ms Lauren O'Toole: I do not think I will be able to answer the question fully, so I will ask Ms Ryan to answer too on behalf of EPIC. From my personal experience, I do not think my foster carers especially want a pat on the back when it comes to support but more that they need to have the services available to them. They have their own children and they are providing a service by being a foster parent, but the services need to be there to support them to do that properly. That is the same as saying "thank you". It is about making sure they have exactly what they need to be a foster parent and to be able to act that out fully. We in EPIC always say "care aware". People need to be aware that care experience people are in their schools, church and shop. You cannot support something that you are not aware of. It is about learning about what the care system is, its flaws and what works well in the care system, and talking directly to children in care about their lived experience. That is the best advice anyone can get. Those are the people of whom to ask the questions. That in turn will help people to help foster parents and carers. Another thing is publicising care events and so on. EPIC has a care day in February. All children in care need to know there is a day. If there is a national day for pizza, why is there not a national day for children in care?

Mr. Rory Brown: On top of that, as Ms O'Toole was saying, people should be aware there are children in care all over their communities. The fall through the cracks a lot of the time. As the Senator said, the only thing you hear about care leavers is the stigma around them. You never hear about the good deeds and the good things about many of them. I am a primary school teacher. I have finished my education. I am lucky to have achieved that but many do not get to do that and that is what you hear about. You do not hear about the positive stories. We need to reinforce the positive stories and supporting children when they come out rather than just hearing about the stigma. We should make it known there are so many positive outcomes and there are foster carers doing amazing jobs. They do not even ask for much in return. The biggest thing people can do is let them know they are supported.

Dr. Valerie O'Brien: First, regarding the foster care working party, looking back on the history of this, and I have been involved in foster care for a long time, there was the setting up in 1998 of a working party which reported in 2001. While three years may seem like a long time, that in fact led to foster care being cemented as the backbone of our child welfare system. We therefore already have very good outcomes in this country from having such a working party. The reason we are now advocating a working party again, given the complexity and the number of stakeholders and the number of Departments involved in children and children in care, is that we do not see there are effective structures currently. There needs to be a clear ministerial mandate. In this paper envisioning a working party we have itemised the various tasks and the reporting relationships in respect of the project manager, so a lot of the work has been done for the Government.

Second, as to where the other 10% of children are, in the main the children are in residential care. Tusla, in fact, while it may appear as a-----

Senator Ned O'Sullivan: In orphanages, are they?

Dr. Valerie O'Brien: Yes, residential and sometimes very small group homes. The children in care are in one of two places: in foster care or in residential homes. Residential homes are staffed by multiple different carers coming and going. For some children that may be okay, but

it is not an ideal place for children as a long-term alternative. It does, however, meet the needs of some children, particularly teenagers.

There is one point we have not stressed enough today. About 30% of all children in foster care are in fact with what we call relative or kinship foster families. That is another one of the great departures that has happened since the late 1990s. We are all family members. We all know from our own histories that things can go right for individual family members. It is one of the great chips in our child welfare system. Relative foster carers or kinship foster carers - in Ireland we call them the former - are both family member and foster carer at the same time and they have different support needs and service needs. In many ways, it is only now we are talking about them here. Even in the IASW we did not highlight that.

Third, the issue of adoption is a very interesting question. What would be the target group? The important thing about adoption is that it is extraordinarily complex, and we know what the legacy of adoption has been in this country. Therefore, while we are looking at adoption for children in care, we have to be careful to look at the individual child's needs and the intergenerational consequences of a child being adopted. The law is very clear that there has to be a proportionate response to the child. We have very little case law at present because the children currently being adopted are those being adopted by their foster carers and those who are ageing out of care. That is why the focus here has been on care planning and what is happening in that regard. If these children appear before the courts with a proposed adoption plan and if the birth parents contest that, it is in the case law that we will see what happens.

The other major limitation of adoption is that the adoption law did not incorporate a provision whereby children, even if adopted, would have a right to ongoing contact with their birth families. That has happened since 1975 in many jurisdictions.

Senator Ned O'Sullivan: That is interesting.

Dr. Valerie O'Brien: That would give legal permanence but would recognise that children have a need to know who they are. The vast majority of children who leave care go back to their own families. Adoption is complex, but Senator O'Sullivan is asking the right question about the cohort of children involved. I do not have an easy answer but it is within the care planning process. If there is a small child who definitely will not have a possibility of returning home, it is best in the first instance to try to work co-operatively with the birth parents on a secure adoption plan, but ongoing contact will be the backbone of that, and then services are needed to support that.

Would Ms McGuirk like to add anything else?

Ms Aine McGuirk: The people for whom we talk about adoption are foster carers becoming adopters. It is what some foster carers would wish to do for the children in their care if that is the right thing for the child at the time. What has happened in years gone by is that it is only at the very end because many of our foster carers are very much dependent on the foster carer allowance to give the child the kind of life the child should have. Previously, if you adopted the child, you lost the allowance and the child became the same as any child in your family. There is now a system within Tusla whereby you can apply to have the allowance continued. That allowance has not been reviewed in ten years so it will not really help to pay the electricity bill. The foster care allowance and the fact it has not been reviewed in ten years is something else that needs to be looked at. The members of the committee are all politicians and they know what that means. However, it has been a positive thing that Tusla will now give a fostering al-

lowance to a family after they have adopted a child.

The bit that is still not 100% is whether that child will then get aftercare services, which are fantastic if they get them. They get Student Universal Support Ireland, SUSI, grants, the child is treated as an individual for all their purposes, and no income coming into the foster family affects what the child gets in the form of further education, grants etc. It is not clear whether the allowance could continue into what we call the aftercare period for education and so on.

Deputy Mark Ward: I thank the witnesses. It has been a very valuable experience for me to listen to the experiences of foster caring families and the groups that represent them. I agree that people involved in foster care should be celebrated. I also agree very much with Ms Bairéad that a child's experience should be one of a place of safety and love and should be good. That should be a basic thing for any child. I thank Ms Bairéad for highlighting that.

I have a couple of questions. I will direct the first to Dr. O'Brien because she brought up the issue of treating children in care as a commodity through privatisation. Will she elaborate as to why she feels that needs immediate attention? What does she think is the rationale for using this model of care, for want of a better word? How common is it? Does it cost the State more in brass tacks in the long term than it would if there were direct placement through Tusla or the State's organisations?

I do not want to keep talking about monetary issues, but it was mentioned that foster carers do not need pats on the back. We do not need rounds of applause in the Dáil for foster carers like we have seen. What we need is the appropriate financial supports in place for foster carers. A number of the witnesses mentioned there has been no increase in the foster carer allowance since 2009. I am not asking them to say how much the foster care allowance pays, but will they elaborate on what they think the percentage increase should be for that? What would be adequate for foster carers to be able to provide a service to the children they look after?

The last issue I wish to raise is another one Dr. O'Brien mentioned. I do not want to direct all my questions at her. The issue of kinship crosses my door, usually through tragic circumstances, whereby somebody might have lost a sister or a brother and, all of a sudden, there are kids without a parent and the families are trying to rally around and do the best they can for those children. I know from the families' experiences after they get in contact with me that they find that the supports they get from Tusla are not adequate, not appropriate and not sufficient. Will any of the witnesses tell me what supports should be in place and how immediately they should be put in place?

Dr. Valerie O'Brien: On the commodification of care for children, even as I was using the phrase I was thinking it is part of a wider issue. Look at what has been happening with care for old people and groups of people in the State. Currently, services are provided by the State and by statutory services. Some services are provided by not-for-profits but some are provided for profit. It is important to say it is not that I am opposed to the private sector but what is the cost to the State? It is a much higher cost to buy a placement from private agencies. In return they can provide more wraparound services but then what we have seen happening in other countries is those private agencies selling themselves on as businesses. Where is the profit going then? The excess profits from these agencies are going into the private domain as opposed to coming back into the service. Therefore, it is an important policy issue and the private agencies are then being placed at distances from home.

The IFCA may also have something to say about the commodification of care and maybe there are other questions.

Ms Marissa Ryan: EPIC works most generally in our advocacy service with the children and young people who are in residential care. My two youth council members who are here came through the foster system and are here by virtue of that fact, but we work with many children and young people who, as Ms O'Toole alluded to, are in Oberstown, in private residential care or in high-support or special care. A concern we have about the use of the private residential care provision model is around regulation and inspections. As things stand, if there is a public home run by Tusla, it is inspected by HIQA. Thus we have the oversight there and it is the appropriate way independently to inspect places where children live. However, the private residential care sector is not independently inspected by HIQA. Tusla must commission the service and must then inspect it itself, so there is a lack of independent oversight of those homes. We know from the evidence of other jurisdictions, particularly within the UK, that where there is not independent oversight and regular inspections and so on, it is very easy for child protection breaches to happen. That is an issue of significant concern to us in EPIC. Alongside the increased privatisation of children's homes we also have issues with the lack of oversight and inspection of them.

The second issue I wish to highlight briefly is the fact that while there is a crisis in the number of foster carers, there is also an absence of appropriate numbers of residential care placements. We are seeing that many of the children and young people we work with are increasingly without places to go and they are being moved around very regularly because there are not enough foster placements, but there also are not enough residential care placements. That is when you see reported in the media, as I am sure members have, the number of children, even quite young ones, being accommodated in hotel, bed and breakfast and emergency accommodation. Likewise, at the older end of the scale we are working with teenagers who are increasingly in precarious circumstances and lapsing into homelessness. Those are two more issues to add to the committee's plate.

Ms Catherine Bond: On the privatisation of services, there are five private fostering agencies in the country at the moment. Some of those are social enterprises so they are not all necessarily for profit. They provide wraparound services for the children. Looking at the costs like for like, there is not a huge difference and so that narrative needs to be changed. It is the case that, according to Tusla's numbers, there are just over 450 children in private foster care services, which are highly regulated and highly inspected by HIQA, contrary to the residential care services. They are providing in the gap for children in care. The rationale for their entrance into Ireland was the lack of foster care placements, and there continues to be a lack of foster care placements, so we need to take a balanced approach in this debate and this argument and get all the facts that are there. We are seeing higher numbers of young people going into residential care. This attests to the fact the numbers of children have gone down from 92% to 90% placed in foster care. We are hearing of very young children being placed in residential care, which is of grave concern. We need to tread carefully because we do not want to have children not going into foster care, whether it is through State services or private services. We want children to be in foster care as opposed to going into residential care, where we know the outcomes for many of them are not as constructive or positive.

