AFTERCARE OR AFTERTHOUGHT?

A QUALITATIVE ANALYSIS OF SOCIAL CARE WORKERS EXPERIENCES ON THE TRANSITION OF AFTERCARE FOR CARE LEAVERS

BY

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Declaration

I declare that this dissertation and the research involved in it are entirely the work of the author. This work, or part of it, has not been submitted for a qualification to any other institute or university.

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# TABLE OF CONTENTS

## TITLE PAGE

## DECLARATION

## ACKNOWLEDGMENTS

## TABLE OF CONTENTS

## ABSTRACT

## INTRODUCTION

### SECTION ONE: LITERATURE REVIEW PAGE NO

| 1.1 | Introduction | 13 |
| 1.2 | What is Aftercare? | 13 |
| 1.3 | Aftercare in Ireland | 15 |
| 1.4 | Policy Background | 17 |
| 1.5 | Aftercare Transition to Adulthood | 20 |
| 1.6 | Current Research Around Aftercare? | 22 |
| 1.7 | Conclusion | 27 |

### SECTION TWO: METHODOLOGY

| 2.1 | Introduction | 30 |
| 2.2 | Justification for the Research | 30 |
| 2.3 | Research Design | 30 |
| 2.4 | Research Martials | 32 |
SECTION THREE: RESULTS

3.1 Introduction 39
3.2 Data Analysis 39
3.3 Emergent Themes 40
3.3.1 What does a Typical Aftercare Assessment and Transition Consists of? 41
3.3.2 The Challenges and Barriers in Relation to Aftercare 47
3.3.3 The Social Care Workers' Perspectives on the Transition from Care to Leaving Care for Care Leavers 50
3.4 Summary of Findings 57

SECTION FOUR: DISCUSSION AND RECOMMENDATIONS

4.1 Introduction 60
4.2 What does a Typical Aftercare Assessment and Transition Consists of? 60
4.3 The Challenges and Barriers Which Face Care Leavers 63
4.4 Social Care Workers Perspectives on the Transition from Care to Leaving Care for Care leavers 66

4.5 Social Care Workers Perspective of the Aftercare System 67

4.6 Evaluation of Methods 68

4.7 Recommendations 69

SECTION FIVE: OVERALL SUMMARY AND CONCLUSION

5.1 Introduction 72

5.2 Overall Summary and Conclusion 72

REFERENCES 75

APPENDIX 1. INFORMATION SHEET 83

APPENDIX 2. CONSENT FORM 84

APPENDIX 3. SCHELDULE OF QUESTIONS 85
ABSTRACT

The research commences through a literature review of the current literature available regarding aftercare in Ireland. The overall impression from the current literature identifies a huge gap in literature for a larger scale up to date study also there is a negative aspect throughout the literature review of the aftercare system.

The research took a qualitative strategy which involved semi-structured interviews with five social care workers all of which are currently working with children in care by helping and assisting each child through the aftercare process. The interviewees which consisted of two female social care workers and three male social care workers, all had a social care degree and three had a master’s qualification. Each social care worker had a number of years work experience working in this field. The results from the interviews were all thematically analysed.

The results found that from the social care worker perspective for an effective typical aftercare transition to work in the favour of the child an appropriate child centred assessment must first be in place including the necessary supports and people to achieve an effective transition for the care leaver. A number of challenges were identified which care leavers face such as low levels of education attainment obtained by care leavers, high levels of mental health issues as well as homelessness and addiction being huge barriers for care leavers all seen by the social care workers’. Each social care worker where asked their own options on the aftercare system in Ireland. Many of the social care workers’ identified EPIC\(^1\) and Focus Ireland

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\(^1\) Empowering People In Care.
as positive aspect of the aftercare sector as both organisation’s provide social support to care leavers and also numerous studies and research around aftercare in Ireland. However, the overall view of aftercare is a negative discouraging outlook from all five social care workers’.

The research finally concluded with an overall summary and recommendations including the need for a larger scale national study including care leavers and social care workers’ views and experiences of aftercare should be carried out in Ireland to give a more in-depth analyse of the aftercare sector at a national level. A significant amount of funding also needs to be allocated to the aftercare sector in Ireland to provide more necessary support and facilities for care leavers. More state funding should also be allocated to organisations such as EPIC and Focus Ireland who work with care leavers through a form of support, both of which have carried out numerous research and studies around the aftercare sector in Ireland. The allocation of an aftercare worker needs to be a paramount and an important part of the aftercare transition for all care leavers. Finally, that section 45 of the child care act needs to be reviewed and amended by the Irish government because of its insufficient support for all care leavers.
INTRODUCTION

Over the last 30 years a number of child care cases have come to a head such as the Kilkenny incest case, the Roscommon case and the Ryan Report shining a negative light on the child care services in Ireland. Before 1908 there was no legislation in place in relation to children in care in Ireland. Child care in Ireland was first provided by the Catholic Church on behalf of the state with many children receiving care within the horrible and horrifying workhouses where most children in care grow up. However, by 1908 the United Kingdom Legislation the Children’s Act 1908 provided Ireland with its first legislation framework and this framework was in place until 1991 when the Child Care Act 1991 was introduced when the social and political situation with regard to children “at risk” changed which placed greater responsibilities on the rights of the child. (Buckley et al, 1997; Focus Ireland 1996; O’Higgins, 1996). The 1991 act was different to the 1908 act as the 1991 act established the welfare of the child is paramount and given first consideration. In 2001 the introduction of the Children’s Act 2001 refers to juvenile justice and detention centres in Ireland however, the 1991 act is still the main legislation in relation to children in care in Ireland. (Share and Lalor, 2009). Between 1998 and 2015 there was a significant rise in the number of children being admitted into care. (Department of Children and Youth Affairs, 2016).

When a child turns 18 years of age in the care of the state they most then leave care and begin their lives independently. The transition between care and leaving care is referred to as aftercare. Section 45 of the Child
Care Act 1991 refers to aftercare stating that the state may assist children who leave care as long as the state is satisfied of the need for assistance and the care leaver has not attained the age of 21 years. (Government of Ireland, 1991). At the end of March 2015 Tusla advised that 1,720 young people aged between 18 to 22 years inclusive were in receipt of an aftercare service. (Tusla, 2015). Each year in Ireland we are notified by Tusla of how many children are in receipt of aftercare in Ireland. However, we are not notified of how many children who leave the care of the state are not in “need of assistance” and their lives turn into a downward spiral into homelessness, addition and sadly even death. Unfortunately, this is the shocking truth as majority of care leavers lives are affected because of the insufficient assistance and help from the state.

This study aim is to explore the views of professional who work with children through the aftercare transition from care to adulthood and independence.

The objectives of this research are to:

(1) Explore social care worker’s perspectives and insights into the transition from care to leaving care for an adolescent.

(2) Identify the challenges and barriers in relation to aftercare from the perspective of the professional.

(3) Identify what a typical aftercare assessment and transition consists off from the social care workers experience of working in this field.

The following Section 2 gives an overview of the research literature, Section 3 outlines the qualitative methodology used, Section 4 summarises the results, Section 5
highlights the key findings and recommendations for future research. Finally, Section 6 gives an overall summary and conclusion of the study.
SECTION 1: LITERATURE REVIEW

1.1 Introduction

This chapter examines the literature in relation to the aftercare system in Ireland. The chapter examines the research through referring to what is aftercare? Aftercare in Ireland, the policy background of aftercare, the aftercare transition to adulthood and finally what the current research say about aftercare.

1.2 What is Aftercare?

Aftercare is support provided to young people leaving care who have been assessed as having an aftercare need to ease their transition to independence. (EPIC, 2016). Preparation for leaving care starts when a young person enters into the Care system but formal preparation should begin no later than the young person's 16th birthday and the approach to aftercare is informed by the wishes and agreement of the young person. (Tusla, 2016). The aim of aftercare services is to provide the range and continuum of services to assist the varying needs of young people leaving care to enable them to achieve a successful transition from their placement to independent adult life in the community. (Department of Children and Youth Affairs, 2016).

A key factor in providing appropriate aftercare is the assessment and care planning that should take place in consultation with the young person and key individuals prior to leaving care. (Department of Children and Youth Affairs, 2016). Aftercare provision incorporates advice,
guidance and practical support. The social worker, aftercare worker, young person, carer and others identify what the young person will need for support and how this will best be met. This may include education, financial support, social network support, and training. One of the key features of aftercare support is to advocate on behalf of young people to promote their development as a fulfilled adult in their community.

