



Preventing Homelessness among Care Leavers: Review of the Capital Assistance Scheme for Care Leavers

Report commissioned by the Department of
Children, Equality, Disability, Integration and
Youth

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May, 2022

Contents

List of Tables	5
List of Figures	5
Acknowledgements	6
Disclaimer	6
Abbreviations and Specialist Terminology	7
Introduction.....	8
Introduction.....	8
Aims and Objectives	11
Research Methodology and Implementation	11
Research Design and Implementation.....	11
Research Methods	12
Interviews with Stakeholders	16
Data Analysis.....	17
Research Ethics	18
Data Protection and Confidentiality	19
Outline of Chapters	20
Chapter One Review of the Literature.....	21
Introduction.....	21
Brief History of Care System in Ireland	21
Vulnerabilities of Children in State Care	22
Extended Care and Preparation for Leaving Care	25
Transitioning from State Care into Independent Adulthood	27
Conclusion	30
Chapter Two Policy and Service Context	32
Introduction.....	32
Policies on Homeless among Young People and Care Leavers	33
Aftercare Policies and Supports for Young People Leaving Care	35
Capital Assistance Scheme (CAS) for Care Leavers	37
Young People in State Care and in Receipt of Aftercare Services in Ireland	40
Number of Young People in Care	40
Number of Young People in Receipt of Aftercare Supports	41

Capital Assistance Scheme for Care Leavers Scheme Provision and Forecasted Need ..	44
Progress in Implementing CAS for Care Leavers	44
CAS for Care Leavers Scheme: Forecast 2020–2022	46
Conclusion	48
Chapter Three From Care to CAS: Care Leavers’ Experience of Transitioning to	
Independent Living	50
Introduction	50
Turning 18: An Anxious Milestone	50
CAS for Care Leavers Tenancy – a secure foundation on which to build a future	54
The Challenges of Independent Living	57
Fear of Losing CAS Tenancy	59
Conclusion	60
Chapter Four Implementing CAS for Care Leavers: Sourcing, Letting and Managing	
Dwellings	62
Introduction	62
Eligibility for the CAS for Care Leavers Scheme	62
Property Availability, Cost and Procurement	66
Availability of Suitably Sized and Located Dwellings	66
Delays, Bureaucracy, Stakeholder Collaboration	69
Forever Home?	70
Housing Management and Maintenance Issues	72
Conclusion	74
Chapter Five Supporting Transitions to CAS for Care Leavers: Aftercare Support	76
Introduction	76
Formal Planning to Leave Care	76
Optional Transition Period for CAS Candidates	77
Transition as Preparation for Independent Living	79
Using Transition to Inform Decision-making	81
Structured Transition Programme	83
Aftercare and Ongoing Support Following Transition to a CAS Tenancy	84
Varying Levels of Support as Perceived by Care Leavers	84
Cut-off Ages for Receipt of Aftercare Support	87

Longer-term Support for Care Leavers	89
Conclusion	91
Chapter Six: Findings and Recommendations.....	92
Introduction	92
Findings.....	92
CAS for Care Leavers Outputs, Impacts and Achievement of Strategic Objectives	92
Challenges of Transitioning to a CAS Tenancy.....	94
Targeting of CAS for Care Leavers	94
Preparation for Independent Living	95
Aftercare Support	96
Dwelling supply, procurement and allocation.....	97
Quality of dwellings and housing management and maintenance	98
A forever home?	99
Recommendations.....	99
References	103

List of Tables

<i>Table 0.1 Characteristics and Modus Operandi of the CAS for Care leavers Scheme</i>	10
<i>Table 0.2 Research Implementation Steps</i>	12
<i>Table 0.3 Locations of CAS for Care Leavers Clients Interviewed</i>	14
<i>Table 0.4 Details of CAS for Care Leavers Clients Interviewed</i>	15
<i>Table 0.5 Characteristics and Anonymous ID Numbers of the Policymakers, Service Providers and other Stakeholders Interviewed for this Research</i>	17
<i>Table 2.1 CAS for Care Leavers Programme Logic Model</i>	39
<i>Table 2.2 Forecast of CAS for Care Leavers Applicants by Age and Tusla Aftercare Service Area, 2020–2022</i>	47

List of Figures

<i>Figure 2.1 Children in Care, by Type of Care, 2015–2019</i>	41
<i>Figure 2.2 Care leavers in Receipt of Aftercare Supports from Tusla, 2009–2019</i>	42
<i>Figure 2.3: Living Arrangements for Young People Aged 18 years Discharged from State Care, 2016–2019</i>	43
<i>Figure 2.4: Type of Dwellings Provided by CAS for Care Leavers Scheme, April 2020</i>	45
<i>Figure 2.5 Location of Total Dwellings Provided by CAS for Care Leavers UP to Q4, 2020</i>	45
<i>Figure 2.6 Current Placement Type/Living Arrangement of Tusla-identified CAS Candidates Countrywide (2020–2022)</i>	46

Acknowledgements

Our thanks to everyone who agreed to be interviewed for this research for sharing their views. We are particularly grateful to the young care leavers living in accommodation provided under the CAS programme for sharing their views and experiences with us so honestly and openly. Thanks also to William McNamara from Tusla for all of his help with the project implementation and to Dr Maureen Lyons, Research Manager, UCD School of Social Policy, Social Work and Social Justice for her help in managing the project.

Disclaimer

The views, opinions, findings, conclusions and/or recommendations expressed in this report are strictly those of the authors. They do not necessarily reflect the views of the DCEDIY, which takes no responsibility for any errors or omissions in, or for the accuracy of, the information contained in this report

Abbreviations and Specialist Terminology

AHB	Approved housing body – a non-profit-sector social housing provider
ASCs	Aftercare Steering Committees
CALF	Capital Advance Leasing Facility, a government loan which is used to part fund the provision of social housing by approved housing bodies
CAS	Capital Assistance Scheme, a government grant scheme for the provision of social housing by approved housing bodies. It is most commonly used for the provision of housing for those with additional support needs.
DCEDIY	Department of Children, Equality, Disability, Integration and Youth
DHLGH	Department of Housing, Local Government and Heritage
DRHE	Dublin Region Homeless Executive
EPIC	EPIC – Empowering People in Care: a national voluntary organisation working with and for children and young adults in care or who have experience of being in care.
HAP	Housing Assistance Payment – an income-related housing subsidy for private renting households.
NGOs	Non-governmental organisations
RAS	Rental Accommodation Scheme, which funds the leasing of dwellings by local authorities for letting to households who qualify for social housing supports.
SOPs	Standard Operating Procedures
Tusla	The government child and family agency responsible for improving wellbeing and outcomes for children

Introduction

Introduction

The vast majority of young adults in Ireland who leave the care of the State each year, having reached the age of 18, do so with secure, stable accommodation in place. Many remain living with their foster carers, while others move on to independent living or return to live with their families. However, for a proportion of state care leavers, these types of accommodation are unavailable. This is often due to the complexity of their needs. Their ability to access stable housing can be reduced by educational shortcomings, mental health difficulties, intellectual, physical, or sensory disabilities, alcohol and substance abuse, and the combined impact which these issues can have on the capacity to access and maintain meaningful employment. Breakdown of relationships with foster families and families of origin may also impede care leavers' ability to live with these families. In addition, some care leavers are young parents, which creates additional challenges in terms of access to suitable accommodation.

Without a stable place to call home, these young adults are particularly vulnerable to homelessness, and may have difficulty accessing the consistent levels of support they require from mental or physical health services, for example. Once they have secured stable accommodation, a multidisciplinary support team can be put in place to cater for their individual needs, which may include input from psychology, disability, education/training, mental health or community welfare services, etc.

The *Rebuilding Ireland: Action Plan for Housing and Homelessness* published by the Government of Ireland (2016: 40) in July 2016 acknowledged that 'Young people who have grown up in State care have a higher than average risk of becoming homeless as adults'. It committed government to working to ensure that 'young people leaving State care and at risk of homelessness are identified and catered for through appropriate housing and other supports required to meet their needs'. To fulfil this commitment, the Department of Housing, Local Government and Heritage (DHLGH) provided additional grant aid under its Capital Assistance

Scheme (CAS), which funds the provision of social housing by non-profit organisations called approved housing bodies (AHBs). This enabled the establishment of a 'CAS for care leavers' programme to provide social housing for care leavers at high risk of homelessness, together with dedicated aftercare support from the child welfare and protection agency Tusla.

The 2017 circular which extended the CAS to care leavers details the objectives and operating principles of this new programme (Department of Housing, Planning and Local Government, 2017). Its objective is to prevent homelessness among care leavers by providing them with accommodation before they become homeless, based on an inter-agency assessment of their case that concludes that they are a high risk for homelessness when they leave care. The scheme is a homelessness prevention measure that addresses the previous anomaly whereby young care leavers were required to be homeless before they could be prioritised for social housing. The key principles of the CAS care-leaver scheme are:

- The accommodation should be occupied on the basis of a long-term tenancy and should not be a temporary or transitional arrangement.
- The approved housing body acting in the capacity of landlord under the scheme should have the skills and expertise to work with care leavers who have complex needs.
- Accommodation should be dispersed in the community to avoid clustering of properties, while being located close to public transport, shops and public amenities, so as to avoid social isolation.
- Accommodation can be a single occupancy unit, a two-bedroom parent and child unit or a two-bedroom peer-support unit, as required on assessment (Department of Housing Planning and Local Government, 2017).

The key characteristics of CAS for Care leavers and how the scheme operates are summarised in Table 0.1 below.

Table 0.1 Characteristics and Modus Operandi of the CAS for Care leavers Scheme

Scheme Funding	The acquisition of dwellings is funded by the Department of Housing, Planning and Local Government. This is done via the payment of a non repayable loan to an approved housing body (a non profit sector social housing provider). Tenants also qualify for a special rate of the Housing Assistance Payment housing allowance which is lower than the standard rate of payment. The Department of Children, Equality, Disability, Integration and Youth fund for the project manager for the scheme, while Tusla funds the aftercare support staff.
Provision of Dwellings	Dwellings are sourced by participating AHBs for lettings to tenants. To date all dwellings have been purchased for this purpose from the existing housing stock, but the scheme can fund the construction of purpose built dwellings.
Letting of Dwellings	Dwellings are let by AHBs in collaboration with local authorities and Tusla managed Aftercare Steering Committees which identify care leavers in need and allocate care leavers to CAS accommodation.
Support for Tenants	Tusla allocates an after worker to support the tenants in the years after the allocation of the tenancy. After this period tenancy sustainment support is provided by the relevant approved housing body.
Housing Management and Maintenance	AHBs are responsible for managing and maintaining the dwelling and these costs are funded from rents which are set at the level required to generate the necessary revenue. RAS tenants can claim a special flat rent of rent supplement from the Department of social protection towards the cost of their rent. This is currently set at a maximum of €32 per week for most single person households.

Between its establishment in 2017 and the end of 2020, a total of 60 care leavers have been accommodated under the CAS for Care Leavers programme. To ensure the scheme is achieving its objectives and that the foundations being put in place during its establishment phase will help to prevent homelessness for vulnerable care leavers in the future, it is important to review and evaluate its achievements at this stage. This research is intended to do this, and also to identify any necessary alterations, improvements, blockages or barriers which may prevent the scheme from reaching its full potential.

Aims and Objectives

This research project aims to explore the outcomes achieved to date by the CAS for Care Leavers programme and to evaluate its success in preventing homelessness for vulnerable care leavers in the context of the other accommodation options open to care leavers and proven international responses to aftercare housing and homelessness prevention.

In order to achieve this broad aim, the research addresses the following specific objectives:

1. To understand what works in preventing homelessness in vulnerable care leavers.
2. To explore both the positive and negative aspects of the CAS for Care Leavers programme, including clarity and focus; meeting objectives; inter-agency cooperation; and acceptance of a preventative approach to homelessness.
3. To consider changes to the CAS circular to improve outcomes for care leavers at risk of homelessness.
4. To evaluate CAS in the context of other accommodation options for vulnerable care leavers in Ireland and internationally.
5. To make recommendations for policymakers and front-line service providers to improve homelessness prevention for vulnerable care leavers.

Research Methodology and Implementation

Research Design and Implementation

To provide a comprehensive assessment of the achievements of the CAS for Care Leavers programme, this research employs an outcome evaluation design. This type of research is intended to assess the extent to which policies or programmes achieve their stated objectives.

This research was commissioned after the CAS for Care Leavers programme was established. Only care leavers who participated in the programme were included in the research. No group of care leavers who had employed other accommodation options after leaving state care were available for comparison with CAS for Care Leavers participants. Therefore, the design of the

research was non-experimental and employed post-intervention data only (Linfield and Posavac, 2019).

Reflecting standard practice in evaluation research, this project was implemented in five sequential phases or steps. These are summarised in Table 0.2.

Table 0.2 Research Implementation Steps

Step Number	Research Tasks
One	Consult with stakeholders.
Two	Describe the programme, including: • its operational context • the needs it is intended to address • intended effects • the activities involved • available resources and summarise these in a 'logic model' which details the expected relationships with the programme activities, resources and intended effects.
Three	Specify the research aims and objectives and design the research methodology and methods.
Four	Gather the research methods using the research methods selected during step three.
Five	Analyse the evidence.
Six	Draft the project report and finalise it following consultation with stakeholders.

Research Methods

The approach adopted to implementing this study reflects the researchers' understanding of the lives and identities of young care leavers as complex and fluidly evolving. It also reflects the sensitive nature of the research topic and the potentially vulnerable status of many of the research participants.

To capture these complexities, qualitative research methods – specifically, in-depth, one-to-one interviews, informed by a comprehensive literature review – were used to conduct this research. Qualitative research methods are ‘flexible and fluid, and therefore suited to understanding the meanings, interpretations and subjective experiences of vulnerable groups’ (Liamputtong, 2007: 7). They are particularly useful for capturing the variety and complexity of young care leavers’ experiences.

Four types of qualitative research methods were employed to operationalise this research:

- *Policy and service review:* The relevant policies and services to support young people leaving care in Ireland, including CAS for Care Leavers, and the research evidence on their effectiveness were reviewed and all relevant data compiled.
- *Literature review:* An in-depth review of the Irish and international literature was conducted on the accommodation and support needs of young people leaving care and the most effective service responses. While relatively little Irish research has been conducted on the accommodation and support needs of care leavers, international literature on this issue provides more extensive coverage. A thematic analysis of these literatures was conducted in order to link studies across these two domains.
- *Interviews with CAS for Care Leavers clients:* In total, the research team interviewed 16 clients of the CAS for Care Leavers scheme between December 2020 and February 2021. As shown in Table 0.2, 15 of these interviewees were living in accommodation in the four different Tusla operational regions. In addition, one interviewee was in the care of the Social Work Team for Separated Children Seeking Asylum (SWSCSA). The number of CAS for Care Leavers clients interviewed constitutes 26 of the total number of clients of this scheme nationally in December 2020 and 34 per cent of total clients living in the case-study regions.

All of these interviews were conducted on a one-to-one basis but due to the Covid 19 public health restrictions in place during the research implementation period, these were all conducted by phone. The interviews were loosely structured and conversational in format. Interviewees were invited to weave their personal stories around the following themes:

Table 0.3 Locations of CAS for Care Leavers Clients Interviewed

Tusla Region	Tusla Area	Total Number of CAS for Care Leavers Clients Resident (end 2020)	Total Number of CAS for Care Leavers Clients Interviewed
Dublin Mid-Leinster	Dublin South/Kildare/West Wicklow areas	13	1
Dublin North-East Region	Dublin North City and Dublin North	18	8
South Region	Carlow/Kilkenny/South Tipperary	8	4
West Region	Galway, Roscommon, Sligo/Leitrim/West Cavan, Limerick, Clare/North Tipperary	4	2

- Whether homelessness is a major concern for them.
- The support they receive from social workers or aftercare workers to manage transition to independent living in their CAS for Care Leavers dwelling.
- How informed the participants felt about CAS for Care Leavers before signing up to the scheme.
- The challenges of learning independent life skills and managing day-to-day tasks (such as paying bills, savings plans, cooking, etc).
- Whether transitional accommodation has a role to play in preparing young care leavers for independent living.
- The standard of the CAS apartment when they moved in and throughout their tenancy.
- The level and quality of support received from key workers, aftercare workers, etc since moving into their CAS for Care Leavers dwelling.
- Their perspectives on the benefits and drawbacks of the CAS for Care Leavers scheme and any improvements which could be made to this programme.

The demographic characteristics of these interviewees are summarised in Table 0.4, as are the anonymous classification numbers (CAS 1,2,3 etc) used to identify their individual

opinions in this report.

Table 0.4 Details of CAS for Care Leavers Clients Interviewed

ID	Age	Gender	Time in CAS for Care Leavers accommodation (years & months) when interview was conducted	Occupational Status
CAS1	20	F	1 year 6 months	Education
CAS2	24	M (+ baby)	1-year 6m	Employed
CAS3	23	F (+ young son)	1-year 3m	Employed
CAS4	21	F	2 years	Education
CAS5	19	M	6 months	Education
CAS6	22	F	1 year	Education
CAS7	22	F (+ baby)	1 year	Unemployed
CAS8	23	M	1-year 4m	Unemployed
CAS9	24	M	2 years	Unemployed (but plans to return to education)
CAS10	23	M	2 years	Not stated
CAS11	19	F	1 year	Education
CAS12	20	M	1 year	Education
CAS13	21	M	9 months	Unemployed
CAS14	23	M	1 year	Unemployed
CAS15	20	M	1-year 6m	Unemployed
CAS16	25	M	1-year 5m	Education

Note: The proportion of interviewees categorised as unemployed is affected by job losses as a result of the Covid-19 pandemic which was underway when the research was conducted.