I defer to my colleague Dr. Gogarty on the placement of children in foster care and the benefits.

Dr. Helen Gogarty: Family life is very important for children. The outcomes for children

in foster care are more positive. They are often more challenging in the teenage years, but with foster homes, whether private or Tusla-managed, I see much more positive outcomes. That said, some children do very well in residential care, especially children who have a particular attachment profile. If, say, they are quite avoidant and find it difficult to make close relationships, children like that can do quite well in residential care. However, generally, family life meets the expectation of children. It is what we are all archetypally led to expect in life and children in foster care do very well.

Having said that, and having worked in this field for many years, I notice children's presentations becoming much more complex. During the 1990s, children were presenting with high levels of anxiety. Now children are presenting with a complex array of developmental problems and often issues like foetal exposure to alcohol or drugs, which results in developmentally challenging brain development, if you like, because their brain development was affected, perhaps in the womb. That plays out in the foster home in the form of behavioural difficulties, sleep disturbance and eating difficulties. Children are often assessed as having ADHD, for example, when there is a much deeper developmental problem that remains undiagnosed. I support my colleagues in saying there is a need for a comprehensive assessment service for children coming into care so these problems can be looked at at a very early stage and the services can be directed in the right way.

Ms Aoife Bairéad: I work with foster carers who are with Tusla and ones with private agencies. For those who have moved to private agencies, their primary reason is a perception of the support that is offered. That is things like access to 24-7 on call, access to psychological services, access to additional training and identifying their support needs. I am therefore cautious about a move away from that. All foster carers should have that expectation. It is more what Tusla in that regard needs to come up to. Again, that is a complex issue and requires lots of resources outside Tusla alone, but it is important to note.

On residential and what is needed, I am struggling with the term "crisis" because it has been coming for a long time. It was identified multiple times by multiple professionals that children's needs were becoming more complex and what they needed was going to be more wraparound services and residential services that had an understanding of that and resources available to do that. As a crisis response, Tusla has had to move to private agencies but Tusla needs to have those services available again in-house and in all of its residentials. Those children are not going away and new children are coming. We know with poverty and things like the cost-of-living crisis there will be an increase in children coming into care. We know from our experience in direct provision that, when children come from places of war, more children come into care and need more services. That crisis, if one wants to call it that, is not going away. It needs to be addressed, but it is a long-term piece that needs to be addressed through many years rather than being something that can be fixed overnight. Moving away from those private services means Tusla will have to take up the banner in terms of what is being offered, which is complex therapeutic supports - when they are available - for those children.

Dr. Valerie O'Brien: I will come in on the question regarding kinship care. It is an area I have researched for a long time. There are three ways in which children end up with their relatives. One is where there is a private arrangement, which is usually propelled by a crisis. In the case of those children who do not need protection because the family can protect them, the family can be helped to apply for what was previously referred to as the orphan allowance. The parents may still be alive but it was available where there was evidence that they were unlikely to re-emerge to take a substantial role. Private arrangements are the first route. In some of those

private arrangements, child protection issues emerge when the birth parent wants to take the child back. Those families need the protection of the State to stabilise the placements.

The second way is where children come into care but, in an emergency, it is not possible to place them with extended family. It may be out of hours or the family may not be known. Within a short period, however, the plan is to move the child into family care, usually through Tusla.

As regards the third route, approximately one third of children in kinship care have already been in the care of the State, such as in a foster placement and, when those placements break down, Tusla begins to mobilise relatives. That cohort may be older and have different support needs. There are two reasons relatives get involved. We are all members of a family. We know what would happen in the morning if there was a crisis in our family. It goes between affection - knowing and loving the child. As my mother always said, blood is thicker than water and we should get out there and look after one another. That is the obligation level. The other reason is the person knows, loves and has reared the child and is going to keep him or her. It is complicated. The support services families require may be different. Relatives tend to be older and poorer than foster carers. In Ireland, we have a significant number of grandparents and maternal aunts with a child in their care because of the profile of families.

Mr. Rory Brown: I want to come in on what Ms Bairéad was saying about the crisis in residential care and the issues that arise in that regard. Many of those issues come about due to the lack of support in residential care, especially public residential care under Tusla. That has caused many professionals working in Tusla to be under more extreme pressure, leading to many of them leaving the services. That means those in care, as Ms O'Toole and I were, have a constant rotation of people and many of them do not have a secure relationship with anyone. Given the lack of services for the caregivers in these homes, they cannot provide the services. They are working more on coping with the kids instead of actually helping them. That becomes a problem after a number of months or years. It takes a toll on those working in those services and they leave because of the pressures. That, in turn, means children in these residential care places experience problems having the secure relationships that are important. That is a deep issue in care homes and foster homes as well. Without the right supports, care givers are leaving and many children in care have to move to a different home. Many of the people on our council have moved care home at least twice, with many moving to a different home 14 or 15 times. There is no way a child can form a secure attachment in those circumstances. They do not have the supports to allow them to stay in the foster home or residential home and form those important relationships.

Chairman: Before I call our next speaker, I take the opportunity on behalf of the committee to congratulate Senator Ruane on her recent award. It was very well earned.

Members applauded.

Senator Lynn Ruane: I thank the Chairman. That is much appreciated. The lads who featured on the podcast that won the award would not be strangers to many of the issues we are discussing today. They are men who have engaged with the justice system and spent time in and out of prison but who have also experienced many of the things we are discussing today. This session sits somewhat uncomfortably with me because I believe a big part of this conversation is missing. There is rarely any real representation, here or anywhere else, of birth families. It came up briefly in one of the witnesses' contributions in the context of birth families not having their own social worker.

I am not speaking about situations where there are child protection issues and it is necessary to remove a child due to sexual abuse, physical violence or that type of stuff. Unfortunately, we are exposed to violence in many communities in different ways. It is a collective thing, however. Some families will come on the radar more than others in terms of the support they may need. That may be because it is a woman who needs support with addiction or a father coming out of prison and seeking access to his child who is now in care as a result of issues relating to the child's mother. There are many different issues. The foster allowance is a particular amount of money and there has been discussion on increasing it. Foster parents expect to receive a certain level of support and service. Many of the families whom I support expected to receive such supports, as birth families, for their children who had additional needs or when they needed support in terms of being able to access treatment for addiction or to deal with poverty or the housing crisis. There are women ending up in hotels. There are so many different societal failures that have led to so many children ending up in care as a result of poverty rather than it being due to outright neglect in terms of being able to have access. We need to be able to have a conversation not only as representatives discussing solutions in terms of the aftermath of social care but also about how we can support people with services while they are in the care of their family members.

I refer to the parental capacity assessments that are carried out and the scrutiny on some very willing, active and loving parents who are able to provide care but are held to a standard to which foster parents are not even remotely held. That is an unusual bar to set for birth parents who want to care for their children, who have done the parenting course and X, Y and Z, who have never hit or abused their child but who, possibly due to having gone into prison or due to an absence or an addiction, are being held to a standard that not even I could meet. How do we begin to address some of those issues? In some of these cases family reunification is the best possible thing. Sometimes we are missing that part of the conversation.

In some cases, traumatised children have traumatised parents. The parents were kids at one stage and they were traumatised by the same system that is now traumatising their children, yet they are expected to know how to be something different when they become parents, even though they did not have access themselves in the first place. How do we fix that? They do not have representation for themselves because they consider themselves guilty or bad or believe they cannot advocate. We need to find an advocacy body to work directly with them. I know we prefer to extend comments in a particular direction but I would love to hear the thoughts of the witnesses on that issue.

I always agree with Ms Bairéad but when she said 12 months of no access to a birth parent----

Ms Aoife Bairéad: I did not say 12 months.

Senator Lynn Ruane: All right. I thank Ms Bairéad for clarifying that. My stomach flipped when I heard it. The point made was that, in the context of returning to the parent, 12 months should be invested in the foster placement to ensure secure attachment. What I inferred from that was that making sure the birth parent who wants to be active can be active would not be prioritised.

Ms Aoife Bairéad: No. May I clarify that?

Senator Lynn Ruane: I will get one more point in first. The other thing I wanted to ask about is the trauma-related piece. Sometimes the trauma is not obvious when kids go into foster

care at six, seven or eight years of age. They reach the age of 12 or 13 and start to think and see the unfairness and injustice, and then the trauma emerges. There are foster parents with whom I have been working for years. Sometimes a child in their care will visit his or her parent and the foster parent will say the child is upset every time he or she comes home and then, bang, the access is closed down. Of course the child is upset. This is part of it. That is their birth parent. Trauma is complex. Rather than offering training to foster parents when kids are already in their care, how can we ensure foster parents' intentions and principles are in line with providing good care to kids who carry complex trauma? We should not wait until the kids are in the foster parents' care for them to discover they may need the training when the care has already broken down. We have so many foster kids who will not develop in the way the birth kids of the foster parents will because they are afraid to breathe wrong in case they lose their placement. Therefore, they cannot be cheeky or push the boundaries and come in at 12 midnight instead of at 10 o'clock at night when they were asked to. They cannot do those things in many cases out of fear. That must also impact on their developmental stages through teenage years. Obviously, there are amazing things about foster parents. We need foster care. I am glad that about 90% are in foster care. That is what I want to support. However, too many standards are being let down in many cases with which I deal. How do we begin to address that?