The most important requirements for young people leaving care are for secure, suitable accommodation, access to further education, employment or training and supportive relationships. (Department of Children and Youth Affairs, 2016). This transition between care and aftercare presents a challenge for many young people. These young adults encounter all the usual developmental issues of leaving home without, for many, the security of a stable background for support. Some young people will also carry the impact of early difficulties. (Department of Children and Youth Affairs, 2016). The most vulnerable group of children are those leaving residential care or short term foster care placements and children who come into care late, in their mid to late teens, who may not have developed the relationships with carers and staff necessary for a stable placement or to maintain contact. (Department of Children and Youth Affairs, 2016).
These young people are referred to as care leavers. (Kilkenny, 2012). The term care leaver pertains to young people who have reached an age at which the State is withdrawing ‘parental support’ in order to allow them to move towards independence (Ward, 2008). The age at which the Irish State withdraws ‘parental support’ is eighteen. (Kilkenny, 2012). In relation to other supports for the care leavers services can be provided up to 21 years of age or 23, if the care leaver is in full time education, for those young people who are eligible under Section 45 of the Child Care Act 1991. (Tusla, 2016). Recently Tusla has introduced a Standardised National Aftercare Allowance for young people who have been in care for 12 months on their 16th birthday or for 12 consecutive months prior to their 18th birthday. This weekly standardised allowance of €300 per week ensures equality for all care leavers engaged in training and education.

1.3 Aftercare in Ireland:

In recent years the overall provision for providing care for children within the care of the Irish state has been darkened and had a very negative outlook. In 2009 the Ryan Report (Government of Ireland, 2009), became a landmark inquiry into historic child abuse in state institutions for children. The Ryan Report made a recommendation that aftercare provision for young people leaving state care should be strengthened. Four years after the publication of the Ryan Report (Government of Ireland, 2009), reform in this area has been minimal. (Carr, 2014). Critics of the current state of affairs have argued for the need to strengthen the legislative basis for aftercare
provision (Daly, 2012a, 2012b; Doyle, Mayock, & Burns, 2012). However, beyond the development of a national policy, which aims to standardise service provision nationally, leaving and aftercare provision in the Republic of Ireland remains discretionary, ad hoc, and inadequate. (Carr, 2014).

During Kilkenny’s, 2012 research she stated that there was currently no formal statistics on the numbers of young people that leave residential care each year and without such data, the destination, whereabouts and well-being of young people after they have left residential care cannot truly be determined. However, on the 1st of January 2014 the development of the child and family agency known as Tusla which became the State agency responsible for improving wellbeing and outcomes for children and represents the most comprehensive reform of child protection, early intervention and family support services ever undertaken in Ireland. (Tusla, 2016). Tusla therefore published the first main statistics in relation to children in care. The most recent statistics at the end of April, 2015, Tusla reported that there were 6,420 children in care with 93% placed in foster care. (Tusla, 2016). The vast majority of children in care live in foster care and many of these children remain living with their foster care families when they reach 18 years with ongoing financial support and advice. At the end of March 2015, 639 young people over the age of 18 years were supported financially to remain living with their foster carers. (Department of Children and Youth Affairs, 2016). Also at this time Tusla advised that 1,720 young people aged 18 to 22 years inclusive were in receipt of an aftercare service. Of these, 78% were aged 18 to 20 years, with the remainder aged over 20. Of those
in receipt of an aftercare service, 60% of 18-20 year olds and 59% of 18-22 year olds were in full-time education. (Department of Children and Youth Affairs, 2016).

1.4 Policy Background of Aftercare:

The Child Care Act (1991) is the main statute for child protection and welfare in Ireland. It provides the legal mechanisms for the placement of children in alternative care under a range of care orders. (Carr, 2014). Legislative provision for aftercare is also set out in the Act. Section 45 outlines that social services may provide assistance to a young person for as long as the authorities are satisfied that a young person requires assistance up until the age of 21. This upper age limit can be extended if the young person is in education and until such a course of education is complete. A basic outline of the form and nature of aftercare is set out in legislation—aftercare can comprise of visiting or assisting a young person, maintaining him in education, placing him in a trade, and arranging hostel or other forms of accommodation. (Carr, 2014).

Critics of the current law have highlighted the discretionary nature of aftercare provision and have argued for the replacement of the word “may” with “should” in Section 45. (Carr, 2014). In recent years a coalition from civic society came together as ‘Action for Aftercare’ and advocated for aftercare to be placed on a statutory footing. Focus Ireland launched an internet campaign ‘Right to Aftercare’ which ensured that 5000 emails were sent by voters to their local politicians and former Minister for Children, Barry Andrews. (Hayes, 2013). However, the Childcare
Amendment Act 2011 did not enshrine a legal right to aftercare with the argument that the legislative framework was a satisfactory entitlement for all care leavers (Focus Ireland, 2012). Shortcomings in the provision of aftercare services in Ireland have been highlighted in numerous reports (Hayes, 2013). For example, objective four of The Youth Homeless Strategy (2001) noted the importance of aftercare as being an integral part of the care system and that young people should be actively involved in the planning and preparation of their leaving care process (Hayes, 2013). The Ryan Report (2009) echoed these recommendations and stressed that aftercare should provide flexible support to young people exploring independence and should not be a discretionary service (Hayes, 2013).

The HSE made a commitment in their 2009 Service Plan to ensure that all Local Health Offices would operate a formal leaving and aftercare support service for young people with 100% coverage (Hayes, 2013). In light of this commitment a National Policy and Procedures Document for a Leaving and Aftercare Service has been developed and is currently being rolled out across the country (Hayes, 2013). The policy framework provides an opportunity to deliver a standardised service across Ireland, interagency and multidisciplinary workings are key themes within the document (HSE, 2012). Other key legislative part of aftercare refers to the proposed Aftercare Bill 2014 which will place statutory duty on the Child and Family Agency. This proposed legislation will strengthen the legislative provisions for aftercare by amending the Child Care Act 1991 to place a statutory duty on the Child and Family Agency to prepare an
aftercare plan for each eligible child. The purpose of the proposed amendment is to provide clarity around eligibility and the arrangements for preparing, reviewing and updating the aftercare plan. (Department of Children and Youth Affairs, 2016). However still to this current date of early 2016 the proposed Aftercare Bill 2014 has yet still to be fully passed and put into legislative practice.

Broad (1998) identified three models of leaving care. Firstly, a ‘social justice’ model is characterised by emphasis on empowerment and campaigning against oppression. The second model is the ‘social welfare’ model which focuses on individual care and welfare and, thirdly the ‘technical assistance’ model concentrates on training and skills to promote independence through employment. Commentators have stated that without the legal right to aftercare, new national policy guidelines do not offer much more than previous governments. It stands as a ‘hollow guarantee’ that requires sufficient investment to ensure adequate resources (Hough, 2012). The Minister for Children and Youth Affairs, Frances Fitzgerald has acknowledged challenges facing aftercare services including the need for consistency across all stages, the need for follow up with young people who may at first reject its services and the need to link with adult services as necessary (Dáil Éireann Debate, 2011). While not all care leavers will require a vast amount of support, the current level of intervention is still reported to be inadequate and under-resourced (EPIC, 2012).
1.5 Aftercare Transition to Adulthood:

“Young people leaving care have always had a hard road to travel as they struggle to make the transition from care to finding themselves out on their own in the world”. (Kennedy, 2009). The transition to adulthood is difficult for most young people, it is a time when young people make important decisions about their lives including their future education, career and living arrangements. Most young people have strong family and social networks to support them in these decisions. (Kilkenny, 2012) However, young people leaving residential care are often expected to make this transition abruptly and at a young age with no family or social networks to support them. The leaving and aftercare supports provided by the State are often not sufficient to provide for the needs of these young people leaving them at risk of homelessness, substance abuse, low levels of educational attainment and unemployment. (Kilkenny, 2012).

One of the critical reasons for these difficulties is that young people have to make the transition from residential care to independence very quickly unlike those growing up within family homes who usually get the time and support needed to make the transition to independence. When young people leave school they often move on to college or work and eventually leave the family home. It is part of people’s experiences in life that they move on to set up a home of their own and we all have some degree of anxiety at this time as it is a big step. However, for young people leaving care this is a much more daunting step. It is generally not a gradual process but happens suddenly when the young person becomes 18 years of age. (Kennedy, 2009). Most young people leaving care don’t
get a second chance. If their job or housing doesn’t work out, they cannot go back to care because they are now eighteen years of age or older and have to fend for themselves. In this situation the young person feels totally lost, isolated and do not know where to turn for support. Negotiating the social welfare system or housing system is difficult to navigate for anyone at the best of times. This is especially true for young people leaving care who have not had the support while growing up to learn many things that help people to cope with difficult situations. Young people can then very quickly fall on hard times and fall into homelessness. (Kennedy, 2009).