Interviews with Stakeholders

In addition, 15 interviews with stakeholders involved in the design or implementation of the CAS for Care Leavers scheme were conducted between December 2020 and February 2021. Due to the Covid-19 restrictions, these interviews were also conducted on the phone or on an appropriate online platform. The interviewees included: civil servants involved in making policy; Tusla aftercare workers involved in supporting young care leavers living in CAS for Care Leavers accommodation; advocacy groups for young people in care, and approved housing bodies which have provided accommodation under the CAS for Care Leavers scheme. The types of organisations represented by the stakeholder interviewees are summarised in Table 0.5, which also details the anonymous ID numbers used to identify these interviewees' individual options in the analysis presented later in the report. In keeping with the format of the interviews conducted with the care leavers, the stakeholder interviews followed a loosely structured format. Depending on the organisation the interviewee represented, some or all of the following broad issues were explored:

- Their involvement in and/or knowledge of the CAS for Care Leavers programme.
- Views on how the programme is working, the programme design and administration, any regional disparities including the benefits, and areas which require improvement.
- Views in relation to how eligibility for the programme is established, whether eligibility screening could be improved and the appropriateness and consistency of programme targeting.
- Views on appropriate accommodation for different categories of care leavers.
- Challenges in procuring dwellings for letting under the CAS for Care Leavers programme and views regarding the size of dwellings and on shared tenancies.
- Views related to the preparation for leaving care and transition to a CAS for Care Leavers dwelling.
- Views regarding aftercare support provided by Tusla, including the quality of aftercare support, and the appropriateness of cut-off ages for access to support.
- Suggestions for other strategies for preventing homelessness among care leavers.

Table 0.5 Characteristics and Anonymous ID Numbers of the Policymakers, Service Providers and other Stakeholders Interviewed for this Research

ID	Organisation	Role in Organisation
KI 1	AHB	Manager
KI 2	AHB	Manager
KI 3	AHB	Manager
KI4	AHB	Manager
KI 5	AHB	Manager
KI 6	Dept of Housing	Civil Servant
KI 7	Advocacy Group	Manager
KI 8	Advocacy Group	Manager
KI 9	Tusla	Aftercare Worker
KI 10	Tusla	Aftercare Worker
KI 11	Tusla	Aftercare Worker
KI 12	Tusla	Aftercare Worker
KI 13	Tusla	Aftercare Manager
KI 14	Tusla	Aftercare Manager
KI 15	Tusla	Senior Manager

Data Analysis

To facilitate the analysis of the interview data, all interviews were recorded and transcribed verbatim and then analysed using computer-assisted qualitative data-analysis software (the MAXQDA package). Three rounds of analysis were then analysed sequentially, as follows:

1. First, the data was examined to identify arguments, concepts and experiences raised most commonly and to identify differences and similarities between different interviewees.
2. The results of this first stage were re-examined to identify tentative relationships between interviewees' views and experiences, and relevant contextual issues.
3. The results of the second stage were re-examined to identify relationships between these different findings (Corbin and Strauss, 2008).

The interviews with care leavers and stakeholders were analysed separately in this way, and the results of these exercises were then compared to the findings of the literature and policy

reviews.

Research Ethics

The ethical challenges associated with researching vulnerable people such as young people who have been in state care are considerable. As Barnard (2005: 13) cautions, 'harm is the very last thing we want to happen, particularly where those we research are already socially excluded'. These ethical challenges were considered in-depth before starting this research; a detailed plan to address them was formulated, which took account of both University College Dublin's (UCD) and Tusla's research ethics guidelines.

The research was approved by Tusla's Research Ethics Committee and then by UCD's Human Research Ethics Committee in February 2020. The application for Research Ethics Committee approval included the following provisions regarding the interviews with CAS for Care Leavers clients:

- All of these interviewees were contacted via their aftercare worker initially. The aftercare worker ascertained that the interviewee was suitable and willing to participate in the interview, and the aftercare worker was available to provide the interviewee with support after the interview if necessary.
- All of the interviews were conducted by Prof. Michelle Norris, Dr Joanne Kelleher and Dr Angela Palmer. This research team have extensive experience of conducting research, including researching members of vulnerable groups, and expertise in researching social housing and homelessness.
- The interviews were all conducted over the phone at a time agreed jointly by the interviewee and interviewer. In most cases these interviews lasted between 30 minutes and one hour.
- Interviewees consented in writing or verbally prior to the interview to participating in the interview and to having it audio recorded. They were informed of their right to stop the interview at any point without any negative repercussions; that they could take a break or resume the interview at a later stage should they wish to do so, and that during the

interview they could decline to respond to any specific questions or topics. They were informed that their personal data would be treated with the utmost confidentiality and anonymised when transcribed.

- Sensitive topics and issues were not discussed during interviews with care leavers. Rather, the interviewers informed interviewees that the structure of the interview was primarily around their experience of the CAS scheme; sensitive questions relating to their care experience were not asked. However, if the participant decided to share experiences relating to their in-care experience, these discussions formed part of the interview. To ensure their confidentiality was being upheld, all interviewees were made aware by the interviewers that the views shared during the course of their interviews would be anonymised in the final report, thus ensuring the respondent did not leave the research setting feeling exposed or vulnerable.

The research team also worked in close collaboration with William McNamara, Tusla National Liaison Lead for Aftercare, who referred the researchers to aftercare workers and advised on addressing the ethical challenges generated by the research. Contact between Mr McNamara and the project's principal were therefore ongoing throughout the research.

Data Protection and Confidentiality

Strict protocols were followed to ensure that the data collected from research interviewees was kept confidential and was accessed only by members of the core research team. Following transcription of the interviews the interview recordings were destroyed and the transcriptions were anonymised (i.e., all information which could potentially identify an interviewee was removed).

Outline of Chapters

The remainder of this report is organised into six chapters.

- **Chapter One** reviews the national and international literature on supports for and risk of homelessness among care leavers. The historical evolution of child welfare and protection policy in Ireland and the vulnerabilities of children currently residing in state care is discussed – particularly in relation to homelessness, how children prepare for leaving care and the safety net of supports surrounding them.
- **Chapter Two** outlines the legal, policy and service context for those leaving care, in receipt of aftercare services, and national policy on youth homelessness. The design of the CAS for Care Leavers programme is examined, and the rationale (or ‘logic model’) which underpins this design. In addition, trends in the numbers of care leavers who are living in CAS properties and are receiving after-care support are reviewed, as well as data on the number of dwellings procured under the CAS for Care Leavers programme to date and the tenancies allocated.
- **Chapter Three** draws on the interviews with the care leavers housed by the CAS for Care Leavers programme to examine their experience of transitioning out of care and into their new home. Its purpose is to identify the elements of the CAS programme which worked well for them and the aspects which did not. The latter informs the more detailed analysis of the design and implementation of this programme which is presented in later chapters.
- **Chapter Four** examines eligibility for and targeting of CAS for Care Leavers, procurement, and availability of dwellings for inclusion in the programme, procedures for acquiring these dwellings, and their management and maintenance by approved housing bodies.
- **Chapter Five** examines the support structure for those leaving care and how aftercare planning works and assesses the effectiveness of these arrangements in terms of the operation of the CAS for Care Leavers programme.
- **Chapter Six** sets out the report conclusions and recommendations.

Chapter One Review of the Literature

Introduction

This chapter reviews the national and international literature on supports for and the risk of homelessness among care leavers. It begins with a brief summary of the historic evolution in Ireland of child welfare and protection regulation, policies, and statutory service provision, which culminated in the establishment of the Child and Family Agency, Tusla.

The chapter then examines the vulnerabilities of children in care. It details contemporary understanding of how exposure to childhood trauma has been shown to have an impact on later life outcomes, which can lead to challenges such as depression, isolation, dependency issues and difficulty trusting other people. This is particularly acute for care leavers who, some studies suggest, need access to increased social support on transitioning to independent living. Instability in living arrangements and homelessness has been connected to these young people lacking a parental 'safety net' to fall back on.

The potential of strengthened preparation for leaving care and extending the upper age limit for ageing out of care to reflect the older ages at which most young people nowadays are leaving birth homes is also examined. Studies highlight that housing stability provides a steady base, in tandem with support services, from which young care leavers can transition to adulthood. Inability to access secure housing and delays in allocation of dwellings was seen as psychologically damaging for young people, who feel enormous anxiety about where they will live after leaving care.

Brief History of Care System in Ireland

The acknowledgement, understanding, social conception and therefore regulation of 'child cruelty' became recognised in the 1800s through predominantly religious societies (McGuinness, 2012). This led to the development of 'new forms of social regulation and

expertise which began to reconstitute the meanings of child maltreatment and relations between the state, parents, children and civil society' (Ferguson, 2004: 26). The workhouses established under the Poor Relief (Ireland) Act, 1838 began to be replaced for some children with foster care, known as 'boarding out' (Skehill, 2004; Buckley, Skehill and O'Sullivan, 1997). In the 1970s, the influential Kennedy Report, commissioned to review the operation of reformatory and industrial schools in Ireland, 'was instrumental in highlighting the unrealistic nature of dealing with children-in-care in isolation, with a strong emphasis on preventing children from being placed in care' (Devaney and McGregor, 2017: 7).

O'Sullivan (2009: 310) suggests that this led to a perspective shift in child protection and welfare discourse, 'from punitive to caring, from controlling to understanding, from custodial to educative...' Due to the lack of appropriate legislation during this period, 'considerable legal ingenuity was brought to bear in using marginally relevant sections of the 1908 Act... to place children in care' (McGuinness, 2012: 49). The landscape of Irish child-protection practice changed dramatically, and was modernised in 1995 with the implementation commencement of the Child Care Act 1991 (see: Ferguson and Kenny, 1995; Gilligan, 1996). The Act governs the State's role in relation to the protection and welfare of children. The duties under this Act were initially operationalised by the Health Boards (now the Health Service Executive) but these were transferred to the new Child and Family Agency, Tusla, under the Child and Family Agency Act 2013. Tusla, Ireland's first stand-alone state child protection and welfare service, began its work in January 2014.

Vulnerabilities of Children in State Care

It is now well established that exposure to factors such as abuse and neglect in childhood can have lasting outcomes across an individual's life course and within various psycho-social domains. Depending on the reasons why they were received into care in the first place, children in state care and subsequent care leavers may present with higher prevalence of these adverse outcomes than the population-at-large; thereby leading to higher, or at least different, needs and requirements. Some studies also suggest that the very nature of being 'in care' can have

potentially negative impacts on children and young people and in turn lead to additional needs (Van Breda *et al.*, 2020).

The much-debated but highly influential ‘adverse childhood experiences study’ by Felitti *et al.* (1998) established that exposure to such features in childhood can have deleterious outcomes on one’s later health and wellbeing. This study concludes that exposure to adversity in childhood leads to high-risk health behaviours which in turn lead to a negative impact on later life health outcomes. Since its publication, many cautionary messages have been published which raise questions regarding usefulness of the outcomes of this study (Finkelhor, 2018; Kelly-Irving and Delpierre, 2019; McLennan, MacMillan and Afifi, 2020). However, Felitti *et al.*’s. (1998) research does usefully highlight the impact that childhood adversity can have on later life outcomes.

Abuse and neglect in childhood can have significant initial effects and lasting outcomes across an individual’s life course and various psycho-social domains. Browne and Finkelhor (1986), specifically examined the impact of child sexual abuse, highlighted later life experiences of depression, isolation, stigma, difficulty in trusting others, and a tendency towards revictimisation. In an Irish context, Barrett, Kamiya and O’Sullivan (2014), drawing on a national survey of people aged over 50 (The Irish Longitudinal Study on Ageing – TILDA) showed that early experiences of abuse can also affect an individual’s labour-market engagement, relationship status and health.

Davidson, Devaney and Spratt (2010) argue that we need to look around the child, in their wider socio-ecological environment, to examine the level and multiplicity of adversity that the child has experienced, because this ‘multiplicity of adversity’ is common in the backgrounds of those children who have been placed in state care and may lead to higher, or at least different, needs and requirements. Some studies also suggest that the very nature of being ‘in care’ can have potentially negative impacts on children and young people and in turn lead to additional needs throughout their life. Cashmore and Paxman (2006) found in their four-wave longitudinal study of 47 young people leaving care in New South Wales, Australia that often levels of instability and transitions while in care (as indicated by numbers of placements and changes in

placement during care) – – and often pre-care can be reflected in higher levels of mobility after leaving care (as indicated by inability to remain living with their foster family/ care placement after leaving care and number of moves of accommodation after leaving care). However, they point out that, although social support continuity in accommodation and relationships is essential beyond care, it is not always available to all young people leaving care.

There is also significant Irish and international evidence that those who have been in state care as children are at higher risk of experiencing homelessness as adults than the population at large. The Irish evidence on this issue is derived from in-depth though small-scale qualitative studies of homeless people. Among these studies, Mayock and colleagues' longitudinal panel research, which followed a group of homeless young people over six years, is particularly important (Mayock, Corr and O'Sullivan, 2008; Mayock and Corr, 2013). This research identifies four proximate triggers of homelessness among the young people studied, including histories of being in residential or foster care for extended periods, experiences of placement breakdown or disruption during this time, and poor preparation for leaving care, coupled with weak aftercare support (Mayock and Parker, 2017). Notably, this finding is supported by many different types of studies conducted in other countries. For instance, Fowler, Toro and Miles (2009: 1457) found in their study of housing problems among 867 adolescents aged 19 to 23 years leaving foster care in the Detroit, Michigan, metropolitan area that one-fifth had experienced 'chronic homelessness.' Curry and Abrams (2015) highlight the findings from several studies conducted in the United States which point to a 20-30% rate of homelessness in the years following foster youth leaving care. Other research from the USA indicates that homelessness among care leavers often negatively affects other domains of the young person's life such as access to education, level of employment, health, mental health, substance abuse, involvement with the justice system and early parenting (Courtney *et al.*, 2001; Courtney, et al., 2011; Pecora *et al.*, 2005). Contributory reasons for homelessness among care leavers relate to young people ageing out of care lacking the safety net that parents can provide to their peers, such as options to move back into the family home or financial assistance in times of crisis (Schelbe, 2018).

Extended Care and Preparation for Leaving Care

There is limited knowledge, through a handful of studies, of what happens to young people in the Republic of Ireland when they are in the process of leaving state care and about their life experiences after care. Carr (2014: 91) describes these young people as ‘invisible from view’ in a situation where they are ‘left out on their own’ by the State (see also Kelleher and Kelleher, 1998).

For instance, there is very little research on the experience of young people who remain in care for a period after the age of 18 – which is termed ‘extended care’. Van Breda *et al.* (2020) point to a number of issues flagged in the (limited) international research on the operation of the extended care option:

- Eligibility criteria may favour more advantaged care leavers (education, training, work), with others denied access based on past behaviours which are often considered devoid of the context of pre- and in-care experiences.
- Flexibility criteria for entry at a later age (second chance) for those who initially declined to participate (as opposed to only one option for entry into extended care at age 18 years).
- Uptake of extended care option, whereby some young people decline to participate even if extended care is a possibility.
- Duration of stay in extended care, whereby some young people decide to leave earlier than required to do so.

This research identifies several factors that influence the success or impact of extended care in addition to pre- and in-care experiences. These include: eligibility for access to the extended care programmes, capacity and support structure of the wider social welfare policies, and the social and cultural characteristics of those ageing out of care (see also Mendes and Rogers, 2020).

Mayock and Parker (2017) found in their longitudinal study of youth homelessness in Ireland that, for young people leaving care who engaged with specialised aftercare services and professionals (social workers, key workers, aftercare workers, outreach workers, etc), the

transition to independent living was more planned and linked to fewer and smoother transitions and lower risk of homelessness than that of those who did not have access to aftercare support, for reasons of services not being available or lack of eligibility. For the latter cohort, the transition into adulthood from care led to experiences of “hidden” homelessness such as staying in overcrowded conditions in the homes of their partners’ (Mayock and Parker, 2017: 104). Hence Mayock and Parker (2017) noted:

Aftercare services provided important supports to young people both ahead of exiting the care system and subsequent to making that transition. However, it appears that aftercare provision was not experienced uniformly by young people, which led a number to feeling unsupported as they exited the care system and also led them into situations of ‘hidden’ homelessness and housing precariousness.

Prince *et al.* (2019) note a striking association of housing instability with anti-social behavioural outcomes (e.g., substance abuse, early parenthood) in their longitudinal study among a group of 49 19-year-olds transitioning out of care in the US. They found that in addition to the challenges evident in having a care history, two other factors at the macro level also heightened the risk of homelessness among young people leaving care: lack of affordable housing or inadequate housing supports, and a lack of social support networks. They argue that ‘policies to promote greater spending on housing supports for transition age youth, and attention to housing market stock, are necessary for supportive transition to adulthood’ (Prince *et al.*, 2019: 41).