Ms Aoife Bairéad: The focus should be on the child in foster placement feeling safe again. The trauma of being separated from one's birth parent is not always understood by the Judiciary, and so children go to visits where they feel hurt and their parents feel hurt. Children in that relationship often end up refusing to go, which is not good for anybody. I would see that with the National Advocacy Service. It should not just be an advocacy service but one that addresses the issues outlined by the Senator, such as peoples' therapeutic need as a parent, not just in respect of their addiction or mental health and taking these pieces of them. They are like, "If you fix that, you will be fine." but they should say, "As a parent, this has been traumatic. As a parent, you have probably experienced trauma yourself. As a child, you have probably experienced trauma to get here." That has to be considered.

There may be cases in which children will not be able to return, but that process is still beneficial. The parents' ability to offer the child the healthiest relationship they can, will make the child's care experience better. The idea that children would have visits with their parents once a month, indefinitely, in a visitor or access centre with somebody watching them makes me so sad, because relationships should change and grow. Everyone should have that opportunity, particularly in these families where the worst thing has already happened. Having supports and therapeutic plans for families that assume this relationship will change and grow for the better, no matter what the outcome for that parent or child may be, is vital and it is such a gap in our system now.

One of the biggest predictors of people recovering from trauma is coming out of poverty. That is it. One can take every other factor into account, but the greatest predictor of them recovering from intergenerational trauma is coming out of poverty. What we are talking about at this committee is a very narrow part of what is a huge and complete system, but they are the worst parts of our society made real for children in very vulnerable families.

Ms Catherine Bond: Senator Ruane raised a number of issues. First and foremost, the Constitution works to promote the retention of children with their natural families. This is enshrined in our Constitution. When decisions are made for children not to be with their families, it is because many people are concerned about what is happening. The next layer of support that is put in is support for families. I know that between the Department of Children, Equality,

Disability, Integration and Youth and Tusla, a high level of supports are put into family resource centres and the likes of voluntary organisations. As well as Tusla introducing the signs of safety approach to work with and support families to keep children with them. When it gets to the point where a decision is made for a child to come into care, it is a very onerous decision and not one that is taken lightly. That is very important to note.

We expect a lot from children. When children are removed from their families of origin, of course, them leaving is a wrench. Despite the best intentions of the parents, blood is always thicker than water. Children having to leave their family of origin is very traumatic, regardless of what went on during their tender years. Foster carers take these children into their homes to look after and care for them.

Foster carers have an extensive assessment period that can span from 12 months to 18 months, and that includes every member in the foster care family, including their own children. The threshold for fostering is quite high. Foster carers are then required to go before a foster care committee where everything regarding their family, including their lifestyle, is put on the line. They are Garda vetted. Medical checks are done. Their own children's school reports are considered and teachers contacted. It is a comprehensive assessment. To become a foster carer, the threshold is quite high because a foster carer is caring for somebody else's child.

As to children going on access with their birth families, it is very stressful and traumatic for children, and it is traumatic for foster carers who have to support that child when he or she comes back from access. The thing about access is it is court directed. Therefore, only the court can say who goes to access, how frequently it takes place, and where it takes place. That is not within the gift of the birth family or foster carers. That is the reality. We also need to talk about the care team around the child, which includes everybody. This includes the child's natural family, the social workers and the foster carers, because that is how foster care works well - when everybody is working in unison.

A new service is being set up to support birth parents, which was commissioned by Tusla a few months ago. Plans are in place in recognition of the need to support birth families. They are and should continue to be an important part of children's lives. When the system works collaboratively and supports one another, with everybody working in the best interests of the child, that is what people are working towards.

Dr. Helen Gogarty: A few things come to mind in response to Senator Ruane. As Ms Bond said, children are not taken into care lightly. They usually have experienced physical abuse, trauma, neglect or sexual abuse and they carry the memory of that. That then shapes their expectations of how their foster parents will behave towards them. For example, if they have been exposed to a lot of alcohol, they very often expect the same thing to happen. It takes a while for them to realise it is not the same. It takes a long time for them to realise they are safe. The physical reality of safety in foster care is not matched by the child's perception of it, because that is how trauma works. Children continue to feel afraid and feel as though they are unsafe when, objectively, they are safe. In my experience, such children behave in several different ways. Some children are compliant. Some are very angry and aggressive, however, and some combine both patterns.

Access is very important for children, but it is sometimes beyond the capacity of the child's nervous system to manage if he or she has been subjected to a lot of trauma prior to coming into care. When children go to access, they experience sensory reminders of the trauma, and sometimes they become so overwhelmed they cannot manage, which results in sleep disturbance,

problems with eating, and every indication their nervous system is overwhelmed. In that situation it can be appropriate to stop access for a time to help children achieve a level of emotional regulation so they can resume contact with their parents.

Senator Lynn Ruane: It is unfortunate the witnesses did not acknowledge any of the issues, even in the slightest way, with some foster placements and the overreach of some foster carers. Much of what they said is right but their response, in many ways, proves my point. All the blame was put on the parental aspect and the child's trauma, and not on the fact that many foster carers do not understand complex trauma, and further compound trauma on top of the trauma that is already brought into their home. It is important for that to be acknowledged if we are to ensure foster placements do not break down.

Ms Catherine Bond: In recognising the importance of the care team around the child, I would have said birth families are very important. They are an important part of the jigsaw the child has to live within. It is extremely important for everyone to have an understanding of everybody else's situation. Over 1,200 foster carers and social workers attended training last year with IFCA and considered issues such as trauma, how trauma affects children, the emotional regulation of children and how foster carers can support children with emotional dysregulation. There is a lot of learning taking place and many people upskilling and learning more about the subject.

Senator Lynn Ruane: There is also a lot of bias in the placements. With regard to the incident in Cherry Orchard yesterday, I watched three foster carers. The children involved in the incident, whom we may call hooligans or low-life, are the children who will probably encounter services like those in question. There is a huge amount of unconscious bias against working-class kids and others who end up in foster care, and that comes out in the placements. I say that from 20 years' experience of working in the addiction sector and from having attended many care-plan meetings with foster children and their families. I am not speaking abstractly but from lived experience. It is important we truly acknowledge what I am saying, in addition to all the great foster care. I am not dismissing the latter, but-----

Ms Catherine Bond: I can attest only to my experience of foster carers. Mr. Nolan, a foster carer who is present today, might speak about this. I can attest only to my experience of those with foster children in their care, which I note regularly in IFCA. IFCA's annual conference, which will be at the beginning of November, is an opportunity for everybody, including the foster-care families, children and birth families, to get together. Personally, I have never heard any foster carer speak in a derogatory manner to any foster child. That is my experience.

Chairman: We are way over time but I am aware Ms O'Toole wants to contribute. I will let her do so and then move on to our next speaker.

Ms Lauren O'Toole: So many points were raised that I will not hit all of them. I always say you cannot build a house if you do not have foundations laid out. We cannot try to do all the wonderful and lovely things we want to do with the foster care system and care system in general unless we have the basics right. Addressing trauma is one of the major basic issues that needs to be got right. I do not agree there is a specific way the trauma works. Every single case is unique. Even in a foster family, trauma is unique to each person in it, not just to the family itself. I do not believe there is any way you could fully evaluate and see somebody's trauma. I was in care from the age of two and am now 21, and it was only in recent years I realised it was traumatising. A huge amount of work needs to be done on what constitutes trauma, the different types of trauma and how we can see it.

As somebody who was in care for the length of time I was in care, I can only say it feels like there is a tick-the-box exercise. In this regard, it is said that because access did not go well, we will not go ahead next week. There is no point in punishing a child if access does not go well; it is not the child's fault. As we have established, the child is severely traumatised, as are the parents. There is so much work to be done on this kind of stuff. We need to focus on getting the basics right. The trauma part is huge. It is probably one of the most important pieces.

On the point on the care team around the child, in my experience there has never been a single care team. I have had over ten social workers and should have had one. Again, this feeds into the trauma aspect. All of these points are so valid but, again, they scream my point that the basics need to be got right before we can move forward on any of them.

Chairman: I thank Ms O'Toole. Deputy Cairns is next. I note Ms McGuirk and Ms Bairéad want to contribute, so I will let them do so in the next round.

Deputy Holly Cairns: There are so many things I want to say that I do not quite know where to start. First, I thank everyone for coming to this meeting. Their input is crucial for committee members to understand the differences between specific issues in this area. Second, when we have these discussions it is really important to acknowledge the deeper cultural and societal problem that forces people into poverty and, because of the structure, keeps them there, as Senator Ruane acknowledged. The number of children who go into care from the dysfunctional system has to be highlighted. I thank the representatives for doing so.

With regard to speaking about foster carers and the different aspects of their role, which is very complex, it is important to highlight that we see everywhere unconscious bias towards people in poverty. The single biggest factor determining whether one is likely to end up in poverty is whether one is in a one-parent family. We need to acknowledge that. Foster parents do not always get everything right. No parent gets everything right; it is just a reality, and it is good to be able to talk about that as well.

On the need for more trauma-informed policy and more training, it is true of every Department. So often, I work with women fleeing domestic violence. When they go to the department responsible for local housing, there is not a trauma-informed response there. This needs to be played out throughout society. The need for the response in question is so prevalent it can very much be felt in the room today.

We cannot overstate the importance of foster carers. It is crucial to note children in foster care have better outcomes than children who go into residential care. In this regard, however, we should bear in mind what was said about particular attachment styles suiting certain children. I was not aware of that. For the most part, better outcomes are experienced by children in foster care by comparison with those in residential care. We need to focus on that. That 90% of children in care in Ireland are in foster care and 10% are in residential care is something we should be really proud of, but the fact the percentage in foster care is down from 92% is one we very much need to examine.

The allowance for caring for foster children under 18 years of age is $\in 352$ per week. I believe I am right in saying that. For over-18s, the allowance is $\in 300$ per week. However, that the rising cost of living has not been addressed in so long is simply outrageous for the most part because we know there is a reduction in the number going into foster care. We want to get the percentage back up to 92% or higher for better outcomes. That is key.

I have outlined the most important aspect, but it makes absolutely zero sense from a budgetary perspective that we are seeing a decline in the number of children entering foster care. I would like somebody to correct me if I am wrong in saying it costs $\notin 6,000$ per week to keep somebody in residential care. It costs $\notin 352$ per week to keep somebody in foster care but $\notin 6,000$ per week to keep somebody in residential care. We are seeing a decline in the number of children entering foster care, and the allowance for foster families has not been looked at in so many years. Am I correct in stating there are roughly 60,000 children in foster care?