Homelessness has been an ongoing issue for Focus Ireland who are a registered charity that works to prevent people becoming, remaining or returning to homelessness. Focus Ireland’s vision is that ‘everyone has a right to a place they can call home’ and the organisation works to make this vision a reality for thousands of people every year. (Focus Ireland, 2016). In particular youth homelessness has been a significant part of the work of Focus Ireland since the early years of the organisation with support from both the City of Dublin Youth Services Board (CDYSB) and the HSE Children and Family Services. (Barry, 2009). A priority for Focus Ireland is to bridge the coming of age at 18 for young people out of home, a very traumatic experience for many young people faced with the withdrawal of HSE childcare support and the daunting prospect of adult homeless services. (Barry, 2009). A longitudinal study entitled “Left Out on their Own: Young People Leaving Care in Ireland” (1998 and 2000) examined the circumstances of a group of young people six months after, and again two years after, leaving care in
Ireland. The study documented failings in the child care system and identified that within two years of young people leaving health board care a quarter had been in detention centres and two-thirds had experienced homelessness. Since the completion of this study, the Government has put in place an aftercare policy which supports young people in the immediate aftermath of leaving care. (Barry, 2009). Changing government policy to give young people leaving state care a right to aftercare will support young people to live independently in a home of their own without the word homelessness ever needing to be part of their thinking. (Barry, 2009).

1.6 Current Research Around Aftercare?

Irish studies research into young people leaving care has identified a number of risk and protective factors that are particularly salient in this research context. (Hayes, 2013). The first and only national study to date on young people leaving care in Ireland was carried out in 2000 by Focus Ireland (Kelleher et al, 2000). Research findings on outcomes for young people leaving care in North Dublin by (EPIC 2012) also provide valuable insight into risk and protective factors that impact on care leavers.

Negative factors identified:

Lack of family support seems to be another important risk factor to consider when discussing care leavers transition to adulthood. In the research, the care leavers attempt to live independently often led to chaotic lifestyles. While approximately one third of the care leavers in both the Kelleher et al, (2000) study and EPIC, (2012) North Dublin
study returned to live with their families, two thirds of care leavers in the 2000 study left care to live independently. Results show that half of this figure had difficulties with accommodation six months after leaving care. (Hayes, 2013). It was also found that 68% of the target population experienced homelessness within two years of leaving care. Within two years, 30% of care leavers also had addiction problems and 14% were suspected of being involved in prostitution in the national study. (Hayes, 2013). The research carried out in 2012 found that 30% care leavers had experienced three or more accommodation moves within a 21-month period. It would therefore appear that instability in accommodation and lack of family support increase care leavers’ vulnerability to further social issues. (Hayes, 2013).

Lack of educational qualifications amongst care leavers appears to be a major risk factor for these young people when transitioning to adulthood. The main findings in the Kelleher, (2000) national study drew attention to 55% of care leavers leaving the education system with no qualification whatsoever. In the EPIC, (2012) North Dublin study, the Leaving Cert or its equivalent was the highest educational attainment reached by 46% of the target population. Additionally, half of this figure reported gaps in their schooling due to placement breakdown. (Hayes, 2013). Despite a ten-year gap in these two studies, findings demonstrate almost half of the care leavers’ population leave care with a low educational attainment. This may significantly reduce care leavers employment opportunities and ability to financially support themselves once they leave the care system (Kelleher et al, 2000; EPIC, 2012).
Another significant risk factor for young people leaving care is the high level of reported mental health issues. (Hayes, 2013). A third of the sample in the 2000 study was identified as having disability or mental health needs. Furthermore, 20% of young people were identified as having mental health needs and they were not receiving counselling for same in the 2012 North Dublin study. Coping with mental health problems without professional counselling may seriously compromise care leavers ability to cope effectively in making the transition from the support of the care system to independent living. (Hayes, 2013).

Encouraging Factors emerging:

The nature and length of final care placement also emerged in the research as an important factor. The EPIC, (2012) research findings found that positive outcomes were more likely when young people had been in foster care during their last placement. Placement stability of at least five years was also an important factor as well as remaining in the placement after the age of 18. (Hayes, 2013). The Kelleher, (2000) study also showed that young people who had made a successful transition from care, tended to have educational qualifications, experienced placement stability and continuity in terms of planned transitions. (Hayes, 2013). In addition, both studies showed that having just one reliable adult to depend on for guidance and support was a significant protective factor for care. The 2012 study found that 83% of the sample group asserted that they have at least one adult they could turn to for advice and support. (Hayes, 2013). Examples included foster carers, siblings, parents, grandparents and aftercare workers. The group in the 2000 study also
reported that having intensive support from a social worker, a residential key worker or a foster carer made a positive impact. (Hayes, 2013). National research also asserts that successful transition is influenced by the quality of preparation in leaving care and support received within the first six months. International research has shown that many care leavers feel unprepared for the transition into independent living (Centrepoint, 2006). Doyle et al (2012) notes that evidence suggesting young people’s feelings of readiness at the point of leaving care in the Irish context is mainly anecdotal. A small scale HSE study in (2001) found that many felt unprepared with inadequate support and advice in relation to skills, training and employment. International research evaluating aftercare services highlight that they have a positive impact in terms of providing stability in accommodation, developing social networks and self-esteem for young people. Furthermore, international studies informed by the through-care model of service provision indicate that outcomes for care leavers converge to be more compatible with their peers after two years of leaving the care system (Cheung and Heath, 1994).

In addition, protective factors that support care leavers transition, research on evidence based practice highlight a number of considerations for best practice. Adopting an approach to practice that is young person led and social work planned has been identified as best practice. (Hayes, 2013). Protective factors include addressing pre-care issues and demonstrating interest and positive engagement. Continuity in the social work/young person relationship as well as promoting meaningful contact with siblings and birth parents are also identified as protective
factors. (Hayes, 2013). Additionally, providing age appropriate opportunities throughout the care experience to develop social networks and self-dependency skills is also beneficial. International research on formal mentoring programs for young people in care has been found to improve social skills through providing a supportive and trusting relationship, a role model and assisting in developing independent living skills. (Hayes, 2013). Following one year of participation post care, young people exhibited an improved ability to trust adults and reported enhanced self-esteem (Spencer et al, 2010).

Wiseman (2009) notes that in order to be able to realise when appropriate to ask for help care leavers need constant reinforcement. Research by Stein (1997) highlights ways of meeting what he refers to as the core needs of care leavers. These include accommodation, social support, finance and careers. In terms of accommodation, a number of options are discussed in the literature including supported lodgings, staying on in care, hostels with support, foyers and independent tenancies. Offering choice and information on type and location of accommodation and having a contingency plan if agreement breaks down, has been evaluated in terms of what works for care leavers. With regard to continuing education, protective factors of stability in care, assessing capabilities and gaining support and encouragement from carers and workers are important. Stein (1997) also notes that in order to be effective, aftercare services need to provide information, counselling, group work support and drop in facilities.
1.7 Conclusion

The main aim of aftercare for care leavers is to provide the necessary assessment and transition which includes vital social and financial support for does leaving the care of the state to be able to build a prosperous, bright future for themselves however, through the current literature it paints an overall negative outlook on the provision of aftercare for care leavers in Ireland.

This negative outlook starts back from the provision for providing care for children within the care of the Irish state and the abuse cases which have been highlighted in recent years through the Ryan Report 2009. The state back then failed the most vulnerable children who were placed in their care and today through the current literature it seems to, that when the majority of children are leaving care they are also about to be failed by the state because of the lack of provision which is not supported through legislation either as section 45 states that the state may provide support to care leaver this therefore meaning that the state is not obliged to provide support unless under certain circumstances. The only national study to date on young people leaving care in Ireland was carried out in 2000 by Focus Ireland (Kelleher et al, 2000). That study is now sixteen years old and on average over one thousand children leave care every year. (Tusla, 2015). Through the literature it is evident that care leavers are also faced by a number of challenges such as teen pregnancy, homelessness, addiction and no support after leaving care and this situation seems to be a domino effect for majority of children who leave care.
The following chapter will discuss the methodology used for the research study.
SECTION TWO: METHODOLOGY
SECTION 2: METHODOLOGY

2.1 Introduction:

There are two main approaches to collecting data: quantitative and qualitative. For the purpose of this research project it is important to consider the merits and limitations of both before deciding on a particular approach.

2.2 Justification for the Research:

The researcher decided to carry out this research regarding social care workers’ experiences of the transition to aftercare for care leavers, which is built from an interest around the whole aftercare sector in Ireland from the researcher. Also through producing the literature review for this research study and exploring the research around aftercare there is clear evidence that the chosen research lacks in-depth and vital research which therefore highlights a key gap in the literature around aftercare.

2.3 Research Design:

Quantitative research is information that can be collected, counted and calculated. The quantitative research method can be constructed as a research strategy that emphasises quantification in the collection and analysis of data. (Bryman, 2004) It emphasises quantity and attempts to gather relatively large amounts of information. This method can be totalled and various mathematical methods can be used to assess the trustworthiness of the data.
Therefore, the target information must be measurable and definable with definitions shared mutually between respondents. Research methodologies associated with this approach include quasi and natural experiments, and surveys analysed statistically (Share, 2009).