Cashmore and Paxman (2006: 238) stress the importance of young people leaving care having a ‘safety net of supports around them that they can trust and are willing and able to access. In reviewing the Australian and some international literature, Clare *et al.* (2017) argue that the professional quality of planning must be sufficient to counteract the structural disadvantages that young people exiting the care system face, specifically with securing accommodation. They also argue that, for the transition to be a success, it is imperative that the young person be engaged in the process and that workers engaging with these young people be supported through efficient resource allocation, skilled supervision and training to deal with their emotional reactivity (Leeson, 2010; Clare *et al.*, 2017). This is because workers are often caught between their own vision and compassion, the agency policies and

the care leavers' needs. Agency bureaucratic priorities may not allow workers to spend sufficient time with young people to work strong relationships, but the research on care leavers indicates that strong relationships between care leavers and after care workers is important for supporting this is key to supporting successful transition from care. Prince *et al.* (2019) note that young people transitioning from state care are expected to achieve 'independence' at a faster rate than those of their 19-year-old peers, with limited social, psychological and emotional support networks.

Transitioning from State Care into Independent Adulthood

In Ireland, Focus Ireland provides services for a large number of young people who are homeless and come from care backgrounds. It commissioned a longitudinal study in the late 1990s on young care leavers over a two-year period (Kelleher and Kelleher, 1998). It found that a large percentage of the care leavers involved in the study had experienced homelessness two years after leaving care. Of those leaving the care of the health boards, 68% had experienced homelessness within two years, as had 33% of those leaving special schools for young offenders. In 2012, EPIC (Empowering People in Care) highlighted a set of key messages from its research into young people's experiences in North Dublin of leaving care and the services they received in aftercare. These included:

- The importance of social support to meet the needs of young people leaving care.
- Facilitation of a more gradual transition from care to independent living.
- The need for a standardised service which allows adequate time to prepare to leave care, alongside allocation of an aftercare worker.
- Recognition of some young people having greater needs, and service provision of extensive support in such cases.
- Lack of administrative data and research which listens to young people's experiences of leaving care (Daly, 2012).

Carr, (2014) argues that cultural stigma associated with children who were committed to industrial schools historically, remains relevant to children in care today. Compounding this is

the reality that children in care and leaving care and their parents are not viewed as a powerful lobby group (Gilligan, 2009).

Shah *et al.*'s. (2017) research on the USA concludes that, nowadays, the time-frame for young adults who live in family homes to reach independence has increased, as a result of the high cost of housing, expensive secondary-level education and high rates of employment, influencing what Arnett (2019) calls 'emerging adults' to stay at home for longer periods. Those emerging from the foster care system endure the same set of challenges, but are often lacking a close and trusted family member to house them (Shah *et al.*, 2017). These authors (Shah *et al.*, 2017) found that the strongest two predictors of homelessness among 1,202 young people leaving foster care in Washington state related to educational experiences (numerous school moves) and permanent connections or lack thereof (numerous care placements). Havlicek (2011), in reviewing the US literature on the foster care experiences of young people ageing out of care, found that this subpopulation experienced many placements while in care, which led to a level of instability that continued into adulthood.

Schelbe (2018) argues that there is a need for greater understanding of how young people's life trajectory and development are inherently affected by ageing out of care and negotiating emerging adulthood with more challenges (connected to their care experience) and limited resources. The issue of how young people ageing out of care secure housing and manage housing insecurity needs greater research priority in order to shed light on how services can assist in this transition (Curry and Abrams, 2015). Schelbe's (2018) research on 'A Spot of My Own', a subsidised housing programme for young people ageing out of care in the United States, found that its achievements in providing stable housing for these young people were sometimes undermined by crises in other domains of these young people's lives (e.g., employment, education, mental health). Therefore, housing alone may not be sufficient to adequately assist young people ageing out of care.

Fowler, Toro and Miles (2009: 1453) point out that the absence of adequate assessments of housing accommodation challenges and the connected negative outcomes for young people leaving care 'limits the possibilities for policy and programmatic interventions in an already-

vulnerable population’. They contend that individual and adequate housing assessments based on individual needs would enable an understanding of the specific risks faced by young adults leaving foster care. Curry and Abrams (2015: 143) argue that policies on care leaving in the United States tend to favour self-sufficiency for those ageing out of care rather than the development of a ‘social support network’ around the young person. They argue that the latter approach is more appropriate, but that more research is needed on the type of supports which facilitate the most successful outcomes for these young people (Curry and Abrams, 2015; Van Breda *et al.*, 2020).

In a growing number of states in the USA, the age at which foster children must ‘age out’ of care has been raised to 21 years (McCoy-Roth, DeVooght and Fletcher, 2011; Curry and Abrams, 2015). Van Breda *et al.* (2020: 118) highlight the potential for similar measures here in Ireland, arguing that those transitioning out of care normally must leave home earlier than other peers living with family, and therefore have to become ‘rapidly self-sufficient within a brief, compressed period’. They highlight that grassroots-led arrangements in Ireland, whereby children remain living with their foster parents after reaching 18 years of age, lack the security of a formal arrangement, with only *ad hoc* access to professional support. As noted above, the availability and access to aftercare support services can also vary across different regions in Ireland, which in some instances consists of a telephone contact with a worker (Daly, 2012; Doyle, Mayock and Burns, 2012; Carr, 2014).

In the UK a project entitled “Making a House a Home” provides homes with assisted support packages for care-leavers and is like CAS for Care leavers. However, these properties later become long-term council tenancies which highlights that the availability of suitable and sufficient council-owned housing stock is an essential ingredient of the programme’s success (Dixon and Ward, 2017). Other issues flagged in the evaluation of this project concerned the availability of one-bedroom apartments, the need for skilled and experienced staff teams to assist young people to be responsible for and take control of their transitions, and the flow of suitable young people entering and exiting the project to ensure the sustainability of the model (Dixon and Ward, 2017). The evaluation also noted that the young people who had secured

dwellings under this programme enjoyed the individual and flexible support they received and were eager to choose and create their own homes. The report concluded that these young people ‘reported increased confidence, communication skills, and feelings of community and integration’ (Dixon and Ward, 2017: 10). However, the evaluation report also noted delays in the allocation of dwellings to care leavers, which created uncertainty for the young people in that ‘it required flexibility from existing carers and accommodation providers’ to ensure that young people could remain in their existing care placement until their new home was ready (Dixon and Ward, 2017: 10).

Conclusion

From the middle of the 19th century in Ireland, child welfare and protection regulations, for children in state care, began moving away from a punitive system based in workhouses to a more caring and educational environment centred primarily on foster care. The Kennedy Report of 1970 played a pivotal role in this shift from controlling to understanding in child welfare and protection policy. With the commencement of the Child Welfare Act, 1991, the State assigned Tusla as the first stand-alone child welfare and protection statutory body. However, when the young person ages out of care between 18 or 23 years, state support ceases. For many this is without the stability and permanence of a family home to fall back on – the ‘safety net’ which many of their peers enjoy.

Most of the research on young people in care and on their experiences on leaving care which has been reviewed in this chapter originates from outside Ireland. However this research clearly points to higher levels of need for those who leave care. The part stability in housing plays is instrumental in providing the foundation from which these young people can access other support services. The fear and reality of homelessness was cited in the literature as the biggest cause of anxiety for those about to ‘age out’ of the state care system. Extending the upper age limit for leaving care is one solution considered in the literature. The logic here is that nowadays, those who leave birth family homes do so at much older ages, and this cultural shift seen over the past few decades should also be reflected in the care system – particularly

since those leaving care have far less support from family and face an accelerated transition into adulthood and independent living with additional challenges from their in-care history. Evidence from the United States, UK and Australia indicates that lengthening the period of support for young people in care beyond the age of 18 reaps very significant benefits. For instance, Prince *et al's* (2019: 33) research on the USA found that 'Remaining in foster care at age 19 reduced the odds of homelessness, incarceration, and substance abuse'. Clare *et al's* (2017) smaller scale study on an after-care housing and support programme in Australia also highlighted significant benefits for the particularly vulnerable group of young people included in the programme. However, providing subsidised housing for those leaving care may provide only part of the answer. Wrap-around services which can support the young person's transition to independent living are equally important.

Chapter Two Policy and Service Context

Introduction

This chapter describes the policy and service environment within which the Capital Assistance Scheme (CAS) for Care Leavers programme operates. It is intended to contextualise the more detailed analysis of the design, implementation and operation of this programme that is presented in later chapters.

The chapter opens by examining policy on youth homelessness and on the support of young people leaving foster care and residential care. It describes the reforms to these policies introduced in recent decades and their relevance to reducing the risk of homelessness among care leavers. The history of CAS, which funds the provision of social housing by approved housing bodies, is also outlined, as are the motivations for extending this scheme to provide accommodation for care leavers, the design of the CAS for Care Leavers programme, and the rationale or 'logic model' which underpins the different parts of the programme design and the impacts, outputs and strategic objectives the programme is intended to achieve.

The second half of the chapter examines the service context in which the CAS for Care Leavers scheme operates. It looks at trends in the numbers of care leavers in receipt of aftercare support from Tusla in recent years, and the type of accommodation in which they live. It also examines progress in implementing the CAS for Care Leavers scheme in terms of the numbers, types and location of dwellings provided, and projected need for additional dwellings in coming years.

Policies on Homeless among Young People and Care Leavers

In recent years, numerous reports have been published by government which detail new policy initiatives to tackle youth homelessness. This reflects the expansion in the numbers of homeless people of all age groups and the implementation of provisions of the Child Care Act 1991, which is the primary legislation which governs the protection and welfare of children in Ireland. This Act increased government obligations to protect children's welfare, including the welfare of homeless children. Youth homeless policies are thus heavily centred on child welfare concerns (O'Sullivan, 2020).

The first dedicated *Strategy on Youth Homelessness*, published in 2001, sought:

to reduce and if possible eliminate youth homelessness through preventative strategies and where a child becomes homeless to ensure that he/she benefits from a comprehensive range of services aimed at re-integrating him/her into his/her community as quickly as possible (Department of Health and Children, 2001: 3).

The Way Home, the 2008 national policy statement on homelessness, included 21 recommendations. Number 15 dealt specifically with youth homelessness, stating that:

closer links should be developed between the Youth Homeless Forum and the Adult Homeless Forum in each area to improve and monitor the effectiveness of systems at local level and ensure continuum of care for the individual upon reaching 18 years of age (Government of Ireland, 2008: 24).

The guiding principle of the *Housing First Implementation Plan 2018–2021* is the provision of secure housing which will allow individuals to access other support services, thus giving them the best opportunity to permanently exit homelessness (Government of Ireland, 2018). *Housing First* acknowledges the diverse set of needs that young people experience and states its intention to continue developing knowledge and understanding in delivering *Housing First* to young people (Government of Ireland, 2018).

The preceding chapter highlighted the higher risks of homelessness among young people who have spent time in foster or residential care. Consequently, it is not surprising that minimising these risks and combatting homelessness among care leavers has been a central

theme in youth homelessness policy in Ireland. For instance, a 2013 review of the *Strategy on Youth Homelessness* acknowledged achievements in declining rates of youth homelessness and expanded service provision specifically for homeless children (Department of Children and Youth Affairs, 2013). However, the review also identified a need for service improvement for young adults, particularly those leaving the care system because they are at high risk of homelessness. The other key youth homeless prevention interventions provided for in the Youth Homelessness encompass:

- Developing family support and other preventive services on a multi-agency basis for children and young people at risk of becoming homeless. This intervention focuses on providing generic out-of-hours crisis intervention service and where necessary multi-disciplinary teams to target at-risk young people
- supporting local communities will be supported to assist children and young people at risk of becoming homeless and their families
- supporting schools to actively support children at risk of homelessness, e.g. truanting children and early school leavers, and
- supporting local communities to assist children and young people at risk of becoming homeless and their families (Department of Health and Children, 2001).

The *Rebuilding Ireland* national policy statement on housing, published in 2016, promoted an interagency approach to homelessness in general through providing supports in health services and housing provision. Action 1.7 of *Rebuilding Ireland* made a commitment to work ‘to ensure that young people leaving State care and at risk of homelessness are identified and catered for through appropriate housing and other supports for their needs’ (Government of Ireland, 2016). The 2017 *National Aftercare Policy for Alternative Care* set out plans for additional supports for young people exiting state care, such as aftercare support workers, aftercare plans and supports for social housing provision (Tusla, 2017). As mentioned in the preceding chapter, these aftercare supports are active until the young person reaches 21 years and can be extended to 23 years if the young person is in full-time education.

The latest government statement of policy on housing – *Housing for All* – which was

published in 2021 commits government to preparing a youth homeless strategy. This will be completed in 2022 by the Department of Housing, Local Government and Heritage who is currently in consultation with the High Level Homeless Taskforce.

Aftercare Polices and Supports for Young People Leaving Care

Statutory care ends on the young person's 18th birthday. Section 45 of the Child Care Act 1991 stipulates that social services *may* provide aftercare assistance to a young person in cases where Tusla is satisfied that the young person needs those services from the age of 18 to 21. The upper age limit can be also extended to 23 years if the young person is in higher education or engaged in a trade apprenticeship. After a maximum age of 23 years, all financial and service support ceases, at which point young people will be formally discharged from the aftercare provision.

An Assessment of Need determines the requirement for the allocation of an aftercare worker and subsequent service provision for the young person leaving care. This takes the form of an 'aftercare plan', which is:

... a written plan that is prepared by the aftercare worker and the young person/young adult in conjunction with their social worker and other key people in their lives. The plan is based on the assessment of need and aims to outline clearly the supports required for the young person in their transition into adulthood (Tusla, 2017: 19).

Since 2017 aftercare service teams have been established in each Tusla region (Tusla, 2019). In each region, Tusla also provides a drop-in aftercare service which has no age limit for access. This drop-in service offers guidance and support with applications for training allowances, grants, housing, social welfare; advocacy support for young people who require a referral to other services and a signposting service which informs them about other services they may wish to avail of. Some financial supports are available for care leavers (Tusla, 2017) such as an aftercare allowance of €300 per week for those engaged in full-time education or training. An aftercare grant – a once-off payment of €300 to assist with rent or deposit for setting up a home independently – is also available. For those entering third-level education, the Student

Universal Support Ireland (SUSI) grant provides means-tested funding for between two and four years. Like all other third-level students, care leavers are eligible for the Higher Education Access Route (HEAR) scheme, which offers college places on reduced points to students who have studied in schools that have been designated disadvantaged under the DEIS programme. Care leavers are also eligible for the Disability Access Route to Education (DARE) scheme, which offers similar support for those with disabilities (Tusla, 2017).

It is important to acknowledge that the enactment of the Childcare Act 1991 and the implementation of its various provisions constitutes a marked improvement on the child protection arrangements which preceded it. However, supports for young people leaving care have been subject to some criticisms in recent years. For instance, academics and advocacy groups have criticised aftercare services as discretionary and therefore *ad hoc*, with levels of service provision varying between geographical regions (Daly, 2012; Doyle, Mayock and Burns, 2012; Carr, 2014). This view is echoed by a report published by the Irish Social Services Inspectorate (2000) which concluded that aftercare supports provided by some residential centres it had inspected were *ad hoc* and heavily reliant on staff goodwill, and also commenced too late in the care-leaving process. A 2014 report from the Joint Committee on Health and Children (2014: 18) raised similar concerns, albeit on the basis of submissions received rather than an analysis of data on the service. Some of these concerns were addressed by the Child Care Amendment Act 2015, which introduced provisions concerning who can access an aftercare plan. It specifies that only those who have spent 12 months in care (with either Tusla or the HSE) in the five years between the ages of 13 and (up to) 18 are eligible. The 12-month threshold also extends to homeless children who have been accommodated under section V of the Act, and to those who have time spent in special care or in a youth detention facility (Tusla, 2017). Unaccompanied minors seeking international protection who are accepted into the State and directed to Tusla's child protection services are also eligible, in the same manner as any other care leaver, for an aftercare plan once they reach 18 years (Tusla, 2017).

Capital Assistance Scheme (CAS) for Care Leavers

The Capital Assistance Scheme (CAS) was introduced in 1984 to fund the provision of social housing by non-profit-housing providers, called approved housing bodies (AHBs). Under the scheme, 95-100% of the social housing costs are covered in the form of a loan which remains non-repayable as long as the dwellings are let as social housing (Central Statistics Office, 2017). Tenants pay a rent which reflects the cost of housing management and maintenance and in they can also claim a flat rate rent supplement from the Department of Social Protection towards these costs. Between 1984 and 2019, CAS funded the provision of 17,366 dwellings (Department of Housing Planning and Local Government, various years). Although the scheme can fund the provision of social housing for any qualified household, in practice the vast majority of housing which has been provided with CAS funding is for people with additional care needs, such as those who are homeless, older people and those with disabilities.

As mentioned above, the 2016 *Rebuilding Ireland* national policy statement on housing and homelessness committed government to provide accommodation for care leavers at risk of homelessness under the CAS Scheme (Government of Ireland, 2016). In August 2017, the Department of Housing issued a new circular on CAS to local authorities which explained how it would be extended to include care leavers (Department of Housing Planning and Local Government, 2017). The circular specified that eligibility for CAS accommodation would be extended to care leavers who had been assessed as being at high risk of becoming homeless. The key principles of the CAS for Care Leavers scheme are:

- Accommodation should be occupied on the basis of a long-term tenancy and should not be a temporary or transitional arrangement.
- The approved housing body acting in the capacity of landlord under the scheme should have the skills and expertise to work with care leavers who have complex needs.
- Accommodation should be dispersed in the community to avoid clustering of properties, while being located close to public transport, shops and public amenities to avoid social isolation.
- Accommodation can be a single occupancy unit; a two-bedroom parent and child unit, or

a two-bedroom peer-support unit, as required on assessment (Department of Housing Planning and Local Government, 2017).