Ms Catherine Bond: Just under 6,000.

Deputy Holly Cairns: Six thousand. What would be the figure if all those children were in residential care? How much are foster families saving the public purse? This issue is separate from that of better outcomes and all the more important matters we need to be considering; however, with the budget fast approaching, it is a really good time to highlight in the first instance how much the allowance needs to be considered so as to have better outcomes and, second, how much would be saved. It is an absolute no-brainer. I do not know why no figures have been mentioned today. From my understanding, one of the increases people are asking for in the budget is an increase of \notin 100 per week in respect of the allowances for both under-18s and over-18s. Should it be more than that? I am interested in the delegates' input in that regard. I presume an increase would play some part in encouraging other families to foster. Is this something in addition that we need to consider?

With regard to the recruitment and retention of social workers, what kind of remuneration is needed, and what specific things should the committee know that need to be done? When talking about all of these issues, I know I refer many times to "better outcomes". Speaking from experience, for families with foster children in them, there are better outcomes for the entire family. I certainly felt that when I was growing up. There was a better outcome for my entire family because of my foster sister being there. It is important to highlight that the benefits of fostering are multifold.

Ms Aine McGuirk: I would like to answer the question about the recruitment and retention of foster carers. First, however, I thank the public representatives who are here today. I sat at a similar committee meeting where the discussion was about the recruitment and retention of social workers and there was a much smaller number in attendance. I am delighted there are so many people here today because it shows a fantastic interest in the children of our nation, including the most vulnerable children, and, as Senator Ruane noted, an interest in the most vulnerable parents in the nation.

The recruitment and retention of social workers is key. There is a shortage of staff in every sector across all of what used to be called the allied healthcare professions. The IASW worked with the HSE and Tusla to make the case for the inclusion of social workers on the critical skills list, which we achieved. There are just not enough people. It is like we have a big pot of jobs and too few people running around inside it. This shortage means children who are in care do not have a social worker who is the link between them and their family on both sides, that is, their foster family and their birth family. They do not have that person who should be with them through the process, who knew them before they came into care, works with them while they are in care, knows the details of their life and is in possession of the big file in Tusla that has everything about them in it. Those people do not exist. They are what foster carers used to call "lifers" - people who went into social work and, 20 years later, were still knocking on Mrs. Foster Carer's door. They knew the people they worked with for all that time. That level of knowledge is not there because people are moving around the system and those types of work-

ers do not exist any more. People just do not stay in the jobs long enough to build that type of relationship with the children, foster carers and birth families.

Getting enough social workers into the system is key because it makes it less easy for people to move job when the going gets tough. If the staffing is sufficient, people will actually stay for longer than a year or two and get to know the children and their lives. I do not know what the answer to that shortage is, but I know it is an absolute crisis for the children, their birth families and foster families that there just are not enough people. Social work is the profession that took foster care from what it was and developed it into what we know it as now. Social workers assessed, reviewed and supported the foster carers and managed everything else to do with the process. We are the profession that knows foster care better than any other. It is crucial we get enough people into the system. I do not know the answer as to how we achieve that but I know it is crucial we do.

Dr. Valerie O'Brien: I want to make two points that address some of the questions from both Senator Ruane and Deputy Cairns. Ms Bond talked about the care team around the child. That team needs to be careful the child is not overly pathologised. I absolutely concur with the need for trauma-informed practice but such practice must look not only at the individual but also at the network of relationships from which the child comes. It also must look at the network of relationships within the professional setting. All too often, as we know, the professional network begins to mirror the difficulties out of which the child has come. I train and work with professionals and I recognise we are not always to the fore in looking at what we are bringing into those networks, what pushes our buttons and our responsibility around our own reflexivity. Members of the care team need the space in which to look at their own needs. We know what happens if we do not care for the carers.

Regarding recruitment and retention of foster carers, Carol Coulter has done fantastic work in her court reporting. Her reportage has been telling us for more than 15 years that there is an overrepresentation of children from diverse backgrounds in the care system. Internationally, we know there is an overrepresentation of minority populations within care systems and there is also an underrepresentation of those populations as foster carers. We in Ireland are making all the same mistakes and we should not be doing so. There are many potential foster carers in diverse communities, if they are spoken to, encouraged and supported. The best way to recruit foster carers, as Ms Bond may talk more about, is through word of mouth. We also need exit interviews for every foster carer who leaves Tusla to move to private provision and every foster carer who leaves fostering. Many of them leave because there is a life cycle to fostering. People do it for a certain number of years, a bit like rearing children. We need to gather those data and not necessarily from the organisation with which the foster carer is really annoyed. We could be in a very good position if many of the services could begin to collate those data.

Mr. Rory Brown: There was reference to the issue of support for foster carers and to aftercare supports. The hardest issue for me in my foster care was that, at 18 years of age, my foster carers could not support me any more. When people turn 18, the aftercare support goes to the person who has experienced care. Unfortunately, my foster family was not in a financial position to keep my room open in their house and financially support me to go to college. Once I got the aftercare support, I went off to college. To keep my room open for me at weekends, I would have had to pay rent to my foster family, but I could not afford to pay rent in Limerick and to them. If we are looking at improving support for care leavers, we should look at that situation whereby many of them lose their homes when they reach 18 years of age. Many foster carers want to keep these young people in their homes but are unable to do so because of their

financial position. They are faced with a decision as to whether they take in another foster child and keep the financial support they are getting or keep the care leaver's room open and lose that money because he or she is going off to college or different things. That caused a lot of issues for me as I was coming up to the age of 18. It would be brilliant if we could support both care leavers and their foster families because it would keep a lot of care-experienced young people in higher level education and allow them to come out of the risk of poverty and break the barriers many of them face. Once they reach 18, they either face homelessness or poverty-stricken issues associated with their foster family.

Connected to that is the importance of social workers. In my experience, there was a constant rotation of social workers. I easily dealt with 15 or 20 of them in my ten or 11 years in care. It may have been more; those are just the ones I can remember. There were many who breezed in for two or three months before leaving with a "See you later". I might have only chatted to them once. This means you have to tell your story again and again. Their caseloads mean they do not know you or anything about you, so you have to keep telling your story and that causes trust issues. If you have to keep telling your story over and over and repeating the trauma you have already faced, you start getting annoyed at the system and then you start lashing out or causing issues because you do not and cannot trust anyone. You are thinking, "Sure, they are going to leave in six months and what is the point of telling them my story if they are going to leave me." That is where the issues are. We need to be able to retain social workers and have one person, or even two, dealing with a child. I know people retire and move on, but if children in care had one or two constant people they could trust, they would have security and feel okay to open up and talk about their problems and needs. Many of them do not have that and instead just lash out and get labelled. That is where the stigma comes about against children in care.

Ms Marissa Ryan: I wanted to share with Senator Ruane the new Barnardos pilot project, which is supposed to look at supports for the birth parents of children in care. An aspect of that which we find important is supporting parents of children in care who have care experience themselves. When that pilot was being developed, we felt this was an issue that was not really being looked at in detail. EPIC did interviews with care leaver parents. We work with people up to the age of 26. Many of those young people are now parents themselves. Some of their children are in care. We feel that, over the course of the next five years of this pilot, that cohort really needs to be championed and to talk about their needs. They are a minority which is particularly vulnerable.

We are here today to discuss fostering issues. There is a crisis in fostering and in residential care. The wider issue is there is an inequality crisis, which is why we see children going into care. There will always be devastating cases of abuse and neglect. There will always be a need for a wonderful, thriving foster care system. Equally, there should be significant interventions in early years to try to make sure children and their families are better supported and protected. We have all seen in the past couple of weeks that there have been absolutely horrendous cases in the news of young people who were allegedly taken into care more than ten times whose lives have now ended. The Senator is right that this committee is here to talk about fostering today, but a much wider discussion about the care system is needed.

Going back to Ms O'Toole's original point, maybe it is time for Ireland to review the care system to include the significant progress that has been made on matters such as aftercare and fostering, which is still a robust system overall, but also to address the cracks that National Youth Council of Ireland members and other people are identifying and which Tusla itself

has highlighted. We need to try to galvanise the wider political support and engagement that is necessary. Only 6,000 children are in care, but they are underrepresented. Public policy is rarely focused on their voices. Their voices are seldom heard in general in society. When we talk about building a care aware society, this is what we are talking about. I thank everybody for listening today.

Ms Aoife Bairéad: Our points about the retention of social workers interlink slightly. The role of the link worker is to support foster carers. Foster carers, like any parent who is under pressure, do not always parent the way they should or wish. The point made about that was right. They have a high turnover of link workers. It is a supervision relationship, so social workers get supervision and foster carers get supervision. That is a necessary part of fostering because it is complex. People can only do that with somebody they know and trust. Children in care have to tell their stories again and again, as do foster carers. Foster carers highlight issues repeatedly. They become frustrated and disenchanted with the system. They sometimes overstep in their decisions. We come back to the retention issue. We need more placements for social workers. Early intervention services are needed so that social workers are not under such pressure when children come in. Schools need to be more aware and to have supports in the community so that they are not always reliant on child protection services to intervene. They need to get those services earlier. The National Educational Psychological Service, NEPS, developed that recently. More is needed so that can happen.

Social workers in Tusla have said repeatedly that one reason they get burned out and overwhelmed is how contentious the courts system is. We have an adversarial courts system if children come into care. It does not work for parents, children or social workers. It often leads to worse outcomes for families because it is a "he says, she says" evidence-based process that is not collaborative and does not look at the needs of everybody in that system. I know there are plans to change that, but it shows how vital that is, not just for when they are in the courts but with regard to the systems that are impacted.

Ms Catherine Bond: I would like to clarify the concept of the care team for the child. It is not the social work team, but everybody involved in the child's life, whether it is the school, the local services for the child, the GAA club, or the child's family. As Dr. O'Brien said earlier, a village raises a child. Everybody works in the best interests of the child.