The qualitative method emphasises quality, attempting to gather high quality amounts of information. It is descriptive and used in case studies. It is defined as a ‘research strategy that usually emphasises words rather than quantification in the collection and analysis of data’ Bryman (2004: 19-20). Qualitative research is a naturalistic interpretive approach that explores a subject matter but does not measure that subject matter in terms of quantity, frequency or intensity (Norman K. Denzin, 2011).

It was decided by the researcher and her supervisor that a qualitative research approach would be most appropriate to obtain the necessary data and information for this particular research area. The research would be gained through interviews conducted with social care workers questioning them about their experiences on the transition to aftercare for care leavers.

The interviews were conducted using a semi-structured format as this allowed the interviewee to speak openly and freely about their views and experiences. Bryman (2004) suggests that semi structured interviews allow specific information on the research topic to be elicited, while affording flexibility and freedom of expression to both interviewer and interviewee. Bryman (2004) continues to explain how it allows the interviewer to take a form of
seeing through the other person’s eyes, referring to how qualitative research gives participants the opportunity to reveal their perceptions and experiences rather than the more controlled and reductive procedure of quantitative methods.

The researcher felt as though the qualitative method would be the most appropriate type of research method as it allows the participants to share their own knowledge, experiences and life events with the researcher, painting an in-depth picture of the research topic for the research and the readers. Through conducting the qualitative interviews, the research used a number of tools such as social cues and listening to the tones of participants to gain more information.

The first section of the interview questions referred to what a typical aftercare assessment and transition consisted of. The second section asked what was the challenges in relation to aftercare from the social care worker’s perspective. The final section examined the social care worker’s perspective and insights into the transition from care to leaving care.

2.4 Research Materials:

Before the interviews commenced an information sheet was distributed to the participants so the participants were informed regarding what the interviews were about and also indicating that the interviews would be recorded if permission was given by participant. (See appendix 1). Bryman (2012) recommends the use of a recording device when carrying out research as it can prove helpful when
analysing and transcribing the collected information. The researcher recorded the interviews by the use of a Dictaphone but before interviews started a consent forms were obtained from participants regarding permission for the interview to be recorded (See appendix 2). A schedule of questions was drawn up which comprised of questions around the research topic and the researcher aims and objectives which would assist the interviewer when interviewing the participants (See appendix 3).

2.5 Recruitment of Participants:

The researcher approached a number of private organisations (who work with children in care) in her locality through an email informing the organisations about the research being carried out. After a number of days one particular organisation responded and agreed to allow the interviews to be held with five of their social care workers who work with children leaving care. The manager became a gatekeeper and an information letter was distributed to staff a week previous to the interview date. The information letter contained details of the study, the researchers name and number, and also a reassurance of confidentiality of any information provided during the interviews the gatekeeper informed all staff of the research and asked all staff to read the information sheet clearly. Then the gatekeeper asked for five volunteers to volunteer to participate with in the interviews.

A pilot study was conducted weeks previously with fellow classmates of the researcher. The reason for the pilot test was to ensure the questions being asked were clear and easy to understand and to eliminate any questions which
sounded repetitive also too remove any questions which may have come across leading in anyway.

The in-depth interviews were conducted in April 2016 with five social care workers: two female social care workers and three male social care workers, all of which had a social care degree, while three had a master’s qualification. They all served a number years working with children leaving care. In line with confidentiality during the results the interviews will be referred to the following manner:

Participants:
1. Social care worker one.
2. Social care worker two.
4. Social care worker four.
5. Social care worker five.

The interviews were conducted in the organisation’s office and all interviews were conducted on the same day. This was more convenient for the social care workers as they were either coming off shift or coming on shift. Each participant re-read the information sheet and they were all given a consent form to read and sign. The interviews were all recorded with approval given by all participants. The interviews all lasted an average of forty minutes each.

2.6 Ethical Issues:

Carrying out any dissertation has a number of ethical considerations particularly when the research being carried out is regarding the social care sector i.e. residential care or aftercare. For the purpose of the
interviews the researcher planned to interview social care workers who work with care leavers rather than trying to get ethical permission for children under the age of eighteen years old transitioning to aftercare.

With all research there is a liability to protect the dignity and privacy of all participants. The interviewees were given information about the research as well as the interview process. They also gave voluntary consent to participate and all five social care workers gave verbal consent, as well as signing consent forms for the interview to be recorded. The information sheet also stated that if there was a question or questions the interviewees did not want to answer, we could move to the next question. The name of the organisation or any of the five interviewee’s full names and identities would not be used in the dissertation only for the purpose of the ethics application form. This guaranteed confidentiality and anonymity, however, it was also stated in the information sheet that any information which was discussed and was harmful to themselves or others would have to be referred on. The recorded interviews were only used by the researcher and by her supervisor if need. The researcher, however, was the only person who transcribed the interviews. Both the recordings and the transcripts were locked in a filing cabinet to secure confidentiality.

2.7 Limitations:

Conducting qualitative research poses a number of limitations in itself. Griffin (2004) produced an article on the limitations of qualitative research, and stated that “Limitations of qualitative research include the expensive
and time-consuming nature of the collection and analysis of research information; the reliance on a relatively small number of participants; and the reluctance of many academics, practitioners and policy-makers to take qualitative research seriously”. From Griffin (2004) one of her main limitations refers to the reliance on a small number of participants. The researcher also felt that this was a limitation in her research also, as she only interviewed five social care workers out of hundreds of social care workers who work with children leaving care in Ireland every day. The researcher’s results are only based on a very small sample and only offer a perspective of the aftercare system from the experiences of social care workers for care leavers even if the care leavers themselves were interviewed through a qualitative research they research would be off a small scale because as of end of March 2015 Tusla (2015) stated that there was “1,720 young people aged 18 to 22 years inclusive were in receipt of an aftercare service”. To conduct a national research into the aftercare system in Ireland with such a large scale sample quantitative research may be the best option to receive the largest amount of information from the largest amount of people.

2.8 Conclusion:

Through this chapter the researcher has discussed the methodology of her dissertation referring to the gathering and analysing of the research data collected through interviews. This chapter included the justification for carrying out the research, research methods, and the
recruitment of participants, ethical approval, how the data was analysed and finally limitations to the research.
SECTION THREE: RESULTS
SECTION 3: RESULTS

3.1 Introduction

This chapter describes the results of the qualitative study which was conducted to explore the experiences and perspectives of social care workers’. This chapter will present the finding which were based around the research aims, objectives and recurrent themes which emerged from the collection of data through interviews. The findings will be displayed through the use of illustrated narratives. The first research questions focused on the aftercare assessment and transition and what they typically consist of. The second research questions looked at the challenges and barriers care leavers face as taught by the social care workers. The final group of research questions focus on the social care workers’ perspectives on the transition from care to leaving care and the social care workers views of the aftercare system.

3.2 Data Analysis:

Each interview was transcribed into individual documents by the researcher. The research then read and reread the transcripts over and over again picking out and highlighting key themes identified in each document. The transcript became an initial coding of data. According to Lockyer (2004) coding is an “A systematic way in which to condense extensive data sets into smaller analysable units through the creation of categories and concepts derived from the data”. Bourque (2004) also refers to coding as “the process by which verbal data are converted into
variables and categories of variables using numbers, so that the data can be entered into computers for analysis”.

From the coding of data, the answers and experiences of the social care workers were analysed through a process called narrative analysis. Bryman (2004) describes narrative analysis as “an approach to the analysis of qualitative data that emphasises the stories that people employ to account events”. After each section of the interview responses were analysed and divided into a number of main themes.

3.3 Emergent Themes.

From conducting the interview there were three main themes identified. The focus was on the themes which reoccurred and themes which were related to the research. The themes identified are highlighted in the following headings with separate sub-themes under each theme.

3.3.1 What does a typical aftercare assessment and transition consist of?

- The age at when an aftercare transition starts.
- Key legislation.
- Family’s involvement during the transition.
- Typical aftercare services available.
- How do the care leavers feel in preparation to leaving care?
- Does their education attainment level affect them in preparation for leaving care?
3.3.2 The challenges and barriers in relation to aftercare.
- How are these challenges overcome?

3.3.3 The social care workers’ perspectives on the transition from care to leaving care.
- General outcomes for care leavers?
- Follow up with care leavers a year on.
- Personal view of aftercare.
- Negative.
- Positive.
- Key recommendations.

3.3.1 Theme 1: What does a typical aftercare assessment and transition consists of?

Under the first theme many of the interviewees had the same detailed answered as the next with mostly similar answers for each question.

*Can you tell me what a typical aftercare transition consists of?*

**Social care worker one answered:**

*Usually an external aftercare team comes in here and helps with the transition however we are all still involved…when the kids are living here for however long you have them, they will be doing life skills, try and get them ready for aftercare you know like simple stuff like you wouldn’t even think off like using the washing machine, dryer or making dinner doing life skills with them and try*
and get them to do them every week and try and equipped them with the skills to live on their own.