As part of the planning for programme implementation, Tusla identified three strategic objectives of the CAS for Care Leavers scheme:

- Provide stable, long-term accommodation to vulnerable care leavers.
- Increase the number of care leavers living in stable, secure accommodation.
- Reduce the number of care leavers entering homelessness.

In addition, Tusla compiled a programme logic model (summarised in Table 2.1). A logic model is a 'road map describing the sequence of related events connecting the need for the planned programme with the programme's desired results... [which] can contribute to achieving intended programme goals and can lead to programme improvements' (W.K. Kellogg Foundation, 2004: 3). As in Table 2.1, logic models are commonly organised into four constituent steps. The first step is identification of the resources that are invested. These are often referred to as inputs, which typically include time, money, staff, stakeholders, etc. In the case of CAS for Care Leavers, the resources include funding for a programme manager to manage the scheme and for AHBs to enable them to buy or build social housing units for letting to care leavers. The second step relates to activities and service provision. In the case of CAS for Care Leavers, this involves identifying and acquiring dwellings suitable for care leavers, then letting the dwellings and providing ongoing support to enable the care leavers to maintain their tenancy. The third step consists of the programme outputs, which details the number of placements and nature of support activities. As detailed in Table 2.1, this includes the number of housing units acquired for the CAS for Care Leavers and care leavers accommodated. Finally, logic models specify programme outcomes – in other words, what happened as a result of the programme. Table 2.1 specifies that, for CAS for Care Leavers, these relate to increasing the proportion of care leavers living independently and decreasing the proportion in unstable accommodation (McCawley, 2001).

Table 2.1 *CAS for Care Leavers Programme Logic Model*

Strategic Objectives	1. Provide stable, long-term accommodation to vulnerable care leavers. 2. Increase the number of care leavers living in stable, secure accommodation. 3. Reduce number of care leavers entering homelessness.
Programme Inputs	1. Costs • Department of Housing: funding for a total of 205 properties in 2017, contingent on applications to be made by AHBs • Department of Children, Equality, Disability, Integration and Youth (DCEDIY): Funding for project manager. 2. Staff • Aftercare Steering Committees (ASCs) identify care leavers in need and allocate care leavers to CAS accommodation • Project manager • DCEDIY: Two staff available when necessary, to perform co-ordinating role • Tusla (national): Four-person CAS project team • Tusla (area): Dedicated aftercare workers provide support to each care leaver CAS tenant • Department of Housing & local authority staff to process applications • AHB staff and resources for identifying and acquiring property, and to carry out duties as 'social landlord' 3. Housing market: availability of suitable properties 4. Data: Tusla survey of care leaver housing need
Programme Activities	1. Identification of care leavers in need of (and suitable for) CAS accommodation (ASCs) 2. Identification and acquisition/construction of suitable properties (AHBs) 3. Processing applications (AHBs, LA, Dept of Housing) 4. Coordination of multiple agencies involved (Project manager, DCEDIY) 5. Allocation of housing to care leavers (LAs, ASCs, AHBs) 6. Ongoing support provided to care leaver CAS tenants to help them sustain their tenancy (Tusla, AHBs) 7. Research into care leaver CAS tenants' outcomes (Project manager, Tusla, ASCs)
Programme Outputs	1. Number of housing units acquired 2. Number of care leavers in CAS accommodation 3. Numbers of care leaver CAS tenants in place at +12 months, +2 years etc 4. Survey of care leaver CAS tenants 5. Data on care leaver CAS tenant outcomes
Programme Outcomes and Impacts	Outcomes: 1. Increase in the proportion of care leavers living independently (as captured in Tusla statistics) 2. Decrease in the number of care leavers in unstable accommodation (Represented in Tusla statistics as 'Other' accommodation, a category which includes accommodation such as psychiatric services, disability services, mother and baby centres, and prison, in addition to homelessness services) 3. Care leavers return high level of satisfaction with accommodation and personal well-being Impacts: 1. Improved outcomes for people leaving the care of the State 2. Care leavers not entering cycle of homelessness

The process used to select care leavers for participation in the CAS for Care Leavers scheme is multi-faceted and multi-stage. The Tusla social worker determines eligibility in the first on the basis of the complexity of a careleavers' needs and their risk of homelessness. The social worker informs the local authority responsible for the district where the care leaver is resident and the AHB is invited to provide accommodation. The care leaver interviewed by the AHB link workers and personnel to determine suitability to take up the tenancy and sustain this tenancy over the long term.

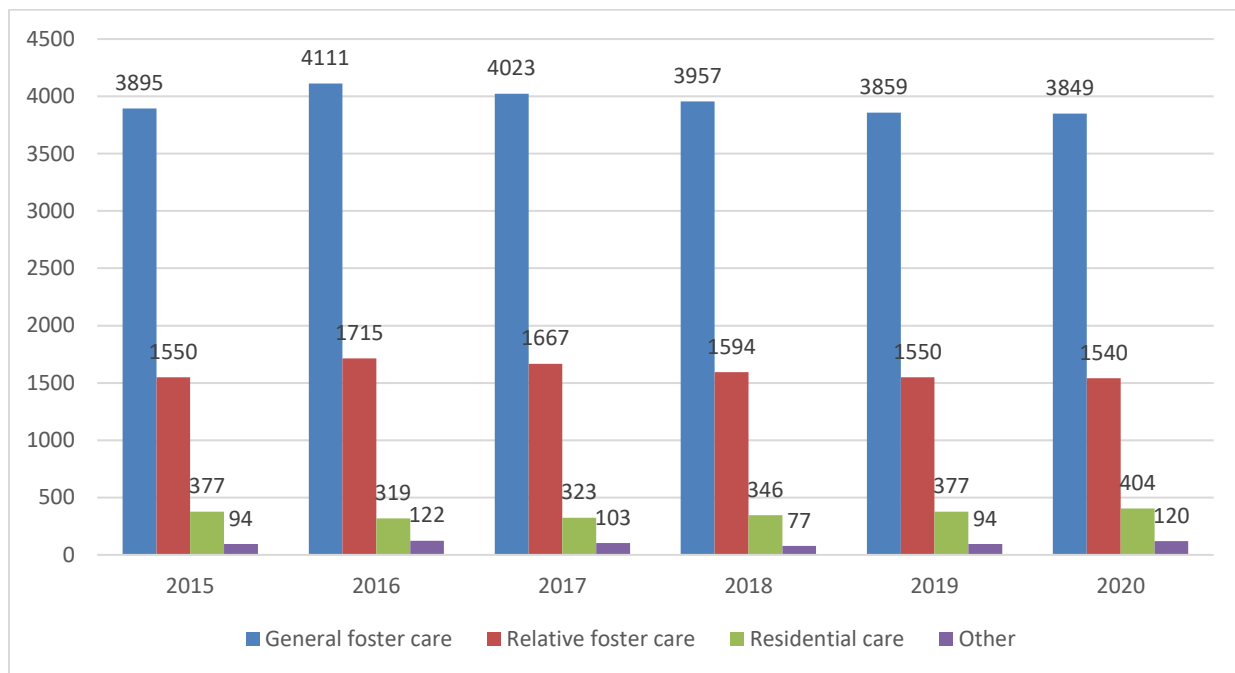
Young People in State Care and in Receipt of Aftercare Services in Ireland

Number of Young People in Care

Tusla, the national Child and Family Agency, aims to support and promote the development, welfare and protection of children and young people. When Tusla forms a view that the health, wellbeing or development of a young person cannot be assured at home, the child or young person is received into care. As of Q3 2020, there were a total of 5,913 children in care in Ireland. This figure includes 65 separated children seeking asylum in Ireland (see Figure 2.1).

Children admitted to care are placed in different placement types. In Q3 2020, 91 per cent (5,389) of children in care were placed in foster care with an approved foster carer (3,849) or a foster carer who was a relative (1,540). In total, 7 per cent (404) were placed in general or special residential services. Of the 142 general children's residential centres nationally, over 90 per cent are community-based and staffed on a 24-hour basis by social care workers and other managerial and therapeutic staff. Special Residential Care is described as a short-term, stabilising and safe placement in a secured therapeutic environment. Of those placed in residential care, 390 (96 per cent) were accommodated in general residential care and 14 (3.4 per cent) were in special residential care at the end of Q3, 2020. In addition, 120 (3 per cent)

Figure 2.1 *Children in Care, by Type of Care, 2015–2019*



Source: Tusla (various years).

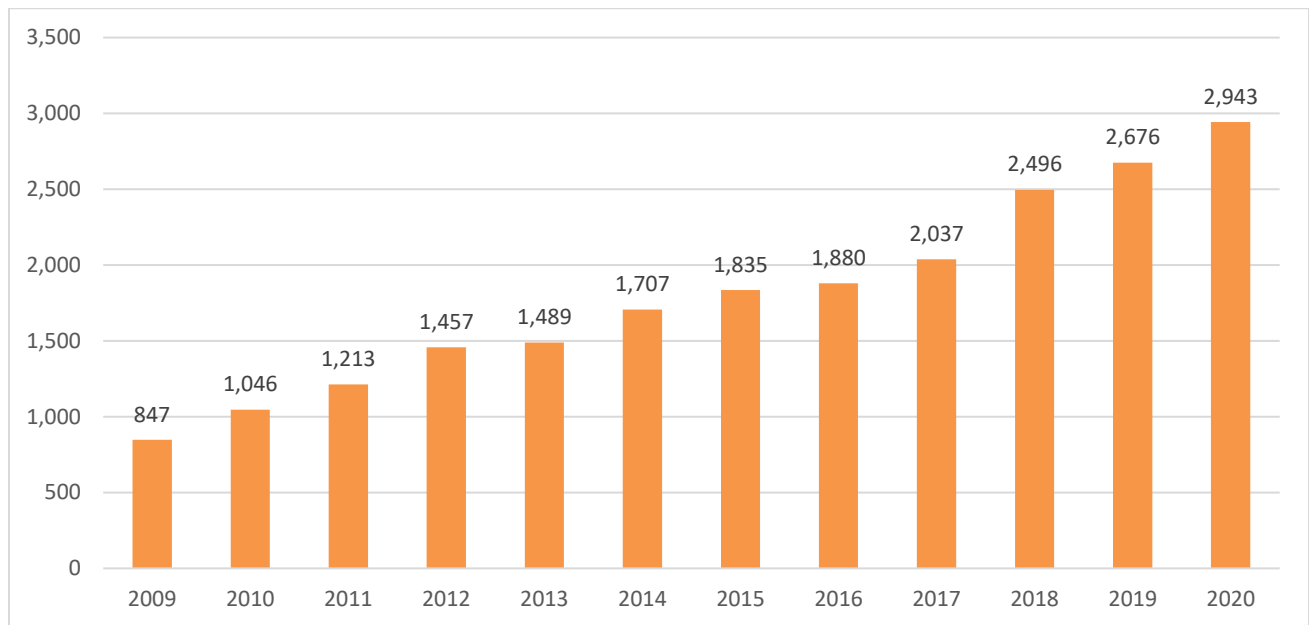
were accommodated in alternative placements such as supported lodgings, at home under a care order, in a disability unit, a drug and rehabilitation centre or in a detention school/centre. Figure 2.1 indicates that, overall, the numbers of children in general foster care have declined since 2015 by 5.2 per cent and the numbers in residential care have increased marginally (Tusla, various years).

Number of Young People in Receipt of Aftercare Supports

In 2019, 945 children were discharged from state care; 55 per cent (519) of these were young people turning 18 years old. The second largest group, 14 per cent (141), were aged between 15 and 17 (Tusla, various years).

Figure 2.2 shows the numbers of young people availing of aftercare supports. It reveals that, at the end of 2020, 2,943 young adults were in receipt of these services. The total number of

Figure 2.2 Care leavers in Receipt of Aftercare Supports from Tusla, 2009–2019



Source: Tusla, (various years).

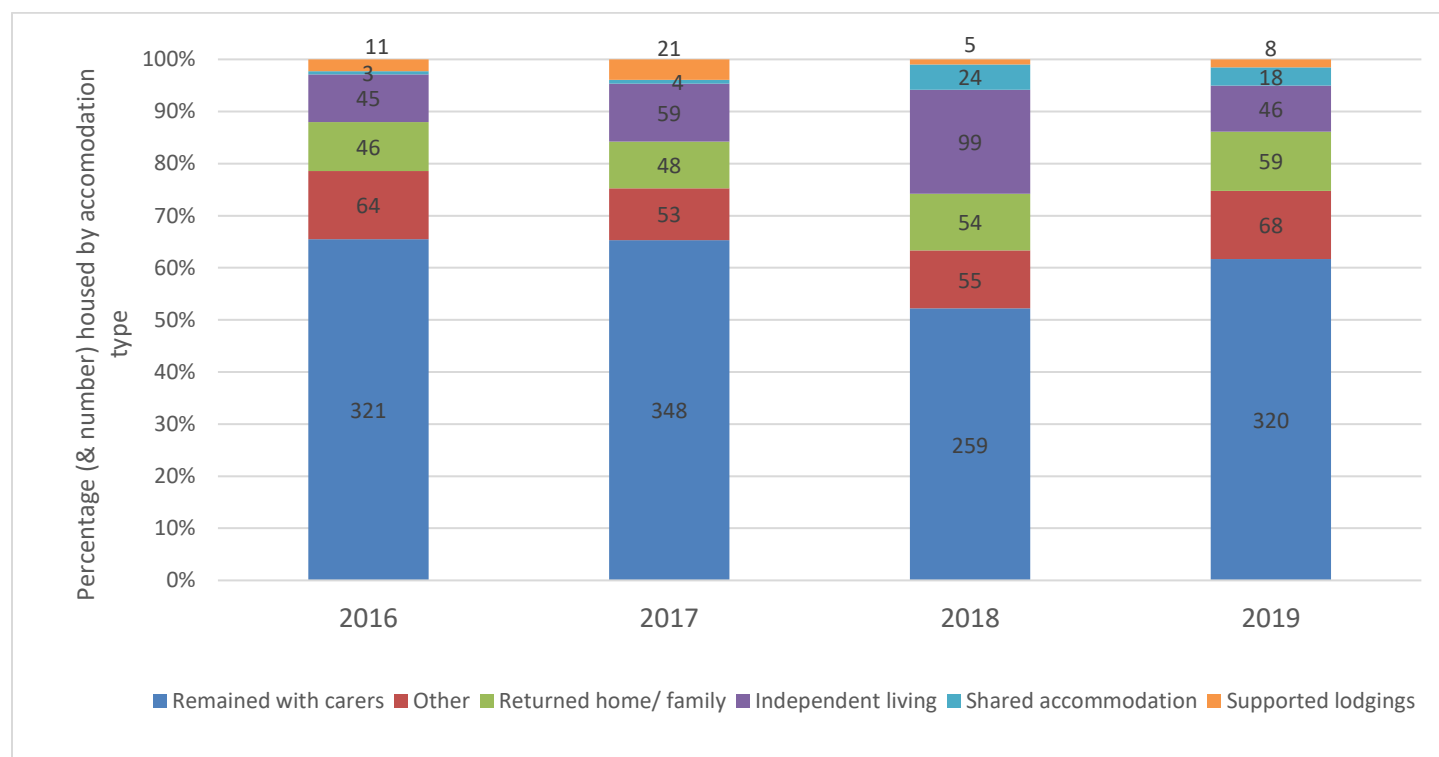
referrals for aftercare services for the year 2020 was 660, with 98 per cent (646) of these referrals being eligible for an assessment of need (personal communication with authors, from Tusla, 24 February 2021). Of those currently availing of aftercare services, 82 per cent (2,421) have an aftercare plan in place.

The Tusla aftercare service policy specifies:

The role of the aftercare service in housing is to identify housing needs as part of the assessment of need and aftercare planning in collaboration with other key stakeholders. When a need is identified it is the role of the aftercare worker to support the young adult to secure and sustain accommodation and if the risk of homelessness arises to work preventively with the local housing authority (Tusla, 2012: 9).

Figure 2.3 shows the different types of housing used to accommodate the 2,038 young people discharged from state care at 18 years old between 2016 to 2019. The majority of 18-year-olds leave care with secure, stable accommodation in place. In 2019, 62 per cent (320) of

Figure 2.3: Living Arrangements for Young People Aged 18 years Discharged from State Care, 2016–2019



Source: Tusla (various years).

those in receipt of aftercare services through Tusla continued to reside in their foster home. A further 11 per cent (59) returned to live with their family of origin. Almost one in 10 (9 per cent or 46 people) moved into independent living arrangements, 3 per cent (18) were housed in shared accommodation and another 2 per cent (8) resided in supported lodgings. The 13 per cent (68) residing in what is termed ‘other’ are unspecified but can sometimes refer to those young people accommodated through psychiatric services, disability services, living in mother and baby centres, in prison, staying with friends and those who were homeless.

Therefore, for a small number of state care leavers, certain types of accommodation are unavailable due to the complexity of their needs. In certain circumstances, their ability to access stable housing or remain in their foster-care placements can be reduced by educational shortcomings, mental health difficulties, intellectual, physical or sensory disabilities, and alcohol and substance abuse, which can reduce their capacity to access and maintain meaningful employment (Moran, McGregor and Devaney, 2017).