I go back to Deputy Cairns' point about IFCA's budget submission. It looked at the value attributed to foster care and the savings foster care provides on behalf of the State. In IFCA's budget submission, we seek a $\in 100$ increase in the foster care allowance. We are also looking at other peripheral issues such as the back-to-school allowance that should be extended to children in care and issues such as mileage for foster carers, because we have foster carers who drive children many miles throughout the country for visits, including therapeutic visits and visits with their siblings. We need to try to support this system of foster care. That is what I was saying earlier. We are at a juncture where great pressure is coming onto the system at every level, as everybody has attested today, with the children in care, social workers, the high level of burnout, and the fact we cannot retain social workers who are recruited.

We are at a great crossroads here. It is fantastic the committee is discussing the issue; hence the recommendation by IFCA. We called it an advisory group. The Irish Association of Social Workers called it a working group. It is time to stop and pause and to see what has really gone well in this system. We do have 90% of children placed in foster care, growing up in family life. We must remember this is about family life, children going to school every day, meeting their friends, going to the GAA and being in and growing up in communities rather than in alternative arrangements. We need to celebrate and harness that, but we also need to pause and look at what else needs to happen. How do we retain the good things we have? How do we address the many challenges that are presented? All of us working together need to address these. That includes increasing family supports for parents so that children do not come into care and providing those supports to children, because, ultimately, nobody wants children to come into care at the end of the day. Families are the most important place for children.

Our chairperson, Mr. Raymond Nolan, is a foster carer who is at the coalface every day and night. He tells me about how his young lad in care does not sleep and he is up at 2 o'clock every morning sending me emails. I ask him to speak.

Mr. Raymond Nolan: I thank the Chair, Senators and Deputies. After listening to everybody's contributions today, one more comes to my mind, which is investment in the child in care and investment in the needs and supports for foster parents. Other investments come to mind too. The child is front and centre. At the child's shoulder is a foster family in 90% of cases. These two young people, Ms Lauren O'Toole and Mr. Rory Brown, are a testament to good foster care. Unfortunately, the outcomes are not always that good. They are not as good as a guy becoming a teacher. To come through the care system and become a teacher is fantastic. This investment needs to happen. I think of what Senator O'Sullivan said earlier about reports in 18 months. We do not have 18 months to save and improve the system. We need to act immediately. It is important to support the children and meet their needs.

I have two basic rules and principles in foster care. The first one is to care for and nurture children, meet their needs, and uphold their rights. The second rule is not to forget the first rule. It is important to meet children's needs. Their needs are not being met in foster care. We are waiting too long for services. I know of an incident in our home where a child waited for two and a half years for an assessment. Something that was actioned by Tusla in March 2020 only concluded this summer. We got the report in August. Two and a half years is a long time in the life of a child aged 11 or 12. It is too long. These children will be adults at 18. From studies, we know they are way behind a child turning 18 in the broader community and population. In instances, they are a long way behind, maybe seven to ten years in the case of foetal alcohol syndrome. It is also unfair to call a child who has been in the care system an adult at 18. It is very unfair. We are not looking at this in a proper manner at all. We are just not doing our job. We are ticking boxes. It is grand to roll out specific services, and they are gratefully accepted, but it is no good if they are not available to the children who need them. I always consider for comparison the question of how long I would wait to go to see a dentist if I had a toothache. Would I wait two and a half years? I certainly would not. This is the measure we must look at. These children are in care for a reason. Sometimes the reason is neglect. Therefore, it is very unfair when they come into State care that it neglects them as well by having them wait for two and a half years to receive a service. Provision should be instant, and it needs to be so if we are to succeed.

Regarding supporting foster parents and the allowance in that regard, we have had one increase in 21 years, and that was in 2009. That increase was $\in 6$. What does this say? We have been here before talking about pensions. We need this facet looked at immediately as well. We cannot fight a war without soldiers. I am referring to foster parents and social workers in this case. It just will not happen. Great work is done in the Department and in Tusla. We must, though, up the ante, because I am sure there are many children who should be in care but there are no homes for them to go to. My wife and I have 16 years' experience and I have not seen enough progress in that time. It has just been static. It is actually nearly going backwards.

We must really take a look at this system. All the stakeholders must sit around the same table, including EPIC, Tusla, IFCA, the Ombudsman for Children and whoever else has a vested interest, and come to an immediate conclusion. Work should start on this immediately. These children have rights, and we must vindicate those rights and meet their needs. I thank the committee.

Senator Tom Clonan: I thank all the witnesses for being here, especially Ms O'Toole and Mr. Brown. I congratulate Mr. Brown. I was a primary school teacher in a previous life, when I was 20 back in 1987. I started teaching that year. Back then, the World Bank was going to foreclose on Ireland's national debt. We had a Taoiseach, Charlie Haughey, who told us we were living beyond our means. Basically, as a country, we did not have a pot to urinate in. We did not, however, have children asleep in the classroom because they were living in family hubs, homeless or living in hotels. Even though we were in such a parlous state, we were building houses. We did not have the level of homelessness, poverty and inequality we have now.

I was struck listening to all the witnesses, because my journey into this building and this committee room has come through our experience as a family of having a child and now an adult with additional needs in this country. In the past 15 years, things have deteriorated terribly. Mr. Nolan said there has been no progress in social care in past 16 years and that, in fact, things might be going backwards. Well, in the disability sector, the system has absolutely collapsed. It has failed. We had Paul Reid in here only a few weeks ago. I asked if we could have the intellectual honesty we had with the financial crash, when it was accepted we needed to be bailed out.

Therefore, I feel like I am sending the witnesses a postcard from the future regarding all the issues they highlighted. In our case, there are no physiotherapists and no physiotherapy. There are no speech and language therapists to meet children's needs. They are being failed. There is no early intervention. Childhoods are lost. Every measure in our sector is failing. There are suboptimal outcomes, including isolation, poverty, homelessness and suboptimal medical outcomes. We are actually inflicting harm on tens of thousands of children. This is the direction in which the witnesses' social care sector is heading. It is not possible to recruit or retain social workers for the same reason we cannot keep our nurses, speech and language therapists and occupational therapists.

Therefore, we have had a State, or rather a polity, that for the past 20 years has not valued care or caring. It does not value these endeavours. It places very little value on these types of activities. I did the mathematics on my phone here. If it does cost $\notin 6,000$ a week to keep one person in residential care, then that amounts to $\notin 2$ billion annually. We have had 20 years of a neoliberal agenda that reifies the private sector, the commodification of care and its subcontracting. It is an approach that has failed completely. I never know from one day to the next whether somebody is going to come for my son. It means we are robbed of all the normal anticipation of going to college. That is replaced with precarity and fear etc. I refer to the point Senator Ruane highlighted earlier in respect of reinforcing, corroborating and extending all the correlated causalities of poverty and people going into homelessness, care and crisis. Unfortunately, this winter, and in future, we are going to see much more of this.

I have two questions for the witnesses and one observation. The first question concerns the fact I certainly noticed a very rapid deterioration in the global sets of measurements for disability services with the onset of the economic crash and the subsequent austerity. Imposing cuts on the most vulnerable in society was seen as a virtue. Pain and suffering were imposed on the weakest and the most vulnerable people, and that has been our lived experience. I can

trace this process back to the crash and when we bailed out the banks and socialised their debts. That was the point when things got tough for us, and they have now become impossible. Will the witnesses similarly trace back a deterioration in the social care system to that point as well?

My second question concerns that fact that, despite all the virtue signalling and expressions of empathy and sympathy, I feel we do not have a Government that really wants to get to grips with this situation. I have some ideas in this regard. I think we need to have legislation that forces the provision of social care. I refer to legislation that legally obliges the State to provide services and care. My understanding as a layperson is that Ireland is an outlier in that we do not have a set of social care and well-being laws, as is the case in England, Wales, Northern Ireland, Scotland, France, Germany and every other country in the EU. We do not have that. As far as I am aware, we are the only country in the EU that provides care and services on a kind of grace and favour basis. It is not possible to demand these services. The HSE cannot be legally obliged to provide services or, I imagine, Tusla or any other organisation. These are provided based on grace and favour. Do the witnesses think it would be helpful if I were to get my colleagues to assist me in working to draft this type of legislation? It would be based on the best templates in Germany and elsewhere. Those are my two questions.

My observation is that we need change politically in respect of what we value. The focus for the past 30 years has been on neoliberal ideas of fixing the economy and of doing so being so important. We need to fix our society. We had intellectual and ethical failures in the Celtic tiger years that have not been addressed. All I would say to Sinn Féin and Mary Lou McDonald is, "No pressure." This is what we need. I refer to people like Ms O'Toole and Mr. Brown. We have heard hundreds of therapists telling the same story over and over. Ms O'Toole and Mr. Brown have had their past and their development contaminated by this situation. Equally, however, their future has also been affected. I do not know if they can have the modest ambition to have a roof over their heads and to make whatever life decisions they wish to. In that context, who can foster children in that environment? It is a functional prerequisite of human life to have shelter and support. These are listed in the UN charter of fundamental human rights. We do not have them in Ireland anymore. By definition, therefore, this makes us a dysfunctional society and the focus needs to move from the economy to society. Can the witnesses trace a deterioration in social care and, if so, to what point do they trace it back? I certainly can in our lived experience. Do the witnesses believe we need a social care Act and another Act to oblige and legally require the State to provide therapies and services for our most vulnerable citizens?

Chairman: I thank Senator Clonan. Who would like to answer all those questions?

Senator Tom Clonan: There are only two questions.

Chairman: In fairness, the whole discussion has been good. I call Ms McGuirk, who had her hand up first.