Social care worker five stated:

Okay so an aftercare transition consists of an aftercare worker being appointed for the young person ideally at around 16 years of age that’s the best plan but it doesn’t always work out that way but that when they should be appointed an aftercare worker. The aftercare plan then is taken from their care plan and it looks at the skills that they have and what needs they have and its planned out in conjunction with ourselves here, the social worker and the aftercare worker it looks at the young person’s future plans and need and what will be best for them when they leave care.

Typically, at what age does an aftercare transition start for the young person?

The same answer was obtained by all five interviewees regarding this question in this regard.

Social care worker two stated:

Ideally six months prior to their 18th birthday so 17 and a half or even 17 years old sometimes I’ve seen this not even happening and sometimes I’ve seen the transition starting to soon. Legally the goal would to have the child out of care when they are 18 years old there are factors that can hinder or be even for the better that the child doesn’t leave at 18-year-old so they have learning difficulties etc.
Social care worker three suggested:

It usually begins at around 17 and a half but it depends on the child and when they have come into care sometimes it may begin around 16 or sometimes it may begin 2 or 3 months before they turn 18 as they may have only enter care at 17.

Which legislation do you use as a guideline?

Once again each interviewee referred to the same type of answer as their work colleges.

Social care worker four answered:

The childcare act, Children’s first guidelines, The National standards for children are all used here in this organisation. The organisation has their own policy and procedure regarding to aftercare and aftercare policy we also have a policy and procedure in terms of teaching life and living skills in which we would teach them how to cook, clean etc. also budgeting money is a huge skill also so we would have a procedure around that too…

Social care worker two stated:

All residential organisations follow the children’s first guidelines and the national standards for children that our bible and regards are our own organisation there are different policy and procedure… through experience staff have their own ideas of what works and what dose not with children in care. Through both experience and legislation section 45 there can be a nice balance between the two of them.
Are the families involved during the assessment and transition? If so how are they involved?

Social care worker five clearly stated:

If the family are involved all along their care placement they should be involved in some part of it if a young person is moving home the family should be 100% be involved and taking part were its in best interests of the young person to have the family involved they will and if it’s in the best interest that they can’t be involved they may not be because they may sabotage and move them in a different direction.

Social care worker four explained:

It all depends on the relationship the young person would have with their family obliviously it would be encouraged that the family would take part in it but unfortunately not all children would have contact with their family but definitely if the family is a positive role in it definitely and as well as that it’s the child who has a good relationship with the family that they might try and provide the aftercare accommodation near the family home.

What are the typical aftercare services available for the care leavers?

Social care worker four was very descriptive in her answer to this question she describe the services available:

One of the main social supports for the young person would be EPIC\(^2\) we would always inform them of the

\(^{2}\) Empowering People in Care (An organisation in Ireland which helps children currently in and leaving care).
young person preparing for leaving care and there also a number of local social supports who would come out and meet the young person and help and advise them as best they can. In regards money there are grants allocated to care leavers participating in education and training and also social welfare would be available. Semi-independent living is also a great service where by staff would check in on the young person every day and would have an apartment nearby. Support lodgings is another support of the young person which refers to foster families having a separate flat house from the family and the young person comes and goes as they please but they do have the foster family there to fall back on it’s a really good idea for a young person who is afraid or scared to live out on their own especially if they have been in care nearly all or most of their lives.

**General from your experience how do the care leavers feel in preparation to leaving care?**

**Social care worker two said:**

It’s a very difficult time for them they are nervous, sad and a number of emotions, children I have worked with have been in the care system for X amount of time they will have built up their own defence mechanisms to anything they do not want to put up with and then a transition like this so huge, I know myself they don’t want to show how their feeling to those around them they want to act as though they are ready to leave and be an adult. It’s a learning experience for staff too to learn how to deal with it for the next time for the next child leaving.
Social care worker one answered:

Again its very subjective some children say they are desperate and can’t wait to get out of here well that’s what they be telling you anyway (laughing) some are eager to leave there is no doubt about that but majority are anxious like you have to think about it there is three staff here at all times the children are never left on their own so there going from that situation to aftercare like that last girl was an exception with a support staff living with her but majority get their own accommodation and would be on your own.

From working with care leavers does their education attainment level affect them in preparation to leaving care?

The interviewees answered this question similarly once again however from their answered it was evident that many of the children in care do not stay in education during care and after leaving care also.

Social care worker one answered:

well majority of the children I have worked with hated school and didn’t have the ambition for further education, the last lad we had living here just could wait to go on the dole and had no interest in education or a job…

Social care worker two stated:

I’ve worked with a lot of children since I have started and I can only remember two out of around forty that would have been in mainstream education…we can only encourage them to a certain point they should be going to school they really should but if they don’t want to go they
don’t have too and that’s a bad thing and in light of that’s going to have after effects.

Social care worker four said:

If the children had the education it would be great because they could move to the same area, they would be attending education and they would have that as a huge support and friends too but in most cases the children would not have much education or training because they don’t want to be attending it and they just don’t like it.

3.3.2 Theme 2: The challenges and barriers in relation to aftercare.

Similarly, the same answered were repeated by the interviewees but all with detail answers.

If any what are the most common challenges, you have seen care leavers face.

Social care worker four was very clear and clarified what the other interviewees had also mentioned in there’s:

The fear of being on their own is a huge challenge for them, having to deal with their weekly budget and their own allowance having to manage and be in charge of it like especially for young lads like if they are in an apartment on their own they would have to budget their money for shopping etc. I think that when the children in care they think there is this money tree and they will always have money their but then when they move out they have a set weekly allowance and when it’s gone its gone like sometimes the kids have great ambitions of
getting a car etc. but they don’t realise they will have to work and save of things.

Isolation is another huge challenge especially for children who may have any emotional of learning difficulties and they being out on your own, I’ve worked with a couple of young people who are quite anxious to be around crowds and people and then moving to a new area were they may not know anyone it would be a fear for them too just be in isolation away from the world because of their anxiety many children who are in care who have dropped out of college would also be somewhat literate and have trouble reading and writing this would be a huge problem for them out living on their own if say bills etc. come in and they can’t read them.

Social care worker two on the other hand looked at neglect being a huge emotional effect for the young person in care and being cared on into aftercare.

The biggest thing with the children we would have been neglect, forgotten about by their family their close family because they are here they don’t have their base there is no consistence there with inconsistent people and that’s the sad thing too so that will have after effects on everything else so they won’t care about who their doing the likes of their homework for… ultimately the shear rejection they would have experienced down through their lives is a huge factor in my own opinion everything else just say challenges would steam from that rejection weather it looks obvious or not been neglected and rejected it’s a huge barrier for them creating emotional and psychological issues.
**How are these challenges overcome?**

Regarding how to overcome the challenges faced by care leavers nearly each interviewee had their own solution.

**Social care worker one suggested:**

*Well as I said we start life skills here early so maybe look at more skills around budgeting and saving money buy something they need want i.e. car also giving them more of their responsibility when then are in care in preparation for them to leave.*

**Social care worker two suggested:**

*It’s very difficult to overcome what isn’t possible by that I mean the families have rejected the child in their early years nothing on this earth can take that away nothing can give back that time nothing can fill in those missing years nothing can despite maybe in the future through new ties in time but time is something that just can’t be given back…*

**Social care worker three suggested:**

*Well personally I think every child who moves out should be assisted with supported living for between six months to a year but they are still given the responsibility to live in dependably on their own and they will know their own expectations while still being supported if they are needed the staff will be there for the first few months.*

**Social care worker four suggested:**

*I suppose that even for the aftercare transition would start earlier at 16 or 16 and a half, also for the kids to take part in more living skills here in the house and engagement*
with their own life through more responsibility such as going to bank lodging, saving and withdrawing money.

Social care worker five finally suggested:

Well engaging with an aftercare worker is the most positive aspect of them because the aftercare worker will direct them in the direction of community welfare officers and accommodation all those things and I suppose it’s that thing of young people not wanting an adult with them and they think they can do it all by themselves so sometimes they have to fall before they can get back up and the ones who fall and get back up are maybe stronger than the ones who don’t fall at all you know?

3.3.3 Theme 3: The social care worker’s perspectives into the transition from care to leaving care.

This theme however, include more personal and individual thoughts and experiences through personal views, positives and negative if any of the aftercare system.

What are the general outcomes for care leavers leaving care?

Social care worker one stated:

In my experience I’ve worked with a good few children who went through aftercare I’ve seen very few success stories its annoying and destroying sometimes when you have worked with a child for maybe two or three years maybe more and they turn out to be great kids but then as soon as they leave care their supports get less and their coping mechanism gets weaker. I’ve had a number of calls from prison also from hospitals and once I received an email telling me that one of the young people I would have worked with closely had passed away from a drug
overdose like when I was in college we were told to keep our job and personal life separate but receiving that email was like a huge kick to the teeth and it really pulled at my heart strings and that young person is not the only one who leaves the care system and ends up ten feet under a few months later because of the huge change to their lifestyle and the lack of supports available to them.