Capital Assistance Scheme for Care Leavers Scheme Provision and Forecasted Need

Progress in Implementing CAS for Care Leavers

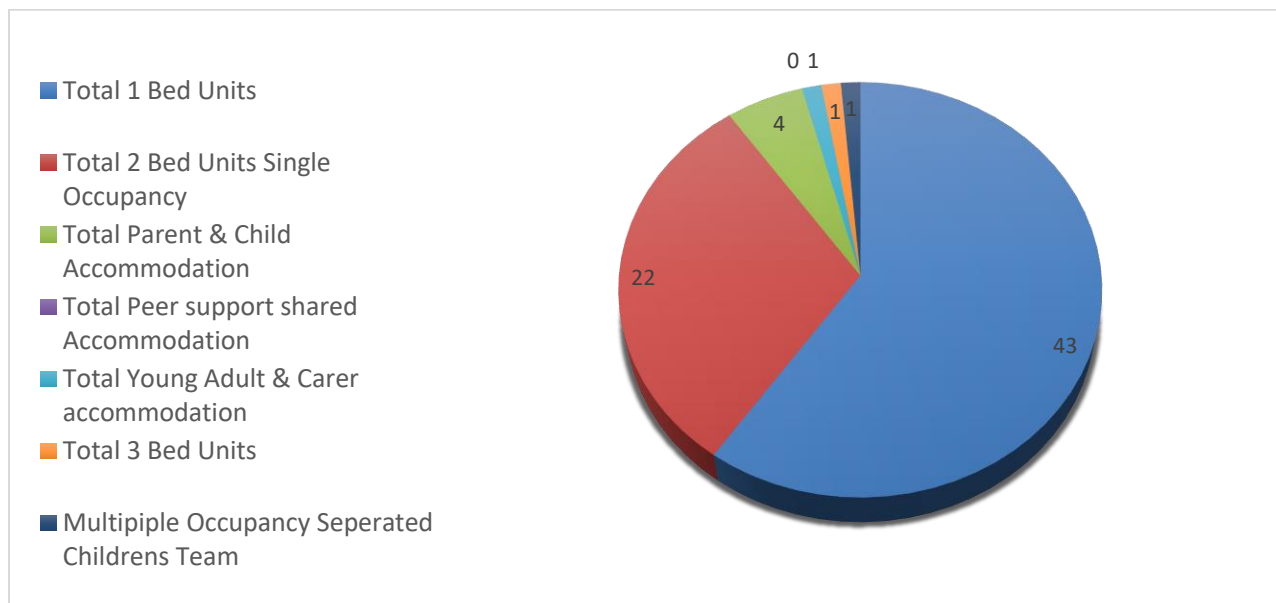
A year after CAS for Care Leavers began, the Department of Children, Equality, Disability, Integration and Youth (DCEDIY) commissioned a report to support the implementation and procedural processes of the CAS for Care Leavers scheme. That report found that the scheme was slow to get started across Tusla regional areas for a number of reasons, including lack of awareness among Tusla aftercare managers of the specific requirements of the scheme and a perceived lack of availability of one-bedroom apartments. In addition, many AHBs regarded the CAS process as cumbersome (Research Matters, 2018).

The first care leaver took up tenancy in the CAS for Care Leavers programme in early 2019 (Tusla Annual Report, 2019). The latest available statistics on dwellings provided under the CAS for Care Leavers scheme are shown in Figure 2.4. These indicate that in April 2020 72 properties had been provided under the scheme. Figure 2.4 also shows the five different types of dwellings provided to date, all of which were acquired and none of which was purpose-built.

By quarter four of 2020, the number of young people accommodated throughout Ireland in the CAS for Care Leavers scheme had risen to 60. These apartments were provided by three approved housing bodies: Focus Ireland (37 units), the Peter McVerry Trust (20 units) and Don Bosco Care (3 units). Tusla statistics also reveal that, since April 2020, these three AHBs have completed or are in the process of completing the acquisition of 21 additional dwellings for inclusion in the CAS scheme (although these have not yet been let out to tenants), bringing the total number of CAS properties to 93 across a total of 14 Tusla operational regionals.

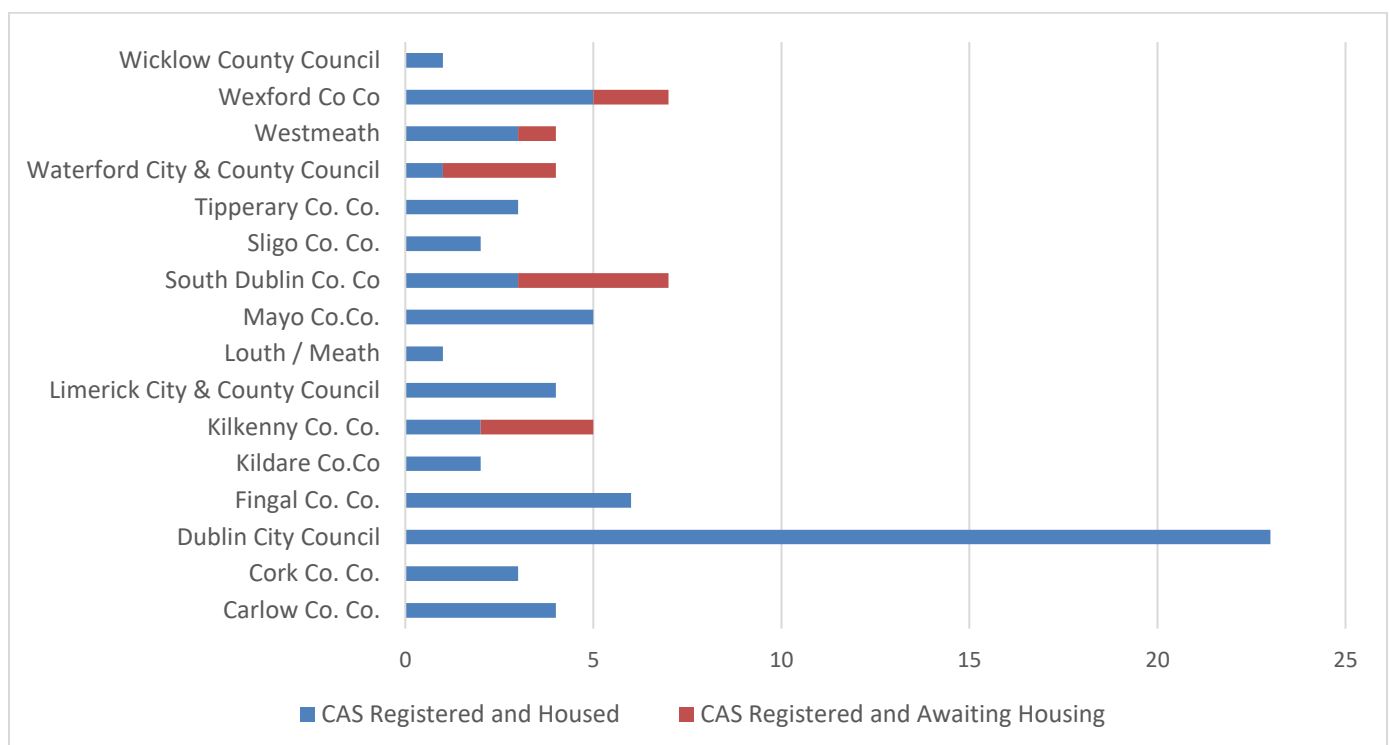
The spatial distribution of these dwellings is detailed in Figure 2.5. It reveals that just under half of these dwellings are located in Dublin City and County and the remainder distributed in small numbers across most of the remaining local authorities in the country.

Figure 2.4: Type of Dwellings Provided by CAS for Care Leavers Scheme, April 2020



Source: Data provided to the authors by Tusla.

Figure 2.5 Location of Total Dwellings Provided by CAS for Care Leavers UP to Q4, 2020

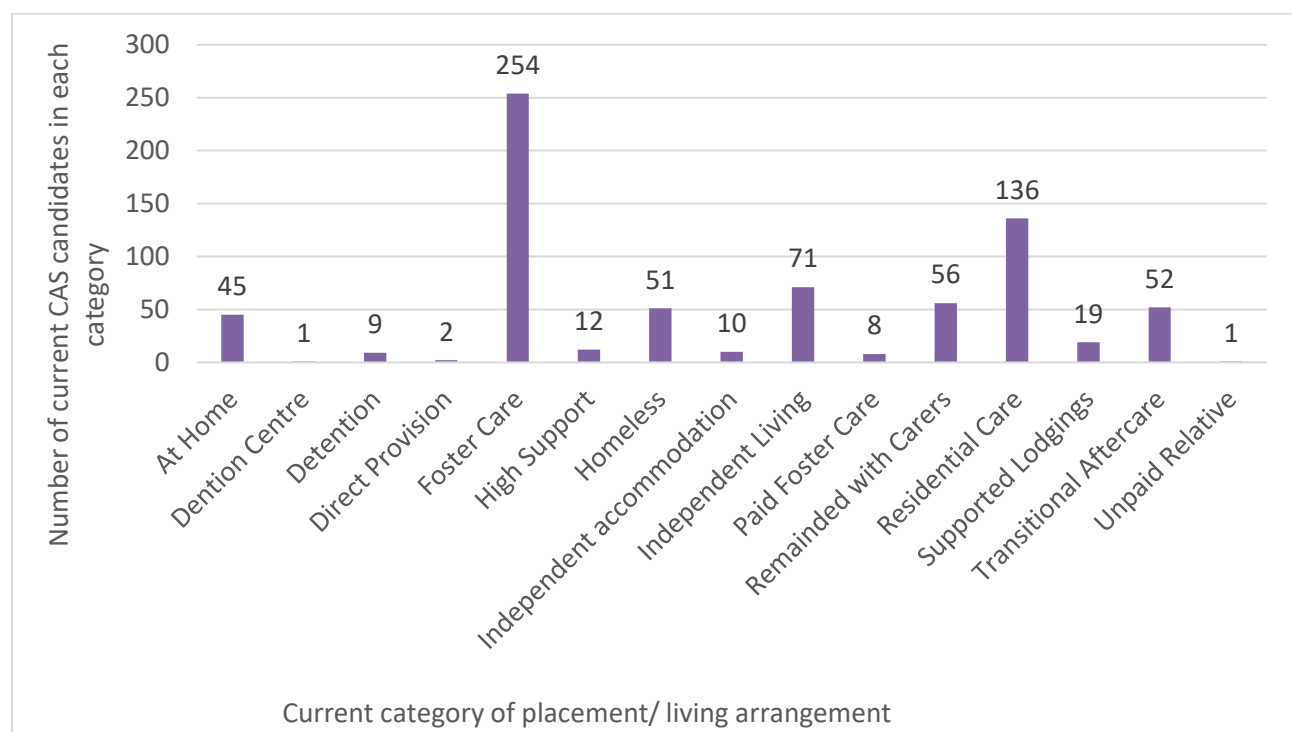


Source: data provided by Tusla

CAS for Care Leavers Scheme: Forecast 2020–2022

Tusla estimates that approximately 747 young people (54 per cent male, 46 cent female) aged 18 and above will meet the criteria for the CAS for Care Leavers scheme during the period 2020 to 2022. Figure 2.6 details data collected by Tusla on the current living arrangement or placement type of the 727 of these young people who were aged 17 and above and were recommended for the CAS scheme. The largest proportion (35 per cent) were still residing in state foster care, while the second largest group (19 per cent) were living in residential care. Smaller numbers were living independently (10 per cent), in transitional aftercare (7 per cent), living with foster carers (8 per cent) or had moved back to their birth family home (6 per cent). The number of young people stating they were homeless accounted for 7 per cent of the care leavers qualified for entry into the programme. However, none of the living arrangements or placement types listed in Figure 2.6 represents long-term permanent housing solutions for these vulnerable young people.

Figure 2.6 Current Placement Type/Living Arrangement of Tusla-identified CAS Candidates Countrywide (2020–2022)



Source: Data provided by Tusla.

Estimating the need in different locations throughout the country is also essential for forecasting where CAS for Care Leavers dwellings need to be procured. Table 2.2 sets out Tusla's estimate of the total number of care leavers eligible for CAS for Care Leavers in the period 2020 to 2022 for each Tusla aftercare area where the scheme is in operation. It reveals that Cork, Dublin South Central and Waterford/Wicklow are the counties where the highest number of potential applicants live.

Table 2.2 also disaggregates estimated future need by the ages of the potential clients. Cork again appears to have the highest number of potential CAS candidates currently aged 17 years and 19 years. Figure 2.7 shows that, despite some variance, most regions have recorded a

Table 2.2 Forecast of CAS for Care Leavers Applicants by Age and Tusla Aftercare Service Area, 2020–2022

Tusla Aftercare Service Area	Age of potential CAS candidate in years									
	17	18	19	20	21	22	23	24	25	Total
Carlow/Kilkenny/ S. Tipperary		5	9	6	3	2				25
Cavan/Monaghan	1	10	8	8	5	1	1	2		36
Cork	39	19	27	18	14	12	5	2		136
Donegal	5	4	2	4	2			1		18
Dublin South Central	6	19	19	22	17	12	6			101
Dublin S.E.W.	1	8	12	6	7	2	6	3	1	46
Dublin S.W.	18	16	21							55
DSW/Kildare/West Wicklow			1							1
Galway		1	6							7
Kerry	3	6	12	1						22
Kildare/West Wicklow	14	14	13							41
Limerick	1	3	8	4	3	1	1			21
Mayo	2	4	6	6	3		2	1	1	25
Midlands		5	9	8	6	5	1		1	35
North Dublin			8	2	6	8				24
Roscommon		1	1	2	2		2			8
SCSA		1	1	4	2		1	1		10
Sligo/Leitrim/ West Cavan			6	9	12	12	9			48
Waterford/Wexford	10	22	23	13	9	6	2	2		87
Total	100	138	192	113	91	61	36	12	3	747

Source: Data provided by Tusla.

potential demand for the CAS for Care Leavers programme over the coming years. There appear to be significant numbers of potential CAS applicants of all ages forecast in Dublin South Central and the Waterford/Wexford regions, and also in Dublin South West, Kildare, and West Wicklow. The largest number of potential applicants in many of the regions listed appear to be aged between 17 and 21 years old.

Tentative forecasts up to 2022 and beyond suggest that the largest proportion of CAS for Care Leavers dwellings will be provided by the three AHBs currently involved in the programme: the Peter McVerry Trust (165 dwellings or 24 per cent of total), Focus Ireland (343 dwellings or 50 per cent of total) and jointly by a partnership of both these AHBs (137 dwellings or 20 per cent of total). The remainder is forecast to be provided by AHBs not previously involved in the programme. A total of 23 dwellings (3 per cent of total output) will be provided jointly by the Peter McVerry Trust and Respond Housing, while Galway Simon will provide 0.9 per cent of output (six dwellings), while a small number of areas have yet to be allocated an AHB (1.1 per cent).

Conclusion

This chapter examined the policy context for youth homelessness and accommodation provision for young people who leave state care. The Child Care Act of 1991 increased the government obligation to protect the welfare of homeless children. Subsequent government strategies and policies on child welfare have focused on youth homelessness. Combating homelessness among care leavers was specifically referenced in the 2013 *Strategy on Youth Homelessness* and the 2016 *Rebuilding Ireland* policy statement. Substantial improvements to the supports for care leavers were introduced by the 2017 *National Aftercare Policy for Alternative Care*. Aftercare service teams were established in all Tusla regions. These teams provide additional supports for eligible care leavers such as access to an aftercare plan encompassing aftercare support services and financial assistance up to a maximum age of 23 years old.

The CAS scheme was originally introduced in 1984 to fund the provision of social housing by

non-profit housing providers (AHBs). In 2017, the programme was extended to care leavers, assessed as being at high risk of becoming homeless. This marked a further important expansion of the supports for young people leaving care. The objective was to increase the number of care leavers housed in stable long-term accommodation, hence reducing the numbers leaving care and entering homelessness. A total of 60 young people have been housed in the CAS programme since the acquisition of dwellings began in 2017. However, analysis of forecast metrics compiled by Tusla indicate that much higher numbers of care leavers may be eligible for the CAS scheme over the next three years.

Chapter Three From Care to CAS: Care Leavers' Experience of Transitioning to Independent Living

Introduction

In this chapter, care leavers' experiences of leaving care at the age of 18 and moving into their new home provided by the CAS for Care Leavers programme are examined. The fears and challenges they face during this period are described, together with improvements in their quality of life and life chances as a result of securing a social housing tenancy in a CAS-funded dwelling.

This analysis draws primarily on the in-depth interviews conducted with the care leavers currently living in CAS-funded accommodation and to a lesser extent their aftercare workers who are employed by Tusla and staff of the three approved housing bodies currently involved in providing dwellings under this programme. Its purpose is to identify the elements of the CAS programme which worked well for the programme clients and the aspects which didn't. This is intended to inform the more detailed analysis of the design and implementation of this programme, presented in later chapters.

Turning 18: An Anxious Milestone

Generally, an 18th birthday is considered to be an important milestone that marks the commencement of the transition into adulthood. However, many young people who have grown up in care associate this occasion with a mixture of anxiety and fear (Cunningham and Diversi, 2013). This tendency was clearly evident among the CAS for Care Leavers clients.

One young male care leaver described how worry and confusion affected relationships in his foster home. His departure from education and consequent withdrawal of his aftercare support services from Tusla during the same period compounded his difficulties:

I didn't know what was going on... things got a bit rough in the foster placement, like, as in the support and Leaving Cert and stuff ended then because I wasn't in education from Tulsa's point of view, they weren't going to support [me] anymore. (CAS 10).