Ms Aine McGuirk: I have a couple of points and I hope I am answering the questions posed by the Senator. Regarding his comments about the need to change and fix society in some way, his reference to the need for shelter and support as two basics that should be enshrined in legislation, and his comments concerning who will be able to foster if people cannot even put roofs over their own heads, and who our future foster carers are going to be in that context, one thing I know from practice is that I have met families who are kinship carers, we call them relative foster carers, and they are caring for one or two relatives, such as a niece, a nephew, etc., and doing a really good job. Then they lose their tenancy because the landlord wants them out, for no reason. It could be that the landlord needs the house back or whatever. These people have

no priority in our local authorities and they are providing homes.

I remember one case where kinship carers were providing homes for two children, who were doing really well, plus their own children, and they were being put out on the street. I asked if the local authority could do something to get this family housed. The answer was "No". Being foster carers gave them no right above anybody else to have a roof over their heads. What are we doing to those children? We take them into care and then we let them be turfed out onto the street and maybe put into a hotel. In the case I referred to, that did not happen because another family stepped in and gave those children somewhere to live. They are doing fine, just to let everyone know it is all okay. I was, however, shocked when I came across that case. That was only one specific instance. Quite a few people providing kinship care to children are living in rented accommodation because of the housing crisis. They get moved around, as do the children.

Neither Tusla nor the local authorities seem to be able to do anything about this situation. There is no joined-up thinking in respect of how we deal with these children. Social workers on their own of course cannot magic up answers to all these problems. Regarding legislation to give people the right to care, I have also worked at the disability end of service provision and I understand exactly the Senator's anxieties from that perspective. It is absolutely chronic that the most vulnerable are the people who are being dumped on all the time. Every time things go down, they get dumped on. People lose services and virtually nothing is happening in that respect. Children in care, then, face this kind of double jeopardy, in that they might also have some kind of disability. I have seen children waiting for assessments for autism, for example. The least that could be done would be to rule out the possibility. They may be traumatised, but they are left wallowing in that situation while waiting for an assessment.

Children are only children for 18 years and that is not long. Their lives move in half terms once they hit school. Another half term is over every six weeks and then another term, another half-year and another year and children then move on into another class in school. I had to work in a school to realise that. When I realised it, however, I thought to myself that we need to move much faster for our children. Therefore, any legislation that can help things to move faster for children is, to my mind, an advantage to all of us, whether we are talking about the foster carer, the child, the social worker or anyone, any other professionals, trying to work in the system. I refer to getting some right to care and some recognition that the children who have to come into care are those who are the most vulnerable of all. They are a small number of children and, therefore, their voice is not huge.

Senator Tom Clonan: It is extraordinary that we can have our cars examined by a mechanic every two years to get a licence to go on the road, but we cannot get somebody an assessment of needs-----

Ms Aine McGuirk: Yes.

Senator Tom Clonan: -----regardless of where they are, and then provide them with the requisite speech and language, SLT, dental treatment, etc. What we have reached at the moment is peak neoliberalism. I was going to say "peak" and mention a political party, but I will not. It is so completely and utterly dysfunctional that even in their shiny neoliberal dream, we cannot even get workers to come here now for the shiny tech industry because there is nowhere for them to live. We have reached the absolute peak of this approach and we need a reset. The policy, ideologically and philosophically, has shown itself unwilling to help us. Therefore, there needs to be a legislative compulsion to do so, as a starting point. It should be in the same

vein as the legal requirement for cars to have passed a national car test, NCT, before being taken onto the road.

There must be an absolute legal requirement for the HSE and the State to provide these services and care. Part of this speaks to treating social workers, nurses, doctors and teachers with little bit of respect. We must be one of the only jurisdictions where doctors, nurses and teachers are demonised in our public discourse. All these aspects feed into one another. Listening to the witnesses today, I felt there was a similar experience. It has not got there yet, but it is heading in that direction. Therefore, we must work together. If any of the witnesses are available after this meeting, I am attempting to get to the point where we can put together some kind of draft legislation in this area, because it is missing. I refer to the witnesses' expertise in this area. I am sure they are *au fait* with best practice legislation or a template for legislation in another jurisdiction that might address these issues.

Ms Marissa Ryan: I believe Ireland should legislate for economic, social and cultural rights. Our Constitution now only recognises the right to education. It does not contain the right to housing or other things. Were we to legislate for economic, social and cultural rights, that would bring us more into line with human rights law.

Turning to the Senator's other question, while I think the societal conditions that result in children being brought into care, as I said earlier, have worsened and that there is an inequality crisis in Ireland, and Senator Clonan has explained succinctly why this is, I do not think it is fair to say the care system itself has deteriorated in line with those conditions. In EPIC, while we have seen that there is so much more to be done, so much that can be done better and major requirements for investment in political will, we have also seen advances in the care system in the last decade. Mr. Brown will speak more succinctly to this point, but we have seen much progress within Tusla, better awareness of the situation of children in care and the advent of services that are more specific. In that context, we do have people like Ms Bairéad who are brilliant, are advocates and are out there talking about the situation of children in care. We also have a thriving civil society, including IFCA and others.

Where we would like to see a better understanding of the care system reflected is in enshrining the different rights which should exist. I refer not just to economic, social and cultural rights more broadly, but, for example, the right of children in the care system to be heard in line with Article 12 of the UN Convention on the Rights of the Child, UNCRC. This could be done through having aspects such as independent advocacy contained in legislation, as it is in other EU member states. In EPIC, we were recently given the most humbling donation, namely, the proceeds of the Justice for Magdalenes research group's books. The authors of the book Ireland and the Magdalene Laundries: A Campaign for Justice asked the survivors who gave their testimony what they wanted done with the royalties. They asked that they be given to EPIC because they wanted to make sure that no child in care or a care-experienced young person ever had to live without having a voice. We feel very humbled by that. It subsequently happened again with the second book, about redress. We feel very strongly that independent advocacy should be enshrined in legislation. As the members can see, all children in care and young people with care experience have a voice but that voice is seldom heard. We are here today to further facilitate young people to speak directly to their experiences. It should not be incumbent on an NGO like EPIC. That is something the State should look for, believe in and want to seek out proactively.

Mr. Rory Brown: I was thinking about this as I was driving up here today. I have been on EPIC's youth council for five years but it is only in the last two years that I have seen massive

progress in us talking about the care system, talking about changing the system and wanting to make that change. Ms Ryan spoke about the Magdalen laundries. There have been so many issues in the past but they have been covered over. It is only now that we are starting to talk about these things and talk about the care system, how we can improve it and how we need to focus on the child and giving the child a voice. That is one of the biggest things. Once you give a child a voice, you can start improving things. Lately we were working with the Minister for Further and Higher Education, Research, Innovation and Science, Deputy Harris, on the national access plan. We are lucky that care leavers are finally mentioned in the national access plan for the first time, even though this is the fourth access plan. That is just amazing. We are finally being noticed. People are finally starting to realise we need to do something for these kids to ensure they can succeed. That notice is only just starting to happen. The more we get a voice to young people with care experience, the more we can change the system for the better and work on that.

When we talk about the State, it is *in loco parentis*. It is supposed to be the caregiver of that child. It is important that we have legislation that holds the State responsible for the needs of a child. At the moment, those responsibilities are being landed on people like myself or teachers in the classroom. They have to do it because children do not have the services or places to go to get that support so teachers, foster carers and social workers are doing it. They are not trained properly to deal with that or provide the supports the child needs. That is very important. If we can help children get the support quicker and hold the Government responsible for that, that would be massive in ensuring they get the support they need.

Chairman: We are potentially going to run into time difficulties. I ask Ms Bairéad and Ms Bond to be brief in their responses because we still have two other people who want to speak.

Ms Aoife Bairéad: I referred in my statement to the fact that, if we are having services work together, there has to be a structure in place in order that those services are scaffolded. A social worker having to refer a birth family to housing so they can have their child returned, having the foster family referred to housing, which is only a letter in advocacy, just cannot work. We do not have a system that can be designed for those services to work together around a child. There has to be something in place. There are many services doing their best to try to work together but there is not a system in place to make sure that is done in a systemic way. Children are frequently failed because of that. Whenever the committee is proposing to draft has to have that practicality in it.

Assessments are all well and good and I do a lot of them. However, the assessment has to demand that intervention is provided as well. Whatever it is, it has to be the service that actually helps. It is no good for a family to just have an answer. They often know there is a problem with their child and they probably guessed what the problem is. They need the help to then do something about that and support their child to meet their potential. The intervention has to be there as well as the assessment.

Ms Catherine Bond: The Senator's first question was about whether there was an identifiable juncture where things deteriorated. I alluded to that my opening statement. When children in the care of the State were under the HSE, they had rights and were prioritised for services. That positive discrimination for children in the care of the State was lost in translation when the Child and Family Agency was established. If there was one thing to come from this meeting, it is that we should look to have that reinstated very quickly.

On the legislative infrastructure, the rights of the child are enshrined in our Constitution. This country has ratified the UN Convention with regard to children with disabilities, children's

voices and children's right to be heard. We should focus on what we already have in place and try to work better and hold the Government to account. Children's voices are not being heard and services are not being offered to children. The Ombudsman for Children has highlighted the deficiencies for children with disabilities and children accessing services. We already have pillars that we can use make them work for us better. We are also reviewing the Child Care Act at the moment. Foster carers spend an inordinate amount of time fighting for the rights of children and fighting for services for them when their time is best spent supporting those children. We in IFCA spend copious amounts of time advocating for foster carers. We have an advocacy service that supports foster carers when allegations of abuse are made against them, which is a very traumatic experience for foster carers. Their lives and those of their families are held in suspension for weeks and months, or in some cases years, before there is an outcome from an allegation of abuse made against them. We have a tall order of work to do but we have the infrastructure within our current legislation if we could make it work.

Deputy Jennifer Murnane O'Connor: I was upstairs in my office for the first part of the meeting. I thank all the witnesses. Everyone is very passionate about this matter. It brought me back to the issue of the mother and baby homes. We worked with the Minister for Children, Equality, Disability, Integration and Youth, Deputy O'Gorman, on that. The Minister is very committed to supporting and working with everyone. It is important that we mention that because he is very passionate about his remit. All of us on this committee have worked very well with him.