Social care worker two also had a very similar answer:

Any success stories (Laughs)… My own experience knowing the kids I’ve worked with in my time as a residential childcare worker very few success stories there is two of the kids I would have worked with that very soon after they left care they passed on in the last couple of years through addiction and suicide, I also know of others kids I worked with are now homeless, many who have left are in and out of prison which is unfortunate… majority of children who live care end up in Cloverhill on the streets or even dead. It’s not right.

Have you ever done a follow up on the care leaver one year later from them leaving care?

Social care worker five stated:

Yeah I would have done exit interviews with some of your young people who have left care unfortunately going back to the negative side of things I’ve done exit interviews in prisons, homeless shelters but also in some positive places in their own apartments so we would try and do some follow up with most who leave us here.

Social care worker three said also:
yeah sometimes the young person would ring back to the house and ask for which ever staff they got on with best one particular child who left here would call back to house looking for DVD player he forgot to bring or even looking for clothes he had and couldn't find basically he just wanted to try and keep the contact with ourselves here and obviously be are all human sure we all love to go home and find out what’s been happening if we haven’t been home in a while.

*Have you ever been involved or heard of the idea of group work supports or a drop in facilities for does who have left care to come back for help?*

**Social care worker five answered:**

Not an official one no but see it’s difficult because most young people leave when they are 18 and if they are 18 they are an adult coming back into a children’s residential home there is kind all sorts of stipulations around that and what risk they may or may not pose, what they might or might not bring with them and what influence they might have on the young people living here so generally if were to meet a care leaver we would organise to have a coffee in town you know there are stipulations around coming back to the house.

**Social worker two stated:**

Personal no I haven’t heard of an official drop in facility or even group work supports however I would imagine it would be a huge social support for the young person
talking to others say who have gone through aftercare and know what happens etc.

**What is your personal view of the standard of the aftercare system?**

**Social care worker one answered:**

There is all this money pumped into resources to get the child to 18 through care and then at 18 it’s like right you’re on your own its mad how you put so much resources into these children in care and they all these resources are pulled away for majority of children however you know not all cases are negative.

**Social care worker three stated:**

I know it has been improving recently which is very positive but I think that it’s very sad to hear that is so many young people leaving care and moving into hostels, becoming homeless and becoming addict’s and it’s so destroying seeing a young person you have done so much work with them and you know they are after having a very difficult life and they you see that’s the outcome for them unfortunately.

**Social care worker four said:**

I have seen a lot of things I’ve seen aftercare not being started in time far too late maybe a two or three months before their 18th birthday a lot of cases the child’s needs are not properly examined and therefore the right supports aren’t allocated. I also feel like many social workers expect the children to mess up because most children who leave care do.
Finally, social care worker five:

*Overall I think its struggling its always struggled not because the services aren’t there I think they disappeared over the last number of years because of financial cut backs and what not but they are slowly coming back into play…*

*From your own experiences what do you think are the positives of the aftercare system if any?*

Each interviewee gave nearly the same positives as the other interviewees all of which having the same view.

**Social care worker five said:**

*Two huge positives are services such as EPIC and Focus Ireland who have done so much research and awareness around aftercare for young people in care and for social care workers also the teaching on life skills is huge for the young person too prepare to leave care.*

**Social care worker four stated:**

*I have also seen a few and that’s a very few positives but that’s when the young person is willing to engage and has their head screwed on properly mostly with girlies who know what they want and may can fight for it themselves they are that determined and have an overall good attitude. I think it has come on in last decade aftercare and its awareness through the likes of support and research done by EPIC.*
From your own experiences what do you think are the negatives of the aftercare system if any?

Each interviewee referred to the lack of funding and resources and the young person lack of engagement to participate in the aftercare transition.

Social care worker three stated:

Lack of resources and funding is a huge problem in the aftercare sector it really relies on the young person’s ability to engage in the service and I think a lot of young people as I have said they just want to go get out of the care system to being in dependent.

Social care worker four refers to the legislation:

I don’t have great faith in the aftercare system personally I think it goes back to the legislation in section 45 it’s not strong enough instead of saying the state may provide support it should state the state shall then that means state has to provide support to all children leaving their care.

Q. Are there any changes you would recommend to the after care system in Ireland?

Social care worker one said:

More funding put into the aftercare sector but yet it also depending on the child and their social care worker as some are better at fighting and getting funding and knowing contacts which is best for the children they are looking after I don’t know though I wish I had the magic
answer as it really needs to be highlighted more this sector through research.

Social care worker two stated:

I would recommend that the social service department Tusla or the government encourages more interagency cooperation where by the aftercare team who are delegated to the young person leaving care are obligated to link in with the care team not just on the phone or email which majority of communication is made these days and to meet in person with the child and the care team…

Social care worker three answered:

I really think the supported living is great I’ve seen it work so many times than not working more funding also and support are key I also think more employment of aftercare workers who really know their knowledge of the aftercare system would be huge step to moving forward.

Social worker four said:

I suppose starting the transition at an early age as early as possible I think and giving them every opportunity to make this next part in their life be a positive and prosperous future…I think the right assessment of their needs and giving them all their options and keep working with them. I also think regular contact as you have said in one of your questions maybe a drop in place for them to go to and talk with other who have gone and going through aftercare.

Finally, social care worker five stated:
I would recommend young people to engage with the whole aftercare process, plan their own aftercare and have an understanding of it and engage with services such as EPIC would be one of the main things. Also the allocation for more funding and aftercare workers.

3.4 Summary of Findings

Overall under the first theme there are a number of sub-themes which were asked to give the research a clear view of what is included in the aftercare assessment and transition such as the age at when an aftercare transition starts, key legislation being used, if the families are involvement during the transition, what are the typical aftercare services available, how do the care leavers feel in preparation to leaving care and finally does the care leavers education attainment level affect them in preparation to leaving care. Each interviewee gave similar answers to each question however, from the first theme it has been explained what a typical aftercare assessment and transition consists off as well as identifying that most children who are preparing to leaving care have very little education attainment as most have dropped out from participating education.

The second identified theme provides evidence that there are a number of challenges or barriers faced by care leavers. Many challenges include material things such as not having education, accommodation, finances etc. also a number of personal challenges such as neglect throughout their life effecting them moving on in their own life, isolation and the fear of being on their own. However, all interviewees have given a number of resolutions to these
challenges such as participating in life skills during their care placement i.e. cooking, cleaning etc., moving on with future hope and building good ties with other people in their life to resolve neglect, supported living instead of living totally independently on their own, starting the transition early as possible so then have enough time to prepare to leave care and finally engaging with aftercare and aftercare works to have the best effective aftercare plan set out.

Finally, from theme three there is clear evidence that the social care workers have a negative outlook of the aftercare system overall because it has been a failure to children they have all worked with. Many of these children they talk about have ended up homeless, back taking part in addiction habits and some even ended up dead which is a shocking discovery. However, all the interviewees mentioned of how the likes of EPIC and Focus Ireland have become a positive aspect to the aftercare sector through their research they have brought light to the aftercare sector and are also a key social support for care leavers. Many of their recommendations refer to more funding and resources which all depends on the governments funding for the child care services also one interviewee recommendation refers to legislation of section 45 of the child care act which refers to the state may provide support to children leaving the care of the state rather than the state shall provide support. Currently the legislation on aftercare does not place obligation on the state to provide support to every child who leaves care this recommendation is a key to changing the whole aftercare system in Ireland.
SECTION 4: DISCUSSION

4.1 Introduction

This chapter discusses and interrupts key findings of this research study and also relates the emerging themes to the literature on the aftercare sector. Finally, an evaluation of methods and will be provided with some recommendations for further research into the area of aftercare.

4.2 What does a Typical Aftercare Assessment and Transition Consists of?

The Department of Children and Youth Affairs, (2016) identified key factors in providing an overall appropriate aftercare assessment and care plan that should take place in consultation with the young person and key individuals prior to leaving care, the social worker, aftercare worker, young person, carer and others identify what the young person will need for support and how this will best be met. (Department of Children and Youth Affairs, 2016). The findings from this study also suggested that all five social care workers had a similar understanding of what a typical aftercare assessment and transition consisted of however, the allocation of an aftercare worker to each child was not always evident. The researcher would be of the belief through the literature and from her study of findings for an effective typical aftercare transition to work in the favour of the child an appropriate child centred assessment must first be in place including the necessary supports and people to achieve an effective transition for the care leaver
however, it is also essential to have an aftercare worker allocated to all care leaver’s.