In addition to coping with anxiety and change, the sudden loss of support networks was particularly challenging and frightening, according to many of the care leavers interviewed. A female care leaver said these pressures had very negative effects on her mental health:

I self-harmed and I was going through a really, really dark stage and I was like I feel like nothing. And especially when the State doesn't take care of you and you're just put into homelessness. And like what did I do to deserve this life? I didn't fuck up. It was my ma and my da that fucked up. It was my family that fucked up (CAS7).

One of the aftercare workers interviewed argued that this stress can negatively affect care leavers' relationships and result in poor decision-making:

So, the 18th birthday for any other young person in the country is this big happy occasion where they're turning 18 and this, that and the other, but for care leavers it can sometimes be a huge cause of anxiety and 18 isn't the happiest birthday they're going to come across. Just they have no answers, and they don't have answers ahead of time and sometimes it can then spiral into just, you know, that whole fight or flight thing. And then, you know, it can – the anxiety for them brings up other stuff then and they can't necessarily maybe focus on education or relationships properly or they make bad choices. They're just – they go into this spiral of being... a little bit out of control (KI 10).

Notably, all of the AHB representatives interviewed for this research independently used the term 'cliff edge' to describe the experience of ageing out of care. For instance, KI 4 said: 'This "18 cliff" which the kids talk about, this is like a cliff edge at 18 – they have all these supports, and everything is reasonably ok and then I fall off this cliff at 18'. This view was echoed by KI 2: 'It's like you just throw them off a cliff. Because at that age, 21, 22, they're not able to cope with adult life'. Two other interviewees, also from AHNs which provide CAS for Care Leavers accommodation, made similar points:

There is such a gulf between the support they get in residential care off of Tulsa up to the time they age out and it's like they just drop off a cliff... And once he hits 18 or once he ages out all that support is gone and it's like you can – you know, you get all these supports up until Thursday. You turn 18 or 23 on Friday and that's

it, the rug is completely pulled from underneath you. And that's a huge problem (KI 1).

A very strong part of our ethos is that we provide support to people for as long as they need it so that people don't have a sense that at 21 or 23, if they still have complex needs, that they just fall off a cliff in terms of support, so that it is there on an ongoing basis if somebody needs it (KI 3).

Care leavers described their lack of preparedness and confusion when their support systems reduced or changed after age 18. For example, one female remarked that there was nowhere safe to go when care leavers aged out of care since aftercare units 'put all care leavers that they had out on the street because there was no move-on [accommodation] for us' (CAS7). In the broader context, some of the care leavers interviewed commented that young people who have grown up in care may not be ready or capable of transitioning successfully into adulthood without the support structure they had while in care:

The main problem I feel is that there's, from a young age growing up in care, there's an over-reliance on the care system to support you. So, once you hit a certain age and you're thrown out on your feet you don't really know what to do. You don't know your arse from your head... then you get no support whatsoever after a certain age (CAS2).

The fear of becoming homeless after ageing out of the care system was an enormous concern for all care leavers interviewed for this study. One young woman said: 'Since I turned 17, I was terrified I'd have nowhere to live' (CAS11). A male care leaver recounted experiencing similar worries:

Like when you, as you kind of, you get to 18, you've gone through residential or you've gone through foster care... then you get told, oh, you know what, your time's up here, you're going to have to go to a hostel. And that hostel, you don't know who you're going to meet in that hostel. You don't know what's going on in that hostel (CAS9).

As mentioned in Chapter One, young people who have been in care have higher risks of homelessness compared to the young population at large. Homelessness was a realistic fear for the care leavers interviewed, and several had experienced homelessness. One young man commented on how getting his CAS tenancy saved him from being homeless:

I was in a hotel up to the emergency accommodation. So, everything was up in the air really. I was glad to get my own place. It was crazy. I didn't even know where I

was at, do you get me? It was mad... I am just happy that I have a house and I wasn't homeless (CAS15).

Not surprisingly, homelessness was a very stressful experience for these young people. One male commented directly on his experience of sleeping rough for six months after leaving care before finding his way to the CAS scheme:

So, at the time it was hard sleeping rough, like under just like train stations and buses and warehouses, abandoned warehouses and all. So, it was just trying to find places to sleep just to keep going. So, then I had to quit my job because I was on the streets. I was working in [a supermarket] at the time as well. So, then I quit that because I was homeless, and I didn't feel right because I hadn't had a shower, or I wasn't doing – so I just felt like people were like talking around me or like looking at me like that (CAS8).

A female care leaver explained how moving to homeless accommodation after leaving care was an overwhelming experience:

They [care leavers in homelessness] don't have their own beds. They don't have their own door to close and say, this is home... They're constantly worrying like where are we going to be next week? What's going to happen for us in a couple of days? Like where are we going to get food? (CAS7)

She further highlighted the unfairness of care leavers being subjected to homelessness and other enormous challenges through no fault of their own but from the mistakes of their parents, questioning why care leavers' rights are not prioritised more,

We're [care leavers] not our fault, it's our parents. It's our family that are the fault. We shouldn't be getting the backlash. We shouldn't be paying for their consequences. You know? It's hard enough as it is. We went through a lot of stuff. So why can't we have a good life? Why can't we have the quality of life as the people we see walking by? Why can't people fight for our rights? (CAS7).

CAS for Care Leavers Tenancy – a secure foundation on which to build a future

For all the CAS for Care Leavers clients interviewed, the CAS tenancy offered security and stability in housing, which was very much appreciated and valued, because it gave them a foundation from which they could move their lives forward. The allocation of a CAS tenancy was a positive step on the road to independence for these young people and was assessed by all of the care leavers interviewed as an enormously beneficial development in their lives.

For instance, a male CAS for Care Leavers client reflected that having a secure home was the biggest benefit of the programme in his view: '[CAS] definitely prevents us from being homeless I think is the biggest thing... Come out of care, like, and they've nowhere to go in the past, like. And it [CAS for Care Leavers] definitely stops that. And it gets people set up for life and that' (CAS10). A female care leaver agreed:

I could complain about CAS all I want, but if it wasn't for that scheme, I'd be homeless... when I moved into this property, I didn't really have much of a choice. It was either move into this property or be homeless. See, this was one of the only options that I had here (CAS11).

In addition to providing security for some care leavers, the CAS-funded home represented an important new start insofar as it made it possible for them to break away from previous difficulties in their life. In this vein, CAS7 reported: 'My family are very unstable and they're not – like I wouldn't go back with them. I don't even talk to them because they're not good for my health. But so, I got the CAS, and I was delighted with that now'. A male care leaver said: 'So, [in homeless accommodation] it would have been kind of like three steps forward, one step back almost. But I'm after taking three steps forward [with CAS] and it's not one step back' (CAS9). This interviewee had lived in his CAS-funded dwelling for two years at the time of interview and he hoped that it would provide a stable foundation on which to build his adult life:

Genuinely like that it [CAS apartment] kind of, it takes me away from a serious situation... having a place to live almost it's a platform, you can build from there, like, you know what I mean? ... I'm not gone under almost... if I had gone through a hostel or homeless accommodation, it probably would have taken – like it [getting council housing] probably would have took an extra four or five years easily then (CAS9).

Another male client who had lived in a CAS for Care Leavers dwelling for a year when the interview was conducted reflected that the programme had been successful in providing this stable foundation for him: 'Yeah, [I'm] more independent, I'd say. Probably just getting up and doing my own thing' (CAS14).

The CAS for Care Leavers clients interviewed acknowledged that this programme had provided them with secure and affordable housing which would have been difficult or impossible to achieve through alternative means because of long waiting lists for access to social housing or, through the private rental sector, because of stigma, lack of references and difficulties in finding landlords willing to accept the Housing Assistance Payment (HAP) subsidy for private renting tenants. For instance, one care leaver, the parent of a young child, said: 'So I'd been on HAP for two years trying to look for a place, but no-one would take me because I hadn't got any references' (CAS3). A female care leaver reported similar experiences: 'A lot of the private rented placements were hesitant on taking me because I came from care...like I could complain about CAS all I want, but if it wasn't for that scheme, I'd be homeless' (CAS11).

Key informants from Tusla and the AHBs interviewed for this study were also very positive about CAS for Care Leavers and the benefits it conferred on those able to avail of properties. For example, a senior Tusla staff member welcomed the fact that the establishment of this programme marked:

[a] substantial commitment from the State to recognise that certain young people through their life experiences, the trauma they've experienced, the fact that they required care, are a group of... that the State needs to continue to be committed to. And I think the programme itself represents that for starters. I think it is a confidence-building programme that really and truly recognises our commitment to young people in aftercare (KI 15).

All of the key informants interviewed relayed the delight and positive experiences of young people they knew who had moved into CAS properties. A manager in one of the AHBs involved in implementing CAS for Care Leavers described her involvement with the scheme as 'a pleasure to be part of' and said that seeing young people moving in was a 'highlight of my career' (KI 5). This positive assessment was echoed by the Tusla aftercare workers responsible for supporting the CAS for Care Leavers clients. KI 12 said the establishment of the scheme was

a very positive development and that a lot of the young people were ‘very happy and content in their placements’. KI 11 said it was an ‘incredibly positive experience’ for a young person they worked with, while KI 10 referred to the benefit of having a dedicated support worker and said that CAS is ‘a great set-up’. The joy and relief experienced by a young man who had complex mental health needs on securing a CAS for Care Leavers tenancy was described by KI 11:

And the young man was just emotionally taken aback. For a young person with mental health that never really showed emotion, that day that I brought him down to show him his new [home] – he cried. He hugged. He was ecstatic. For him to have a place to call his own, to actually write his address and not c/o – care of – [the AHB] was massive, massive for that young man. But just that ownership, that identity. Like that young man just took off. From the day he got his keys he took off from the two years I was working with him, and the difference in him. Different months he’d be ringing me, calling me – ‘[name], you coming down for a cup of coffee? Do you want a—?’ Like just the joy he got of inviting people into his home... He felt like he had a place where he could put his stuff, his belongings.

KI 9 related a similar vignette about one of her clients:

And I remember them asking – we were coming down in the lift during the move and them asking me, ‘Like how long I can stay here?’ and kind of saying, ‘Well, this is it, really, like. It’s up to you how long you stay here’. That was a very kind of a moving moment to be part of for them when they realise that this was home if they wanted it to be home.

In common with the care leavers interviewed, many of the key informants from Tusla and the AHBs identified the security of tenure provided by the CAS for Care Leavers scheme as a key benefit. For instance, a Tusla aftercare worker highlighted:

I suppose having the security of tenure, the long-term lease, having an RTB [Residential Tenancies Board] rent and tenancy sustainment worker from [AHB] will stay alongside the young person in tenancy beyond the aftercare worker. Having the rent cap is a great idea as well. So, yeah, a lot of positives I would see. It’s a very good development and that it’s a national model as well (KI 13).

From a practical point of view, the key informants also said the CAS for Care Leavers scheme was beneficial for young people who might struggle to identify accommodation for themselves or who might not make a good first impression on a landlord, which is crucial in a competitive market. An aftercare worker said this was particularly beneficial for those who would struggle to do an interview with a landlord (KI 12) or those who would not present well to a landlord (KI

9 mentioned this). Another aftercare worker believed there might be some discrimination against care leavers on the part of private landlords:

So, it does depend on the landlord and I suppose how many people he has viewing it. But, like, you know, nine times out of ten they're going to choose the person with the work reference, the previous landlord reference, the one maybe who doesn't have a Tusla aftercare worker with them, do you know what I mean? (KI 10).

The Challenges of Independent Living

Once the CAS apartment had been allocated and young care leavers were handed the keys to their new home, the enormity of living independently for the first time in their lives began to dawn on them. Some fared better than others in this transition. Among the small sample of care leavers interviewed for this study, young people who had experienced living semi-independently, as in a residential care or aftercare residential accommodation, appear to have managed the transition into CAS accommodation more easily. However, 12 of the 16 young care leavers interviewed commented on the initial loneliness of being in your own apartment at such a young age.

For instance, one young woman said: 'I felt a bit lost myself and a little bit lonely at first... But you get used to it, you know. Like I'm kind of used to my own company anyway' (CAS 6). A male care leaver reported similar feelings:

You're just saying to yourself, right, I'm moving out, I'm living on my own. Like what I am going to do? And you're saying to yourself, I'm lonely, I've no-one. Like why did I do that? And you're saying to yourself, what's going on, like? Who do I have around me now? No-one (CAS5).

This view was echoed by another young male care leaver:

Like you get a bit lonely sometimes. Now that's very bad. You get a bit paranoid because you're living on your own. That's what's doing my head in. Yeah, or someone – I don't know, it's weird. Or you might hear the neighbours going up to their apartment and you think it's someone coming into your house, you get me? (CAS15).

A male care leaver said they struggled to cope with the speed of the changes to their life

following their move to CAS accommodation: 'Just it [getting CAS apartment] was kind of like a trigger of moving out on my own and everything just kind of got real really quick and I just kind of lost, you know, just completely didn't know what to do' (CAS10).

The enormity of getting your own place led to some feeling isolated. One male care leaver said: 'I can feel very isolated and lonely and depressed and stuff like that... I try to do as much as possible just to keep my mind off it and just keep myself going, so' (CAS12). Similarly, another of the male care leavers recounted: 'It was more like just the initial kind of shock and stuff that was going in and that was kind of more of it, like. That was – it's kind of the reality, like. It's all on you, you know. You're responsible for everything' (CAS10). A female care leaver mentioned the isolation of living alone: 'I once had a fear like that sometimes on my own – it was an apartment, like – do I feel safe, and can people get in? You know, like that was a fear' (CAS1). Another young interviewee recounted unsuccessful attempts to draw on family support:

Every now and then my sisters would try, but they all have like their own life and work and college and everything is down in [other area of the city] and all that. So yeah, they [social worker support] were gone then. As soon as I got a house I was on my own then (CAS3).

The key informants interviewed agreed that isolation and loneliness was a significant issue for some of the tenants of CAS for Care Leavers properties. A Tusla aftercare worker said: 'I think the lonesome end of things can be hard for some of them when they close the door. And when you leave in the evening that's it, they're essentially on their own' (KI 12). The loneliness and isolation are particularly difficult for those who came from care settings where they were used to living in close proximity to others; according to another aftercare worker (KI 9), this can lead to inappropriate behaviour such as holding parties to fill an apartment with people to counter the loneliness. Another aftercare worker pointed out that care leavers who have not built up their own network of friends or family may not have others to celebrate Christmas or other events with: 'I mean, it's the dream and the reality... It's the kind of a beautiful home, but it's just the walls and the home. There's still the silence and all that goes with it...' (KI 13). One of the AHB representatives mentioned the same concern and surmised that this may explain

why

not a lot, but a significant number – once they leave care, they start their own families very quickly. And part of that is, particularly if they've come – if they don't have a connection with family, they create their own family to have that connection. But it's also then the loneliness element of it (KI 1).

A care worker suggested that loneliness and lack of support may be particularly acute for separated children seeking asylum (KI 15). A colleague from Tusla who shared these concerns reflected that 'accommodation is only one component' in the support packages required by care leavers and in this context advocated the need for additional support prior to leaving care as well as after the move to the CAS property to enable care leavers to successfully make the transition:

It's the life skills that they need to be supported and equipped with before, in my view, taking up a CAS property as opposed to developing the life skills and the CAS property at the same time... But it's knowing that they are rock-solid supports, and they are there to give that person that emotional equipment to navigate the responsibility of bills, households. And to me the social isolation would be the biggie. That's the stuff that cracks most of us, so why wouldn't it crack anybody else? So, I think that all needs to be in place, well in place (KI 15).

Fear of Losing CAS Tenancy

Unsurprisingly, in view of the isolation and loneliness experienced by some of the young care leavers interviewed and their concern about becoming homelessness, the fear of losing their CAS tenancy was also a prevalent concern. The reality of having no family support system to fall back on, coupled with the challenges of transitioning into adulthood and the responsibilities associated with managing their education or a job and run a home, magnified anxiety levels for these young people.

Given these concerns, one care leaver said: 'Yeah, definitely. That's one thing that's always comes to mind. Oh, like, what if I don't pay my rent on time? Am I gone, like? You know, things like that' (CAS5). This concern was echoed by another male care leaver who reported: 'I was like, oh, what happens if this [CAS] apartment doesn't work out and I'll have to go homeless? Yeah, that would keep you up at night, that would. It was very scary' (CAS12). Another young

man said: 'There is [anxiety], yeah, because if I mess it up then like where do I go? I don't have anywhere to go to, like don't have a family. Do you get me?' (CAS8). Similarly, a young father told us:

I've always paid my bills first. It was mainly the weight of responsibility. And stuff like occupation or education. That was stuff that was weighing down heavily on me... it's nothing that anyone has done. It's really my own pressure that I put on myself (CAS2.)

Consequently, the fact that AHBs can terminate a tenancy during the first six months, under the terms of the Residential Tenancies Act, 2004 (as amended), and a long-term (commonly termed a 'Part 4') tenancy is only available when this period has ended, was a cause of anxiety for some care leavers (Kenna, 2011). One female care leaver was concerned that that her probationary period for her CAS tenancy was longer than the six-month standard because a previous tenant, who like this female had also come from residential care, had been troublesome. She explained that this was a source of worry and anxiety for her:

I'm still on a trial run here because of the previous owner and the way the place was treated I was put on like an extra-long trial run. Yeah, so I'm very cautious about how I act... But then it was kind of like they judged me on someone else's decisions (CAS11).