I am very lucky in the sense that I know a lot of foster families in my own area. The children are the light of their lives. I have worked with families and given references for some because I know how committed they are. I have huge concerns about this area. In 2001, the working group on foster care said there needs to be an increase in the allowance, as well as the aftercare allowance. Mr. Brown spoke about that. That is a huge concern for me. We are looking at the cost of living and everybody wants the best. It is important that no family, particularly a foster family, is in a position where they are struggling. I do not think that should happen. We should look at the provision of mileage, supports and allowances to foster carers, especially with regard to the back to school allowance. Would it be more beneficial to families to have extra supports there?

I have been taking notes. I feel that foster carers provide an invaluable contribution to the State because they want to bring positive change into the lives of children in need. I know so many foster families and this is what they are about. The supports have to be looked at. A family that was in contact with me recently pointed out that while foster carers receive payments for fostering children, they receive no PRSI credits from the State and so are not eligible to receive a pension. Some of these foster parents are doing this on a full-time basis and they are are not entitled to it. I have huge issues with that. They should be entitled to a pension. That is something we need to look at, whether through legislation or whatever else we can do because that is important.

I was very annoyed. A foster family I know came to me whose child had missed the school bus place because of the mix up. While it is great to see that we had the free bus for the year for primary and post primary children, there were no exceptions made. That is a considerable issue. It is the same for housing. I am working on housing for families in my area. There has to be a priority. There has to be some legislation under which a foster family should, under no circumstances, lose a home or be in a situation where they cannot be in a home. If we learn one thing from today, it should be that we put in supports. I will speak to the Minister, Deputy

O'Gorman, about this. I have spoken before about this to him. We need to prioritise these issues. On the scale of things, they should be easily done. It is just a matter of prioritising the most vulnerable and those who need it the most. I am absolutely committed to that.

I know supports are such an issue, whether it is occupational or speech-and-language therapy. That needs to be addressed. I was touched by all of the witnesses' presentations. What do they feel is the struggle that causes families not to foster any more? Is there an issue we could solve? We need foster families. We need them for children who are vulnerable. How do we try to solve this? If we do not look at anything else from today, maybe we could look at that.

I say well done Mr. Brown and all of the witnesses. I have not got my glasses on and I cannot see the names. I apologise. I came down without my glasses. I learned a considerable amount today. I am working away and I know we have much to do. However, it is important we say that the Minister is committed. The Government will listen. I can assure the witnesses that I will be shouting and doing what I can for them.

Ms Aine McGuirk: I would be happy to respond, from my perspective, on the level of recruitment of foster carers. I am sure the IFCA will also have something to say. What we know about foster carers is that most people who come to fostering are either friends or relations of somebody who fostered or have somehow come by an experience of fostering, thought it was lovely and great and that they could do it. They go in with their eyes open because they know what fostering is about.

One of the issues in Tusla, where I quite recently worked in fostering for four years, the bank of social workers on a fostering team is suddenly told by their manager that Tusla needs to have a fosterering recruitment campaign and tells the lads and lassies to go off to recruit foster carers. The social workers have to drop everything they are doing. They are going around with leaflets into places such as GAA clubs. They are putting up posters in shops and asking grace and favour. That is no way to use Tusla's social workers. However, it is the old way. The old way used to be to get people up to the pulpit to talk in the churches, because that is where people gathered, but there are much newer ways of doing things nowadays. It is wrong to ask the already-very-stretched social work personnel to do this campaign. Something more needs to be done to recruit people.

Think of what we know. We know that people who are linked to fostering will come forward. How does one get to those people? We know that people in caring professions are more likely to come forward, as foster carers, than people in other professions who would not have that sort of nature. That is the wrong word, but the Deputy knows what I mean. It is amazing how many children of foster carers become social care workers or nurses.

Deputy Jennifer Murnane O'Connor: Of course.

Ms Aine McGuirk: Those are the kinds of people who foster. We need to address that rather than ask social workers to drop all their cases because, sure enough, something nasty will happen in one of those cases and a social worker will have dropped the ball on what really was his or her job, while he or she was going around to GAA clubs to hand out leaflets.

Dr. Valerie O'Brien: There is a very positive social media campaign running about recruitment of foster carers. It is everywhere such as on Facebook and in local papers. It is very effective.

Ms Aine McGuirk: That needs to run all the time. Safeguarding Ireland has done a mas-

sive job - not for a massive sum of money - on getting information out about violence against and abuse of elderly people. It uses the same ads over and over again. It just keeps running them. Something like that becomes almost subliminal, in the same way that we were all convinced to drink Coca-Cola. One does not even see fostering anymore but hears it in the back of one's head somewhere.

Ms Catherine Bond: Foster carers need supports in order to remain fostering. They need timely supports when they ask for them. There is no point, when foster carers say that their child is climbing up the wall and they do not know what to do, to have somebody say that there is no social worker to go out to them. We see dual social-worker allocation in some areas. There are particular black spots in the country where the child might have a social worker but the foster carer does not. There are foster carers who do not have linked social workers as we speak.

Foster carers are tired and they do not feel respected. I hear anecdotal stories of the social worker years ago who used to come to have a cup of tea at the table and a chat to check how things were going. That is no longer the case. We are talking about business processes, check-lists and scrutiny. It is more quantitative and less qualitative. We need foster carers to feel supported and, most importantly, respected. We are aware of a number of foster carers who have dipped into their own financial resources to take judicial reviews to get outcomes or decisions about children in their care.

We have an annual fostering fortnight every spring time which promotes the importance of foster care in the lives of children. We really put out that message with regard to what fostering can do. Our last survey said that 90% of foster carers would state that fostering has improved and contributes to their lives but, conversely, they are saying they would not recommend fostering to somebody else. We are at that critical juncture today.

Deputy Jennifer Murnane O'Connor: That is a problem.

Deputy Patrick Costello: We have covered a wide range of topics. It is a very complex issue. The range of topics we covered has reflected that complexity. I do not envy the staff having to write up the Official Report of this afterwards. We have looked at individual practice issues, broader general Tusla issues and the wider social issues that are the foundation and the basics.

I will pull it into that middle ground but, first, I will comment on privatisation. I completely agree with what is written about privatisation. Empowering People in Care, EPIC, have been very clear in advertising and advocating that it is not just about foster care, it is about residential care. Six thousand euro is cheap for a placement. When I was a social worker I signed off on much more than $\notin 6,000$. A placement for $\notin 6,000$ would make my principal social worker smile. It is very cheap.

It is important to differentiate between the foster carers who are with a private agency, who are just as dedicated and committed and provide the same quality of service, from the private foster care company that exists to make profit. The marginal cost to Tusla of private foster care placements is increased to three or four times the cost. It is a greater drain on resources, especially the most precious resource, that is, time.

That creates the problem Ms McGuirk was talking about wherein social workers, because they are losing time, cannot put the time into recruitment, the report, training or supervision.

One ultimately ends up with a weaker service and a greater reliance on the private agencies. Essentially, there are private agencies that are weakening Tusla while at the same time strengthening their ability to make profit. I am sorry but that is the behaviour of a parasite. I have a significant issue with agencies that look at the misery of care we have reflected and see profit.

The issue of the first placement, as raised by Ms Bairéad, is a huge one. This is one that we are not necessarily grappling with from a Tusla perspective. So many times, that first placement is chaos. It is 4.55 p.m. on a Friday and it is just for the weekend but the next thing we know, the kid is there six years later without a care plan. If they are lucky, maybe it is the first of six placements in six weeks. When thinking about that first placement, we need to challenge Tusla practice on that.

With regard to the mental health services, I strongly believe we need in-house therapeutic supports for Tusla. CAMHS and the likes are totally overloaded. If we say children in care should have priority, then we need bespoke, in-house therapeutic services for them reflect the need for priority and the complex dramatic issues we have been talking about.

I have spoken with the Minister, Deputy O'Gorman, about the need for in-house, therapeutic services. He is probably bored with me talking about it but I feel he understands this and is doing his best to implement it. One of the things I would like to see from this, and from the report, which is our responsibility as members of the committee, is to give the Minister levers to pull. I believe the Minister understands the crisis he faces, and we need to give him solutions and levers he can pull. The working group is a very positive part of that. I would like to dig more into that but I probably should have read the document beforehand. I may come back to the witnesses afterwards on that. That is a very important one.

I have some questions for the Irish Association of Social Workers and the Irish Foster Care Association, IFCA, on the issue of the demographics. We have spoken about demographic change impacting on recruitment. What does Tusla need to do differently? What is it doing wrong? How do we address this? How do we, as a State, and Tusla, as the agency, respond to the shifting demographics?

The other issue is the kinship care. Dr. O'Brien said it is about 30% here. In Northern Ireland, it is the opposite - it is 70%. In some in some health and social care areas, trust areas or whatever they call them in the Six Counties, they are doing significantly better. What are we doing differently? What are we doing wrong and how can we improve that? Has the Signs of Safety programme impacted on that? We can argue another day about the practice but in theory, the Signs of Safety programme is supposed to pull in everyone. Surely that Signs of Safety planning meeting can be a recruitment for the kinship care. If that is not happening, why is that not happening? Is it a fundamental problem with Signs of Safety that we need to talk about? We could be here for hours on that alone.

With regard to private family placements, guardianship payments are incredibly hard to get. Again, we could get really stuck in on the private family placements, which are effectively outsourced foster placements. We are just not giving the supports to these.

I will stick with those two questions for the minute. We have a Minister who gets it and who gets that there is a crisis. He wants to do something. It would be really positive if this committee, through its report and through the witnesses' organisations, could give the Minister very practical things he could do next. The committee will be writing a report and putting recommendations. What are the things the witnesses would like to see, in black and white,

that should be achievable? There is an equality crisis, yes, but I am not sure that we can fix the equality crisis into-----

Ms Marissa Ryan: It is one of many things.

Deputy Patrick Costello: We need to fix, protect and save fostering. If fostering is a huge ask, let us break that down a little.