Tusla, (2016) stated that the preparation for leaving care starts when a young person enters into the Care system but formal preparation should begin no later than the young person's 16th birthday and the approach to aftercare is informed by the wishes and agreement of the young person. (Tusla, 2016). The findings from this study suggested that there is no set age for when the preparation for leaving care starts it is individualised to each child and their situation. The findings are comparable to Tusla’s, (2016) statement. The timing of when a child enters care is a key to the preparation for the child to leave care; if a child only enters at 17 years old they only have a year to prepare. Age of preparation is also determined for each child on their individual level of need and maturity. Preparing to leave care can either start to early or start too late which can be a traumatic experience for the care leaver. This too is a similar priority for Focus Ireland who work to help young people coming out care which is a “very traumatic experience” for many care leavers’ as they are faced with the withdrawal of HSE childcare support and the daunting prospect of adult homeless services. (Barry, 2009). Therefore, the necessary amount of time is needed for the care leaver to prepare for an effective transition. “Ideally six months prior to their 18th birthday so 17 and a half or even 17 years old sometimes I’ve seen this not even happening and sometimes I’ve seen the transition starting to soon”.

The Department of Children and Youth Affairs, (2016) suggested a number of support’s that are essential in regards the aftercare assessment and transition which
includes education, financial support, social network support, and training. One of the key features of aftercare support is to advocate on behalf of young people to promote their development as a fulfilled adult in their community. The most important requirements for young people leaving care are for secure, suitable accommodation, access to further education, employment or training and supportive relationships. Aftercare provision incorporates advice, guidance and practical support. The assessment of care leaver’s needs is paramount to assess which supports should be put in place for the children. The finding of this study are very comparative to the Department of Children and Youth Affairs, (2016). The results identified EPIC as one of the main social supports for care leavers. In relation to financial support there are grants allocated to care leavers participating in education or training as well as the social welfare being available. Accommodation for care leavers can also be provided through fully independent living, semi-independent living where staff would check on the care leaver everyday as well as supported lodging were the care leaver would live with a foster family however, they would have a separate flat or house to family and would have the family there for support but they would live on their own. Through the literature and the study’s findings there are a number of social and material supports which can be put in place for the care leaver however, majority of the time the care leavers assessment of needs are not adequate enough to provide each care leaver with the necessary supports.

Kennedy, (2009) refers to “Young people leaving care having always had a hard road to travel as they struggle to
make the transition from care to finding themselves out on their own in the world”. The transition to adulthood is difficult for most young people, as it is a time when young people make important decisions about their lives including their future education, career and living arrangements. (Kennedy, 2009). In the same way as Kennedy, (2009) the researcher questioned how young people leaving care feel in preparation to transition to adulthood. The research findings included that care leaver’s experiences numerous feelings and emotions such as being nervous, sad and suffering anxiety when leaving care. “It’s a very difficult time for them they are nervous, sad and a number of emotions are expressed…some are eager to leave there is no doubt about that but majority are anxious…”. The care leavers feelings and emotions should be assessed before, during and after their transition to adulthood. This awareness around care leaver’s feelings may provide for a counselling service as the care leaver’s are experiencing a type of bereavement or separation because they are leaving the place they call “home”. The identified awareness around the care leaver’s feeling and emotions may also provide for a more mental health awareness for young people leaving care to be able to talk and deal with their feelings rather than turn to drugs or alcohol or even suicide in the worst circumstances.

4.3 The Challenges and Barriers Which Face Care Leavers

Ireland’s first and only study to date into young people leaving care in Ireland was carried out by Focus Ireland in
2000 by authors Kelleher et al, (2000). A number of negative factors were identified regarding young people leaving care. The lack of educational qualification was a huge barrier for care leavers. Kelleher et al, (2000) found that 55% of care leavers leaving the education system were leaving without any qualification. Twelve years later, in 2012, EPIC carried out a study which found that the Leaving Cert or its equivalent was the highest educational attainment reached by 46% of care leavers. Despite a twelve-year gap in between the two studies, the findings show that almost half of the care leavers’ population leave care with a low educational attainment. The research would also agree with Stein (1997) continuing education as a key core value for care leavers. Through the researcher’s findings of the study, the same theme also emerged from all five social care workers who suggested education as being a huge tool for care leaver’s to have however majority of children in care don’t want to go to school and end up dropping out of school. “I’ve worked with a lot of children since I have started and I can only remember two out of around forty that would have been in mainstream education…”. Education can be the key to success for young people especially for care leavers. Education can provide a number of opportunities such as a qualification, jobs and even an opportunity to travel. Education also provides a social network for care leavers and a chance to build new stable relationships and friendships. Through the research it is clearly evident that more support and funding needs to be allocated to try and facilitate children in care to attend education and therefore in turn obtain the leaving certification and then move onto higher education i.e. college or training.
Both Kelleher et al, (2000) study and EPIC, (2012) identified high levels of reported mental health issues for young people leaving care as another risk factor. A third of the participants in the Kelleher et al, (2000) study were identified as having disability or mental health needs. Also 20% of young people were identified as having mental health needs and they were not receiving counselling for same in the EPIC, (2012) study. The researcher questioned the most common challenges faced by care leavers and majority of the interviewees referred to how care leavers development mental health issues through isolation, neglect and the fear of being on their own when leaving care. Mental health in Ireland is a huge issue and the stigma attached to mental health is another issue in itself. It’s clearly evident that care leaver’s must be equipped with the essential coping skills and interventions through more funding and services added to the mental health sector in Ireland to prevent suicide and self-harm and promote overall good mental health.

In relation to overcoming the challenges and barriers Stein, (1997) refers to ways of meeting what he mentions as the core needs of care leavers. These include accommodation including supported lodgings, staying on in care, hostels with support, foyers and independent tenancies, social support, finance and careers as well as protective factors of stability in care, assessing capabilities and gaining support and encouragement from carers and workers are important. The researcher found from the findings of her study that the majority of her interviewees referred to similar core needs as identified by Stein, (1997) as a way to overcoming the most common barriers faces by care leavers. The interviewees refer to equipping the
care leaver’s with essential life skills such as cooking, cleaning, budgeting and saving money also referring to assisting the care leaver’s with supporting living to make the transition for care leavers to fully independent living easier.

Stein, (1997) also identifies a number of social supports to overcoming challenges through aftercare services by providing additional information, counselling, group work support and drop in facilities. The researcher through her study explored the above supports and drop in facilities for care leavers. The findings were in contrast with the literature in that most of the five social care workers had never heard of an official drop in facility or group supports but stated how both supports would be a huge social support for care leavers to talk to other who are also going through aftercare also or to speak to those who have already gone through the transition successfully.

4.4 Social Care Workers Perspectives on the Transition from Care to Leaving Care for Care leavers

Kennedy, (2009) stated how most young people leaving care don’t get a second chance. If their job or housing doesn’t work out, they cannot go back to care because they are now eighteen years of age or older and have to fend for themselves. Young people can then very quickly fall on hard times and fall into homelessness. (Kennedy,2009). Kilkenny, (2012) similar stated to aftercare supports being provided by the State as not sufficient enough for the needs of young people leaving care at high risk of homelessness, substance abuse, low levels of educational attainment and unemployment.
(Kilkenny, 2012). Literature would be very comparative to the research findings however, not at such an in-debt or personal level as the research findings of this study. The researcher explored the social care worker’s personal and individual experiences of care leaver’s transitioning to aftercare. The research findings emphasise many negative aspects and they relate to the literature. Some of the findings were quite shocking and devastating referring to care leavers going to prison, becoming homeless, becoming drug addicts and some even ending up dead. “I’ve had a number of calls from prison also from hospitals and once I received an email telling me that one of the young people I would have worked with closely had passed away from a drug overdose…”.

4.5 Social Care Workers Perspective of the Aftercare System

Through the researcher’s investigation of the current literature a significant gap in literature is evident in relation to social care workers’ perspectives of the aftercare system in Ireland. The researcher wanted to identify any positives in relation to aftercare for care leavers. The findings suggested that EPIC and Focus Ireland are huge positives for supporting young people leaving care also supportive living is a huge advantage. It was also noted how the system has been improving slightly in the last few years but once again a negative picture is painted of the aftercare system overall. The recent economic downturn has effected the sectors improvement because of financial cut backs. The lack of funding within the area then alternatively affects the amount of resources and services available for care leavers’. The research findings also highlighted section 45 of the child care as not being strong
enough for care leavers’ referring to the legislation stating that the state may provide support and the amendment of the act through making it compulsory for the state to provide support to all children leaving the care of the state. The change to legislation was also identified by Barry, (2009) who suggested a change to government policy to give young people leaving state care a right to aftercare which will support young people living independently in a home of their own without the word homelessness ever needing to be part of their thinking. (Barry, 2009).

The researcher also identified a number of recommendation to the aftercare system through her findings more funding and resources were recommended to be applied to the aftercare sector especially to the allocation of more aftercare workers for every care leaver. More interagency cooperation between the aftercare worker, the care team and the care leaver. Finally starting the transition and assessment for leaving care as early as possible to give the child an opportunity to transition at their own pace and to have all the necessary supports in place also engaging with social supports such as EPIC and Focus Ireland.