Conclusion

This chapter has highlighted the worry and stress experienced by care leavers as they reach their 18th birthday and have to make the transition from residential or foster care. Following the service reforms introduced over the last decade this is no longer an abrupt transition – planning for a CAS placement may begin at 18 but, in the vast majority of cases, transition to this placement is preceded by a further period in foster care or an aftercare placement or a period in supported housing. Therefore, young people do not generally move into CAS accommodation until 19.5 years of age at the earliest. By contemporary standards, however, this is a relatively young age at which to commence independent living; youth has lengthened in recent decades and for most young people the transition to adult responsibilities is occurring later. Therefore, it is not surprising that care leavers find the transition to independent living at age 18 challenging and stressful.

For those who are allocated a CAS tenancy there are enormous benefits. The care leavers particularly appreciated the security of tenure their new home provided and viewed it as a strong base from which they could build their future life as an independent adult. The CAS for Care Leavers programme reduces the risk of homelessness – which was a significant worry for all of the care leavers interviewed and which a minority had experienced. In addition, the care leavers interviewed acknowledged that their prospects of securing secure, affordable housing through alternative means, such as the general waiting list for social housing or Housing Assistance Payment, was very low.

However, despite these undoubted benefits, many of the young people interviewed experienced loneliness and isolation after they moved into their new properties. This demonstrates that secure housing is not the only support these young people require. It highlights the necessity of individualised planning and support for those who are transitioning from care. This issue is examined in the next chapter.

Chapter Four Implementing CAS for Care Leavers: Sourcing, Letting and Managing Dwellings

Introduction

This chapter examines operational issues in the CAS for Care Leavers scheme, including eligibility, sourcing, letting and management of dwellings. As in the previous chapter, the discussion is organised around key themes which emerged in the interviews with care leavers in CAS properties and key informants.

The first part of the chapter examines eligibility for the CAS for Care Leavers scheme, including state responsibility for those leaving care, eligibility criteria, and lack of clarity in relation to how ‘complex needs’ are established and defined. The next part discusses a number of constraints which limit the development and expansion of the CAS scheme, including the difficulties caused by caps on purchase prices and the limited availability of one-bedroom properties in central or accessible locations. A related theme is the anxiety expressed by some CAS tenants that their current property may not meet their requirements into the future if their family expands. Finally, some issues which emerged relating to the management of properties and the costs and responsibilities of ongoing maintenance are explored.

Eligibility for the CAS for Care Leavers Scheme

The CAS scheme is aimed at vulnerable care leavers who have been assessed as being at high risk of becoming homeless (Department of Housing, Planning and Local Government, 2017). However, one interviewee believed that in reality every young person who has been in care is vulnerable and that the State should have a responsibility to ensure that no care leaver enters homelessness:

No kid should leave the care of Tusla at 18 unless there is a pathway. Homelessness

should not even enter their minds as a possibility. The same way that it will not enter the minds of my kids when they hit 18. The State is *in loco parentis* and the State says in its own policy and legislation that they will act in the role of the good parent. So, no good parent tells their kid at 18 – off you go. No kid should leave at 18 (KI 4).

In practice, the understanding of most interviewees was that Tusla targets the CAS scheme at care leavers with complex needs. However, several interviewees argued that in reality *all* young people leaving care have complex needs by virtue of their childhood experiences. For instance:

Young people with complex needs as they're identified would be the real target for CAS at the moment... I've never had anyone that isn't eligible. Like I said, complex need – you're in care, that's your complex need. So, when I make a referral to the steering committee, I put a strong case forward as to this person's complex needs. And a complex need, as far as I'm concerned, is this person has no-one else in his life. That's an extremely complex need. It doesn't have to be mental or physical in my eyes (KI 11).

However, many of the interviewees described a lack of clarity and varying interpretations regarding the definition of 'complex need'. According to KI 3, 'Tusla don't substantiate 'a complex need'. Another participant raised a similar concern:

The first thing was they said the scheme was specifically for young people with complex needs. OK fair enough those kids are the ones who might struggle to find accommodation more than your average care leaver. But they didn't define complex needs. In fact, there is no definition of what complex needs is. You ask anybody in the sector – they will give you a different answer (KI 4).

In addition, lack of consistency in the application of eligibility criteria for the CAS for Care Leavers scheme was a concern for many participants in this study. One respondent argued for more clarity in the assessment process, and advocated for national standard operating procedures (SOPs) and more thoughtful consideration of eligibility criteria to increase fairness for all candidates, citing examples such as:

And you got a certain number of points if you complied with your medication. But what about the young person who doesn't take medication? Okay, they are in full-time education or full-time working. But if you've got a child, you can't be doing

either of those things. So, do you lose a point for that? It isn't fair (KI 14).

Another respondent also struggled with establishing and prioritising eligibility among a vulnerable group who potentially all have significant needs:

So, when we look at our CAS list, then we have shortlists and longlists and short shortlists and all of that and everything gets moved around. And the way that we do it is that we look at the list and we highlight who we think between our two registers who qualifies under the criteria and then whose needs are greatest. And that's a really difficult thing for us to justify and clarify. We look at, you know, who has mental health issues, IDs, the risk of homelessness. And every one of our young people is at risk of homelessness. That covers everybody (KI 9).

Significantly, however some of the key informants queried the advisability of referring young people with very complex needs to this scheme at all. Indeed, an experienced practitioner argued that targeting this initiative at young people with complex needs could set them up 'for failure' and discussed the challenges in placing and supporting those with high support needs such as 'people with intellectual disabilities, physical disabilities, very high support needs that are beyond the capacity and I suppose the experiences or qualifications of [our] staff to deal with' (KI 1). Another participant agreed with this perspective:

So, if you're talking about CAS which is long-term housing – by its definition it is probably not suited to a young person with complex needs given the level of supports they are going to be getting from Tusla if they move into it. So, you give somebody a long-term tenancy and you give them minimum support and they have complex needs and I think that was a bad idea from the beginning. For the last two years we have argued with Tusla (there is all different approaches to this around the country), we have had to argue about who goes into each property and who doesn't. Some people will insist that it should be young people with complex needs. Others will realise that that is problematic, and they pick other young people who they think would actually be able to manage a tenancy. So that was a problem from the beginning which they could have fixed (KI 4).

Instead, this interviewee advocated changing the focus of the CAS scheme, tailoring other high-support services for those with complex needs, and targeting CAS at those with lower support needs who would achieve independent living after a shorter period of support: 'I think just to switch the use around I think would be a lot better, you know'.

Care leavers themselves were also critical of the confusing eligibility criteria. One young interviewee complained: 'But like [my younger sister] was told no to a CAS place, something to do with her age. But like I was the same age as her when I was put onto it. I was actually a bit younger. So, I didn't understand it' (CAS 3). Another care leaver commented:

I was like, hold on, last year you said I couldn't get the CAS because I didn't meet the criteria and I didn't have such-and-such problems and now you are saying that I *am* independent, I can do everything, and I don't really have any of them problems except for anxiety with overthinking and over-worrying. Now you are saying that I can get CAS'. I was like, 'You are telling me two different things' (CAS 7).

The care leavers interviewed also raised concerns about the equity of including some young people but excluding others. For instance, one interviewee argued: 'The only bad thing is that other people don't get to have the same opportunity that I did and that's wrong' (CAS 1).

Another care leaver suggested:

CAS should be for all care leavers... and it shouldn't be, oh, yeah, your aftercare will nominate you for it. It should be across the board and for all care leavers. Because it's wrong to just pick a few care leavers to get a home. Then what happens to the rest of them? (CAS 7)

One practitioner agreed that unclear or differing interpretation of criteria is confusing and disappointing for young care leavers:

And it's very hard to say to them, no, you don't have the right complex needs, or wait now, you worked really hard on the counselling and, you know, whatever else, and what was complex a year ago is not so complex now. So now you could actually manage with HAP, so you'll be grand, you can go over there (KI 5).

In response to these challenges, KI 15 emphasised the importance of robust assessment processes, the use of steering groups who have sufficient information to match and understand the needs of each young person, and who can devise diverse models of support and accommodation to meet those needs. To this end, many interviewees highlighted the importance of including the views of the young care leavers themselves. One respondent suggested that the care leaver's 'voice has to be heard' and emphasised the importance of

choice and a flexible system that allows care leavers to refuse an accommodation option if they feel it does not meet their needs: 'Just because we think that they're the best candidates doesn't always follow through' (KI 9). Another participant in the study suggested that increased transparency and improved communication is the best way of increasing confidence in the CAS scheme (KI 14). This interviewee also suggested that those who apply for the scheme should get a reply which outlines the reasons why they are not being offered a place. Another respondent (KI 15) recommended increasing the emphasis on the input of the young people, the measures that support their emotional well-being, and hearing the feedback from aftercare workers who can highlight what is working well and what needs to be improved:

There may already be models and ways in which they're working that's maybe not necessarily uniform that could inform that... But also, to see what really worked well, because we really want to tap on that. We want to know what works well... And it's not just the resource, to my mind. It's the model. It's the skillset. It's the procedures. It's all of the practice piece along with the resource is needed to get the right outcomes for young people (KI 15).

Property Availability, Cost and Procurement

Availability of Suitably Sized and Located Dwellings

A number of factors pose significant obstacles to the further expansion of the CAS for Care Leavers programme. These include the availability of suitable properties available for sale on the market but also the CAS operational rules more broadly.

In relation to the latter, the key informants interviewed mentioned the impact of rules which prevent AHBs from purchasing properties in areas where there is already a high percentage of social housing, only bidding on homes that are already vacant, and not competing against first-time buyers who wish to purchase the same dwelling. The cap on the purchase prices which will be funded under the CAS programme was identified as another constraint which severely restricts the scope of property searches. The impact of this factor is illustrated in the following quotations from interviews with an aftercare worker and AHB representative:

It's still a block because I would say the national limits need to be raised for CAS

around the country so we can compete more in the open market... And the problem then is you also have to include, you know, renovation fees. You'd have to be careful. Solicitor's fees, all that, has to be part of your budget as well (KI 13).

Then there is the problem with the caps. The price of property far outstrips what the Department will allow us to spend on a CAS property. Different caps in different areas. [Outside Dublin] properties are very low-priced compared to Dublin, but the cap is set so low [it isn't possible] to compete in the market to buy them. So that is a problem... so, the caps business isn't keeping up with the market and then the supply is too low (KI 4).

In addition to ability to compete in the market, a key issue which was identified is the availability of one-bed properties. For example, on the date that the interview with KI 3 took place, he said that in their local area there was only one property with one bedroom available for purchase, and as that property was occupied by a tenant it could not be considered because evicting tenants was incompatible with the ethos of the scheme. On this basis he complained: 'One-bedrooms are disastrous... they don't build one-bedrooms.' Another AHB representative (KI 4) also expressed frustration in relation to the availability of suitable properties: 'The market is bad – there is a problem getting one-beds, which are few and far between, and none in some areas.' Similarly, KI 5, also from an AHB, pointed to difficulties in acquiring suitable properties: 'Volume is obviously an issue. The market is very difficult at the moment. We've gone through a couple of different strategies in terms of identifying properties. An aftercare worker (KI 9) described the same challenges and referred to 'continual worry' at county departmental level in relation to single-bed property acquisition.

The scarcity of affordable one-bed properties means that suitable properties are often not located in central or convenient locations. KI 4 identified this as a challenge: 'You know, location of properties, that kind of thing, has definitely come up for us.' KI 14 discussed similar issues:

Anything that might be affordable is well out [of town] and maybe not on a bus service, you know, or on a bus service that isn't very well serviced I suppose really. So, we do need to put in those extra supports... They didn't feel comfortable. And that's important as well. You have to be able to say, 'I can live here, and I can live here indefinitely, and this is going to meet all of my needs'.

Placing a young person in a locality that is unfamiliar to them is disappointing and impractical for young care leavers, according to KI 9:

So, they don't actually know the area. They don't know people. They don't know where the shops are. They don't know how they're going to get the bus to and from places, you know. And transport, unfortunately, [in this area] is an issue... it's very unfair of us to say, 'We're going to offer you a place to live, but you're not going to be able to get to where you need to go'.

In response to the practical difficulties of identifying and securing suitable one-bed properties, a number of interviewees advocated more frequent use of two-bed apartments. This view was expressed by one of the aftercare workers:

We're saying two bedrooms would be more appropriate. You know, if it was like somebody who is studying, for them to have that room to study in, or that they'd have a partner or whatever, or child or whatever... There is an availability to get a second bedroom if, you know, a young lady might have a child, a young lady or gentleman might have extra support that would be required maybe to stay overnight if they had disability and things like that (KI 11).

However, another respondent referred to a situation where a two-bed property was purchased due to lack of availability of one-bed properties in the expectation that this could be let to two CAS for Care Leavers Tenants. Unfortunately, this led to disagreement in the region due to lack of clarity in relation to the 'peer support' criterion and the advisability of placing two people with complex needs together (KI 4). This interviewee had extensive experience of managing aftercare accommodation and, on the basis of this experience, argued that this approach should not be employed in the CAS scheme:

Our experience of care leavers sharing accommodation – I have an aftercare unit in [retracted] and we ended up with some two-beds which we used for sharing. Our success rate with that has been 50/50. The ones that have gone wrong have gone horrendously wrong but they are short-term units so we can manage them a bit better. But if you put two young people in a long-term shared tenancy and this is their first experience of living independently and it goes horrendously wrong I think that is a risk and that is not something we should do to young people leaving the care system. To put two young people of 18 years of age with complex needs together and hope – hope that it works out for them.....they have no fall-back plan those young people by the nature of their background. So, when it goes wrong for them it goes really wrong.

Delays, Bureaucracy, Stakeholder Collaboration

In addition to the challenges of identifying and purchasing suitable properties, several of those interviewed were critical of delays and what they considered to be unnecessary bureaucracy associated with the CAS for Care Leavers scheme. The Department of Housing, Local Government and Heritage has provided rolling funding for the Capital Assistance Scheme on a multi-year basis – a positive element of CAS, according to one of the participants (KI 4).

However, this interviewee also claimed that the popularity of the scheme means that: ‘Demand is naturally exceeding supply and I think that’s how it will always be because the interest is growing at a faster rate than we can purchase the properties’ (KI 4). As CAS properties are long-term tenancies, some tenants will live there permanently and therefore it will take a long time before an adequate level of stock is acquired to meet the need (KI 4). However, it is notable that in recent years the CAS budget for acquisition of dwellings has been consistently underspent, according to the Departmental representative interviewed (KI 6). This suggests that funding availability may be less problematic than acquisition of suitable and affordable properties – especially one-bed dwellings.

Interviewees also mentioned that delays in acquiring properties frequently occur due to the need to upgrade dwellings, and bureaucracy in the purchasing process. One interviewee described how refurbishment can be slow and costly, and the process of approving the purchase, which usually takes up to six months, means that ‘you might lose a landlord along the way. We have lost one because it’s a slow enough process. It can take up to six months for a sale to go through’ (KI 13). Another participant agreed:

The length of time it takes to purchase a CAS property is extremely difficult and lengthy, and I know they are working rapidly on trying to reduce that time. If you think of the number of organisations involved with a purchase – just say, for example, there’s a one-bed apartment for sale and [an AHB] approached you or approached your sale agent to purchase it. You’re thinking, grand, this is more or less a cash buyer, this’ll be great. It then has to go back to [the local authority] to be approved. They have to review it to be approved for CAS. It has to go through their legal team. It has to go back to [the AHB], they have to approve it. They have to draw down the money. They have to send it back. So, you as a seller would be getting extremely frustrated that three months later or four months later, six months, and your property that has been sale-agreed has not been sold (KI 14).

In light of the scarcity of suitable properties and the pressure of open-market competition, there was general agreement that improved alignment of the various stakeholders was key to increasing efficiency in the process. One interviewee believed that linkage between Tusla, the Department of Housing and the DCEDIY should be streamlined: 'So, it's kind of a no-brainer in that sense... in terms of, you know, opening up those relationships we don't have. We wouldn't have that naturally' (KI 15). The same interviewee emphasised the importance of collaboration with the steering committees for CAS for Care Leavers, and welcomed the increased number of steering committees and the aftercare manager network and aftercare workers, which should result in better coordination and collaboration: 'So the infrastructure both within Tusla and the AHBs is kind of mobilising, and the local authorities are becoming kind of more aligned, it's all dovetailing, I think, at this point in time to be better' (KI 15). This point was echoed by another interviewee (KI 14) who highlighted the importance of good communication and working relationships between county councils and AHBs. In the medium and long term, KI 1 surmised that good coordination and well-established support networks would prevent tenancy breakdown and avoid problems in the future for the local authorities.

Forever Home?

As mentioned in the introduction to this report the CAS for Care Leavers programme funds the acquisition of one- and two-bedroom dwellings and tenancies are offered on a long term/permanent basis. Although the CAS for Care Leavers clients interviewed for this study agreed that these dwellings met their needs at the time when the interviews were conducted, they were concerned that these dwellings might not suit their requirements in the long term. The idea that their CAS dwelling might not be a 'forever home' and anxiety about how they could secure a forever home in the future was a concern for some.

Three of the CAS for Care Leavers clients interviewed were parents of small children; they queried how the small size of their apartments was conducive to long-term family plans. This issue was compounded by the apartment being a long-term rental property which these young people could never own. This view is illustrated by the following quotations:

The only bad thing about CAS is I think all care leavers should get like a three-bedroom house, because if they were to go on and to have kids, like myself, they shouldn't be put into a one-bed and say, 'Oh, yeah, that's your forever home' (CAS 7).