Dr. Valerie O'Brien: In our presentation today, we said that it was linked to a change in demographics, the ongoing stress of living and the effects. With demographics we need good information systems in Tusla. It is paying people every month, so it has systems there. It has a national system to pay every month. Why is that data system not being used to profile who is fostering and what their ages are so we can predict? It is not rocket science in terms of the information systems - information systems with quantitative data - to profile our foster carers.

One of our recommendations is that exit interviews for every foster carer, either moving to private agencies or leaving, should be conducted, of course with the co-operation of the foster carers. I would recommend that this should be outsourced to IFCA. It is a body that is independent of the service provider. There should be an exit interview for anybody leaving foster care.

The elephant in the room, which is not being named today, is around the unintended consequences of regulatory requirements. We have gone full-blown in terms of regulatory. It is hard to argue against good regulation of children in care, child welfare systems and foster care systems, but some of the regulatory requirements are driving foster carers out the door. It is a private domain of family life, which is the great thing about it, but in terms of the regulatory requirements and the inspections, there are some nebulous rules, and that is not what we are not talking about here.

Ms Aoife Bairéad: I would like to comment on some of Deputy Costello's points. The therapeutic support hubs and the national advocacy service for birth parents are both being established. If they are to work well they are going to need people to staff them, which is beyond social work. The social work placement piece is important. Tusla has done a really good job of offering students placements. I believe that every student who wishes to have a placement can have one in Tusla now. There has been a really good response to that and it is something that Tusla has done very well. Other State bodies can do the same thing. They can ask Tusla what it did and try to replicate it. We need those social workers and services across the board if they are going to do this.

It also means that we need to be focusing within Tusla and the HSE disability and mental health services. We need to be offering training programmes within those that allow them to meet the needs, as with the Judiciary. Everyone needs to have that training. We need to have something established that will review what training people need. The colleges have to do it but we also need to be able to do that in-house for all of them. It is changing all the time. "Trauma" is the buzz word at the moment. A few years ago it was "attachment". It will be something else again. We need people who are in those services to be competent to be able to do that. If Tusla is going to offer that within the therapeutic support hub, and Barnardos within the parent advocacy support service, they are only going to work of those people are available and trained well.

Ms Catherine Bond: The kinship care question is very important. The more we can keep children within their wider family circle the better. It keeps coming back to supports. What kinds of supports do these families need? If they have a child placement they need to have

continuous contact with the link social worker. They need those support structures and when they ask for help they need to get help in the here and now and not, as Mr. Nolan said, get an assessment for a child in two years' time. Some of the asks for the Minister are very solution focused in that sense.

The Signs of Safety programme has been very positive. It has been there for a long time now - I believe for four or five years. I am not sure if there are plans to evaluate that but it would be useful to have an evaluation to see how many children the programme has prevented coming into the care system and the percentage of children coming into the care system as a result of doing an analysis or an assessment within families.

With private fostering arrangements, we really need to get beyond that anomaly. We have numbers of people contacting IFCA. There are grandparents caring for teenage children. These carers are neither fish nor fowl. They are not foster carers and they are not recognised as family. There are no financial supports for those grandparents to look after children. We all know the cost of raising teenagers. It is quite expensive.

As Dr. O'Brien said, the exit interview is very appropriate. The one thing we are missing is that we are not, to my knowledge, gathering data on placement endings. IFCA advocates only has four part-time advocates. In 2021, we supported 30 families who had placement breakdowns. To date in 2022, we have supported 27 families where there is imminent or actual placement endings. We are not capturing the data on the contributing factors to those placement endings. If we used a triage system, that way, for the emergency, we might be able to put the supports in place for foster carers who are shouting from the rooftops for supports for their foster children, not for themselves. We also need to look at the broader family support systems that are offered within Tusla and beyond through the prevention, partnership and family support, PPFS, system. We should be linking foster carers on the ground with organisations, whether they are parent and toddler groups or afterschool clubs in the locality. We should be thinking more broadly about alternative carer family supports. We should be thinking across lines more. Foster carers need to be seen as part of the team. There needs to be a partnership with them and they need to be respected. Their views and opinions need to count. That is not the case at the moment.

Mr. Rory Brown: I want to go back to the point Deputy Costello made about the cost of ϵ 6,000 a week for residential care. We talk about supports and the supports we are looking for, putting in these supports will cost something. However, when we look at it, and I have just done the basic maths here, it costs ϵ 312,00 to support one child in residential care for one year. That is mental when we compare it to the current rate for foster home care, which is ϵ 18,300. We can use that money we are paying for residential and private residential care to create and put in place these supports that foster carers, foster kids and everyone needs. Now, the money is going to paying for these placements for children, which are important at the moment. However, the quicker we can change the system to include more foster carers, even if they are private caregivers, it means that there will be more money for putting in place the supports that we are all talking about here. When we are looking at these issues, that is the direction in which we need to move. The quicker we do that, the quicker we can have that financial support in the correct services that are needed.

Dr. Valerie O'Brien: I have one last comment about the commodification of care. The reason we chose to insert that in our discussion document was that we are calling for a debate on the issue. We did not have time to discuss it today, because of the complexity of the issue. It is not for a moment that we are opposed to private providers of care, but it is complex at a wider

level. The Government really needs to look at the commodification of care, who needs and who provides care, at what cost, and with what consequences.

Deputy Patrick Costello: I have a quick follow-up question on the regulatory requirements and the unintended consequences around that. Has any research been done, even abroad, looking at that kind of aspect?

Dr. Valerie O'Brien: I think we have to do the research in the Irish context, because the HIQA machine has been established for a number of years. Every foster care review or report is available on the HIQA website. We now need to begin to do a synthesis. It fills many agencies with a lot of trepidation and huge fear. There is a need for different dialogues to happen.

Deputy Patrick Costello: I have one last comment in light of the report-----

Chairman: Second last.

Deputy Patrick Costello: It is definitely the last. Tusla is required to produce reports on the adequacy of services, and things like that. However, we have seen, when representatives have been in here and we have asked them about the number of social workers Tusla needs, that there is no workforce planning. There is no demand anticipation, which would help with a target for the number of social workers and foster carers that need to be recruited. I think that as well as the legislative requirement for independent advocacy for both children in care and for parents, some element of workforce planning and demand anticipation is required, whether that is done through the corporate planning process that happens between the Department and Tusla. We need to ensure that those two bits are happening. That is the research that we are all talking about needing. I will definitely leave it there.

Ms Aine McGuirk: The unfortunate thing is that there are just not sufficient numbers. Since the last time I sat in this chair, Tusla has put a lot of measures in place that have helped. In every area, it has assigned a principal social worker who is responsible for students. When a student arrives in Tusla, they get a laptop, a phone and a space to sit. That is huge, compared to what is happening in the HSE. If the HSE was doing half of what Tusla is doing, I would be a very happy person. The HSE is treating all of its professionals and social workers at the bottom of the pile with much more disdain, in terms of supporting their placements, etc. Tusla has come a long way. It has done that because it needs the people to come through its door and start working for the organisation. That is Tusla's aim in doing it, to get the students in. There is one office in the middle of town. I joke that there is a tripwire from Trinity College into Lord Edward Street, and Tusla trips the students up as they come out when they graduate. Every year, a big gang of them go to work in Lord Edward Street. It is a nice office to work in and is in the middle of town. It is a tough place to work, but there is a great atmosphere. The problem is that they do not stay there for too long, because as soon as they move into the next phase of their lives, which might be settling down and having a family, that kind of work just does not fit with getting home at six o'clock in the evening. More is needed because the pressures, when Tusla gets them in the door, are too great to retain them. It is not work that is for everyone. I am not sure what Tusla can do. It is getting as many graduates out of the colleges as it can.

Dr. Valerie O'Brien: We need to increase the number of graduates.

Ms Aine McGuirk: We need to increase the number of graduates, but in order to do that there needs to be more placements. It is a kind of chicken-and-egg situation. I am not sure how we can get more practice teachers to take more students that are put in the colleges, because

if we increase the number of college places and there is nowhere for them to do their practice placements, it will not work.

Chairman: I am going to have to wrap up. Is there anything, in particular, Ms O'Toole or Mr. Brown want to say to finish? I want to give them the final word, if they wish to take it.

Ms Lauren O'Toole: We are not here to change the care system for us. We have been through it. We are changing it for the people who are going to go through it and who are currently going through it, who may not have a voice and may think that their voice is not going to be heard. It is an honour for us to be here to be able to advocate for those people, but we need to make sure that after this conversation, it does not fall flat on its face. It needs to go somewhere. Work needs to happen and progress needs to be made.

Mr. Rory Brown: I second that. As I said previously, when I become a teacher, I am going to be coming up against many of these kids who are coming through the care system. I have already met kids who are in the care system. I faced the issues they are experiencing. Gladly, I am able to tell them that I have gone through it and I can share my experiences with them. However, many of them do not have that role model. They need the support from others. They need so much more. That is what I am hoping for with the discussions. As I said, discussions about the care system have only really started to take place in the last few years. The more that we can get that work going, the better it will be. We can make the changes to the care system that are needed. I am glad that we are starting to chat and talk about it.

Chairman: I want to sincerely thank the participants. I think it was a great discussion and engagement. I know that I allowed all speakers to go over time. I did that on purpose so that we could have that discussion and engagement. We are also going to have more meetings on this topic. We certainly do not want the issue to fall on deaf ears or to go nowhere. It is a topic that we have wanted to look at for a long time. Coming out of Covid, we have a lot more flexibility. The discussion has been great for us, and I thank the witnesses sincerely for that. However, I would like to single out Ms O'Toole and Mr. Brown and thank them for their input. It is not easy to come in and tell your story. I totally agree that they are a fantastic voice and great advocates for all the other children. They said it was an honour to come in. To be honest, it is an honour for us to have them in and to hear their stories and their voices. I wish them the very best of luck in everything they do. I thank all the other groups represented. There will be other meetings, and I am sure the witnesses will be tuning into them. When we have our report done - we will give Deputy Costello the job of writing everything out - we will give everyone a copy of it as well. I propose that we publish the opening statements to the Oireachtas website. Is that agreed? Agreed.

The joint committee adjourned at 6 p.m. sine die.