4.6 Evaluation of Methods

Qualitative research provides for obtaining the greatest amount of information or data from the smallest scale sample. A limitation of this study was that the researcher had a very small sample of five social care worker’s. However, the researcher received detailed answers which provided her with a clear picture of the aftercare system from the social care workers’ perspective. Also the sample
provided enough information to answer the researcher aims and objectives. Ethically the researcher could not interview care leavers for her research study, this was also another limitation to the study as a larger scale study which compared and contrasted what care leavers and social care workers views on aftercare system were would be an interesting research study to be carried out. The research topic however requires more of a comprehensive overview which can be obtained through a larger scale study to be undertaken at a national level including perspective of the care leavers as well as social care workers who work with the care leavers.

4.7 Recommendations

Through current literature and this research study there is clear evidence that the aftercare in Ireland for care leavers is being a failure because of high rise of care leavers becoming homeless and also many care leavers turning to crime and alcohol and drug misuse. This research study only focused on social care workers’ perspectives and the results were in line with current literature. A larger scale national study including care leavers’ and social care workers’ views and experiences of aftercare should be carried out in Ireland to give a more in-depth analysis of the aftercare sector at a national level.

The researcher believes that a significant amount of funding needs to be allocated to the aftercare sector in Ireland to provide more necessary support and facilities for care leavers. More state funding should also be allocated to organisations such as EPIC and Focus Ireland who work with care leavers through a form of support, both of
which have carried out numerous research and studies around the aftercare sector and have also highlighted a number of problems within the aftercare system down through the years.

The allocation of an aftercare worker needs to be paramount and an essential part of the aftercare transition for all care leavers. Through appointing an aftercare care worker to assist with care leavers' through providing them with positive opportunities and support to move on to the next chapter in their lives, by making them feel supportive and not feeling alone in such a huge life transition.

Finally, the researcher believes that section 45 of the Child Care Act needs to be reviewed and amended by the Irish government. If the current legislation around aftercare is not requiring the state to be responsible for providing all care leavers with support, then the reason why many children end up in a down-ward spiral after leaving care and becoming homeless, addicted to drugs and alcohol and some even ending up dead may fall back on the non-compulsory legislation that only applies to certain children who leave care.
SECTION FIVE: OVERALL SUMMARY AND CONCLUSION
SECTION FIVE: OVERALL SUMMARY AND CONCLUSION

5.1 Introduction

The purpose of this study was to explore social care worker’s perspectives and insights into the transition from care to leaving care for an adolescent, the challenges and barriers in relation to aftercare from the perspective of the social care workers and finally what a typical aftercare assessment and transition consists off from the social care workers experience of working in this field.

5.2 Overall Summary and Conclusion

Through the discussion of findings there are a number of similarities between the researcher’s study of findings and the current literature on aftercare in Ireland. Similarities were identified through the first research question what does a typical aftercare assessment and transition consist off from the social care workers’ perspective. All five social care workers’ had an a clear and concise understanding of an aftercare assessment and transition and identified that each care leavers assessment should be individualised and child centred based also the allocation of an aftercare worker isn’t always used however, should be implemented by Tusla.

The second research question examined the challenges and barriers in relation to aftercare for care leavers from the social care workers’ perspective. There were a number of challenges identified through the research findings which were also in line with main challenges identified
through aftercare literature. The lack of education attainment of care leavers, high levels of mental health issues amongst care leavers along with high number of care leavers becoming homeless, being imprisoned and turning to addiction of drugs and alcohol are all huge challenges for care leavers. There are however, a number of way to try and overcome these challenges identified through this research study such as life skills training starting when the children are in care, supportive living for care leavers so they won’t become homeless and the encouragement for children in care to achieve a leaving certification and continue on to further education such as college through which can provide a new social network for care leavers and provide numerous opportunities such as jobs and traveling.

The third and final research question explores the social care workers’ perspective on the transition from care to leaving care for care leavers and the social care workers’ perspective on the aftercare system overall both themes portrayed a negative and discouraging picture. Both themes show a huge gap in literature and provide for more in-depth research into the perspective of social care workers who are working on the ground with the most vulnerable children in our society. Many of the children the social care workers work with ended up homeless, back taking part in addiction habits and some even ended up dead which is a shocking discovery a short time after they leave care. Gratitude however must be acknowledged as majority of the social care workers mentioned EPIC and Focus Ireland as a positive aspect to the aftercare sector through their research they have brought light to the aftercare sector and are also a key social support for care
leavers. Many of their recommendations refer to more funding and resources which all depend on the government's funding for the child care services. Also, a recommendation refers to legislation of section 45 of the child care act to be amended and declare that the state must be obliged to provide support to all care leavers when leaving the care of the state. This is the hard core truth of aftercare and it's from the perspective and experience of the people who work with the most vulnerable children in our society.
REFERENCE LIST


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APPENDIX 1  INFORMATION SHEET

‘Social Care Worker’s Experiences on the Transition of Aftercare for Care Leavers’.  

Dear Participant,

My name is Aishling Mooney. I am currently participating in a Masters in Child and Youth Studies in Athlone Institute of Technology. As part of the course I am required to conduct research in the area of child and youth care. For my dissertation I would like to gain information relating to social care worker’s perspectives and insights into their own experiences working with children who are transitioning to aftercare and independence. My particular focus for the dissertation is regarding what a typical aftercare assessment and transition consists of? The most common challenges and outcomes for care leavers understood by social care workers.

The interviews will be recorded and the information that you provide will be under the strictest confidence unless the information you provide is harmful to yourself or others. Your participation in this research study is completely voluntary. If you decide to take part and become uncomfortable about answering the questions you can stop the interview at any time or if it’s just a particular question or questions you may not want to answer we can move on to the next question. For the purpose of this interview I will be using a tape recorder to record the answer being provided. The recordings will be deleted after the transcripts are completed at a date of the 30th of September 2016 however, if you wish for a tape recorder not to be used I can take notes instead.

Thank you for taking the time and if you have any question please do not hesitate to ask me.

Aishling Mooney.
APPENDIX 2  CONSENT FORM

Consent Form

Re: Research Study ‘Social Care Worker’s Experiences on the Transition of Aftercare for Care Leavers’.

I understand the information in the information letter I just read:

Name: __________________________________________

______________________________________________

Date: __________________________________________

I am willing / not willing to take part in this interview. (Please circle).

Name: __________________________________________

______________________________________________

Date: __________________________________________

I am willing / not willing for my interview to be recorded and used for the purpose of a transcript. (Please circle).

Name: __________________________________________

______________________________________________

Date: __________________________________________
Schedule of Questions

I would be very appreciative if you would answer the following questions I am going to ask in relation to your own individual experiences.

**Objective 1:** To identify what a typical aftercare assessment and transition consists of from the social care workers experience of working in this field.

1. **Can you tell me what a typical aftercare transition consists of?**
   - A key factor in providing appropriate aftercare is the assessment and care planning that should take place in consultation with the young person and key individuals prior to leaving care.

2. **Typically, at what age does an aftercare transition start for the young person?**
   - Formal preparation should begin no later than the young person's 16th birthday.

3. **Which legislation do you use as a guideline?**
   - The Child Care Act (1991) Section 45
   - Policy/Procedures:
     - Aftercare Bill 2014
     - Organisation own policy procedure?

4. **Are the families involved during the assessment and transition? If so how are they involved?**
   - Care leavers return home after leaving care?

5. **What are the typical aftercare services available for the care leavers?**
   - Accommodation, social support, financial, education and careers?

6. **General from your experience how do the care leavers feel in preparation to leaving care?**
7. From working with care leavers does their education attainment level affect them in preparation to leaving care?

Objective 2: To identify the challenges and barriers in relation to aftercare from the perspective of the professional.

8. If any what are the most common challenges, you have seen care leavers face
   (1) Before aftercare transition-
   (2) During aftercare transition-
   (3) After the aftercare transition?

9. How are these challenges overcome?
   - Supports?

Objective 3: The objectives are to explore social care worker’s perspectives and insights into the transition from care to leaving care for an adolescent.

10. What is the general outcomes for care leavers leaving care?
    - Positive/Negatives.
    - Further Education.
    - Jobs.

11. Have you ever done a follow up on the care leaver one year later from them leaving care?

12. Have you ever been involved or heard of the idea of group work supports or a drop in facilities for does who have left care to come back for help, support etc.?

13. What is your personal view of the standard of the aftercare system?

14. From your own experiences what do you think are the positives of the aftercare system if any?

15. From your own experiences what do you think are the negatives of the aftercare system if any?
16. Finally, are there any changes you would recommend to the after care system in Ireland?

\[^1\text{Tusla- Child and Family Agency in Ireland.}\]