So, I do get ideas of saying when is this ever going to be – when is the rent going to stop and when can I just buy the place and it's going to be mine, you know? Well, say if obviously there's a woman, there's a girlfriend or whatever and say ten years on from now (CAS 5).

Some care leavers raised concerns relating to inflexibility of CAS rules, particularly when restrictions made no practical sense to them:

Then I got a transfer to the place I'm in now. Same thing. They were saying, 'This is your place. You can't get another transfer. This is it now for the next ten years', or whatever, and this place ain't much different as well (CAS 4).

As noted earlier in this report, the security of tenure is an important and positive aspect of the CAS for Care Leavers scheme. However, given that those placed as part of this scheme are in early adulthood, it is inevitable that personal circumstances for some or all of this group will change as time progresses and a larger property may be required. The legislation on the allocation of social housing – specifically the Housing (Miscellaneous Provisions) Act 2009 – means that once care leavers are allocated a tenancy under the CAS for Care Leavers programme, they are removed from the waiting list for another social housing tenancy. They can apply to a separate 'transfer list' – to be transferred to another social housing unit – but one AHB representative interviewed pointed out that 'this can take a while' (KI 4). The housing stock owned by the AHBs participating in CAS can also be a barrier to facilitating a speedy transfer to a larger dwelling. As mentioned in the introduction to this report, the CAS scheme envisages that participating AHBs will be able to meet the long-term support needs of care leavers, but organisations of this type are likely to be involved primarily in homeless services or supported housing provision and are unlikely to own a substantial stock of 'general needs', standard family housing which would be suitable to accommodate care leavers as their families expand. On this basis, the AHB representative KI 1 raised questions about whether the CAS scheme 'gets the local authority off the hook', because these young people have been

permanently housed. KI 1 advocated that there should be an explicit agreement with local authorities that, should the needs of the young person and their family change, they would be given alternative accommodation.

Housing Management and Maintenance Issues

The interviews with CAS for Care Leavers clients also revealed some concerns about the housing management rules applied by AHB landlords. Some care leavers argued that these conflicted with the transition to independent living. Some of the rules which AHBs had in place were perceived as preventing the young people from becoming independent and managing their mental health in positive ways. Some young people were aggrieved at a ban on having a pet in their apartments. Despite management companies allowing pets, some AHBs refused to consider young people's requests to have a dog. This problem is illustrated by the following quotations from interviews with care leavers:

I can't get a dog and like I've had a dog all my life. The area that I'm in allows the dogs, the management company allows the dogs, but [AHB] don't. But that's my home... So, whether they're allowed do like kind of do up the kitchen or do up the bedroom or – the small stuff – or owning the pet, that it can be more kind of easily communicated instead of blank-out 'No' (CAS 3).

When I first moved in here as well as I had a puppy as well and I went to them as well about it. Now, I'm allowed a dog in this apartment? Yeah, yeah, you're allowed a pet, you're allowed a pet. Within three days of living here I was told I wasn't allowed a pet; I'd have to get rid of it... So, it's just, like, a dog is your friend forever, like, you know that kind of way (CAS 4)

I've had pets most of my life due to my mental health. They helped it but the most I can have here [in CAS apartment] is fish! I'm never allowed pets. I'm not allowed anyone to move in with me, but if I had a child, they could live here (CAS 11).

After moving into the CAS apartment, some of the young people had ongoing maintenance issues which created additional stress for them during their transition into independent living. There appeared to be no consistent standards across the scheme. Some were positive about the support they received:

There were quite a few draughts in windows and stuff. But now to be fair, the [AHB] maintenance team, like, they came out like literally and fixed any of the issues... That was all done quick (CAS 10).

I had to ring her [key worker] two weeks ago, three weeks ago because the whole electricity box had messed up and stuff like that, and she sat on the phone with me for about forty minutes, twenty, yeah, about forty minutes, helping me figure it out and stuff like that and we ended up fixing it (CAS 12).

However, some other young people experienced frustration in getting the AHB to rectify issues:

But I didn't know at the same time that I'd have trouble with the house, the problems with the house, like. Because they said the house was fully refurbished, brand new, but I've been having problems since like Day 1 with it (CAS 8).

I moved into this place and apparently it was done up and everything like this. There's blood still on my wall over her [previous tenant] punching herself through the wall, like, over like shaking her hand after putting her hand through the wall (CAS 4).

From six o'clock in the afternoon through all the night it'd be freezing in the house and the radiators wouldn't turn on. And that happened for about half a year. But then they got people out from [AHB] to fix it and they couldn't fix it. So, they got an electrician out and he said that – he went to my box and said that two of the radiators were wired into the one socket, which was a hazard. He goes, 'Whoever done this house were cowboy builders. That were the ones that done it (CAS 8).

The lack of common standards across the CAS scheme was clearly evident, as shown by these comments about the pre-paid electricity scheme:

So, everything runs off my electricity [in the apartment]. So, I had a prepaid meter installed. So, I just top it up every week with, say, about twenty euro and that kind of does me for the week (CAS 6).

I've asked them about pre-paid power... The house is eating my electricity as well. But they haven't got anyone out yet to see what the problem is causing my electricity, because I'm in the house on my own and I'm spending about sixty euro a week just on electricity alone and I think that's too much just on myself (CAS 8).

Some young people were unclear about whether the AHB or themselves were responsible for replacement of faulty appliances, which they felt was unfair since they were classified as

tenants and not home-owners:

My oven was smoking there as well and they're also telling me like that's my problem, like I have to pay for a new oven. I have to pay for an electrician to come in and fix it because it's a long-term property. I have to fix it... So, it's not fair (CAS 4).

Although the norm in the social housing sector is that tenants are responsible for providing and maintaining appliances, preparation-for-tenancy and structured transition programmes may be required to ensure that young care leavers understand the differing responsibilities of tenants and landlords or AHBs (this issue is discussed in more depth in the next chapter).

However, the cost of ongoing maintenance of CAS for Care Leavers properties was also a concern among the AHBs involved in the programme. As mentioned above, refurbishment costs must be factored into the purchase price of properties – although a Department of Housing representative noted that there is some leeway in relation to extra costs incurred (KI 6). However, there is no budget for ongoing maintenance and general upkeep of the properties. These must be funded from the rents, which could present a significant resource issue in the future (KI 8).

Conclusion

This chapter has highlighted some of challenges associated with the current operation of the CAS scheme. While the scheme is aimed at preventing vulnerable care leavers from becoming homeless, some respondents believe that the majority of care leavers have vulnerabilities and therefore should be eligible. Those who were interviewed described how Tusla targets the scheme at young people with 'complex needs'. However, many interviewees, including young care leavers, highlighted a lack of clarity and different interpretations of the definition of complex needs. This poses challenges for those who aim to equitably prioritise applicants for the scheme and can lead to confusion and disappointment for young applicants. Some of those who were interviewed questioned the suitability of people with complex needs for this scheme and suggested that those who require lower levels of support would have a greater chance of

success, while more suitable supports could be put in place for those with greater support requirements. Including the views of young care leavers and CAS tenants was suggested as a constructive approach to developing and improving the scheme.

Property availability, property costs, property maintenance and management, and procurement emerged in the discussion as obstacles to the expansion and development of the CAS for Care Leavers scheme. In particular, the scarcity of one-bedroom properties is a key constraint. Acquiring suitable properties is also hampered by other constraints such as the caps on purchase prices, which were not considered to be in line with the real-estate market. As a result, when properties are eventually identified, they are frequently located out of town or in localities which are difficult to access on public transport. Some CAS tenants expressed anxiety about the suitability of their current property as their 'forever home' if their family expanded in the future. Other issues included rules on pet ownership in some properties and the ongoing cost of managing and maintaining CAS properties in future years.

Chapter Five Supporting Transitions to CAS for Care Leavers: Aftercare Support

Introduction

This chapter examines the supports available for young people during their transition from care into CAS for Care Leavers accommodation and during the early years of their tenancy. The chapter is divided into two parts. The first part examines formal planning to leave care, which starts earlier for some young people in foster and residential care than for others. The extent to which this has provided adequate preparation for the type of independent living arrangements provided by the CAS for Care Leavers programme is also examined. The second part of the chapter discusses the aftercare supports provided after care leavers have moved into CAS for Care Leavers accommodation. This analysis discusses the quality and effectiveness of this support and the appropriateness of the cut-off ages after which aftercare support is no longer provided by Tusla. The longer-term support needs of CAS for Care Leavers clients are also discussed, as are the implications of this for the AHB landlords.

Formal Planning to Leave Care

As explained in Chapter Two, formal planning to leave care and provision of aftercare support is provided for in legislation. Although the Childcare Amendment Act 2015 places a statutory duty on Tusla to carry out an assessment of need which identifies needs for aftercare supports, one of the AHB representatives interviewed (KI 4) pointed out that this does not guarantee an aftercare plan. He was also critical of the statutory definition of aftercare as an adult service and argued that, for many young people, the process of preparing to leave care is often rushed and not adequately resourced. Similarly, another AHB representative highlighted that not all young people are allocated aftercare workers in good time and as a result the service is rushed and less thorough than is desirable. He said: 'My sense is that the people who are working in aftercare supporting these young people, they are snowed under.....so, it's kind of, it's like a

fire brigade kind of service' (KI 2). One of the Tusla aftercare workers interviewed (KI 13) disagreed, reporting that planning usually starts early at age 16.

However, all of the key informants from Tusla and the AHBs who were interviewed for this study concurred that forward planning for leaving care is essential to ensure adequate supports are put in place. One Tusla aftercare worker (KI 15) made the point that this planning is especially important because ageing out of care often coincides with the other general pressures experienced by older teenagers such as struggles with identity, developing independence and the Leaving Certificate exams. A representative of an advocacy group argued that planning to leave care needs to start as early as possible:

If you're leaving care and all you're thinking, is I can be on the streets in two months' time, it's very hard to make other decisions around your education and other things... then I think the outcomes could be better because they could make other decisions with more clarity and more assurance without the distraction of thinking, 'Where am I going to live?' ... anything from six months to three years to ensure their stability when they leave care. And to tell them early on that you will be moving into this accommodation when you leave care, because that reduces the anxiety and the trauma which often kind of clouds their thinking around all the decisions (KI 7).

Optional Transition Period for CAS Candidates

The benefits and positive aspects of the CAS for Care Leavers programme were outlined in the previous chapter. However, the loneliness, isolation and stress which some young people experienced after moving to independent living was also described. In light of these factors, many of the key informants interviewed advocated a period of transition between leaving care and moving into a permanent CAS property. An advocacy group representative (KI 8) believed that mentoring and oversight at an early stage could prevent dependence on the State later on, and therefore would be cost-efficient.

However, although all key informants agreed that most care leavers would benefit from a transition period, there was also a consensus that this should be optional because some care leavers are more independent and have acquired better practical skills than others. In this vein,

a Tusla senior manager argued:

Making it a necessary criterion may not be necessary because certain young people might be more equipped... You know, certainly the separated-children seeking-asylum kids often come with the high levels of maturity and life experience that we may not have witnessed with other young kids as well. So, it's having the option on it and being able to stitch it in would be probably the preferred way (KI 15).

An aftercare worker from Tusla's South operational region echoed this argument regarding the diversity of care leavers' needs:

There's been a few girls, again very capable, and they've moved in at the age of 20 – which sounds frightening even to me to have your own place and responsibility at the age of 20 – but extremely capable. Like these people are very extremely resilient and have come through care and they understand the importance of it. But then you'd have young girls and young boys at the age of 22, I mean, they're nowhere near ready, God love them (KI 10).

An interviewee from an AHB argued that the transition period should be optional and flexible enough to meet individual needs and as far as possible should ensure that care leavers have the same choices and opportunities as any other young person:

The State *in loco parentis* should do what I would do for my kids when they leave my care and help them in any way I can. What we have at the moment is quite rigid policies and kids who are missing out on things that others are qualifying for because of how somebody has interpreted a policy (KI 4).

Despite the skills, independence and life-skills of some care leavers, an optional transitional period seems appropriate for the majority. This is particularly pertinent when viewed in the current general societal context where young people often remain in birth family homes long after 18 or even 23 years of age. In addition, as previously noted in this report there is a general view that in contemporary times young people in general are less prepared for early adulthood than in the past. In this vein, an advocacy group representative referred to the concept of 'extended adolescence' and argued that it is unreasonable to ask young people to make life-defining decisions:

We're expecting effectively what are still children, some of them with significant trauma, to make decisions that other children aren't expected to make. And I think that's inequitable and unfair and only, you know, causes more issues for them and

also then for the State in terms of dealing with the outcomes of that, with mental health, addiction, interface to criminal justice system, all of those things (KI 8).

Some young people who were interviewed for this research already had the experience of living alone before being allocated a CAS apartment and believed that the skills they had learned assisted them to manage the transition to the CAS scheme more fluidly. This is evident from the following quotations from interviews with care leavers:

Even before I went into the aftercare unit, I was kind of living on my own at one stage. So, I'd made a lot of mistakes then and I struggled. But I made sure not to make them mistakes. This time I feel like I was ready (CAS 2).

I definitely think I would have struggled a lot more, especially with money and all that type of thing. Yeah, a transitional period is definitely a lot better. It was better. I'd definitely recommend it because you know what you're getting yourself into then and it's a lot easier to take everything in (CAS 12).

Like for myself I went into a shared accommodation and I find I learned my own life skills or whatever. Yeah, it was kind of, it was good, but then it wasn't good because some people might not like the fact – they don't like sharing with people or they might not – like everyone has their own personalities, whatever. But for myself it was a good idea. I learned how to cook and clean up after myself and do my own laundry, all that kind of stuff (CAS 4).

Transition as Preparation for Independent Living

Interviewees were also asked about the purpose and focus of an optional transition period BEFORE moving into CAS for Care Leavers accommodation. There was a strong consensus that when leaving care many young people have not acquired the basic practical skills required to live independently or to sustain a tenancy in a CAS property, and that a transition period should focus on enabling them to acquire the skills required for independent living. One of the AHB representatives interviewed was critical of this gap in training for those leaving care settings: 'What's going on in residential care or foster care or whatever? Or while they're in the care of Tusla, why they are not being given the skills to live independently?' (KI 1). Another interviewee from an advocacy group agreed:

Young people have not acquired practical skills necessary for living alone. And you

just find young people completely unprepared for independent living. And then the transition is compressed, the decisions they have to make are unfair, and they're not in a position to make a lot of those decisions, and, you know, the whole thing ends up crashing for a lot of young people (KI 8).

A Tusla aftercare worker (KI 12) argued that the transition was particularly challenging for those care leavers who had previously lived in fully staffed residential care settings and had never needed to carry out practical tasks such as locking up at night or setting an alarm. Similarly, an AHB representative referred to the difficulty of transferring from a high support setting to independent living:

And of course, we know from our experience really, that sometimes they get a lot of what they want and very little of what they need in peer settings. So, there's always people around them. Their peers are there and there's staff on top of one another. Then suddenly you find yourself in an apartment and there's no one there, you're just there on your own (KI 2).

Care leavers themselves agreed that a transition period could be a good pathway to independent living. They believed that this would increase confidence and lessen anxiety when moving into the CAS dwelling. For instance, a male care leaver said: 'If you have a transition, people actually help you and can show you what to do when you do live on your own. Or to explain, oh, yeah, I have this, and you have to do this, and you have to do that, like, you know' (CAS 5). A female care leaver agreed:

Personally, I would have liked if it was more so gradual, instead of like being completely taken care of and not having a worry in the world to packing all your stuff up and the next day you have the keys to your own place and you sign the form and they're gone... I think more of a transitioning place, because it was really overwhelming to take all that responsibility on at once when I wasn't used to it (CAS 11).

In terms of the types of training, preparation and support which could be provided during a transition period before moving to a CAS for Care Leavers dwelling, there was a strong consensus that this should focus on practical life-skills such as managing money and saving as well as practical things like cooking, laundry and putting the refuse out on time. This is illustrated by the following quotations from interviews with care leavers:

Young people who are, say, 17 going on 18, 18, say, 18 this month and they're moving out and they don't know what to do, don't know how to wash their clothes, don't know how to cook. All they're eating is junk food, like, you know. Things like that. In transitioning you get more help (CAS 5).

Somewhere like the residential that I was in anyway, where I had my key worker helping me and asking me to come down and cook and to see if I knew how to use a washing machine and stuff like that, like, I think that would be good for other people who probably wouldn't have them skills (CAS 6).

[They should] give you information exactly what you're going to... going to be facing in the future while you're living on your own. Like, right, this is how you do this. Or going to show us how to do bills and, you know, just do other stuff (CAS 8).

Using Transition to Inform Decision-making

As outlined in the previous chapter, the care leavers interviewed for this study were delighted to be allocated a CAS property. However, many also argued that that they had not received enough information about this accommodation option or understood the information adequately, and in some cases felt they had been misinformed. In this context, there was support for the idea of using a transition period before moving to CAS accommodation to ensure care leavers are fully informed about this accommodation option and thereby enabling fully informed decision-making. This was considered necessary because care leavers argued that their capacity to understand information can be limited by their struggles with challenges such as ageing out of care, potential homelessness and losing support structures. One of the male care leavers argued: 'Some things need to be repeated like two or three times and then you'd be like, oh, I get you now, I understand' (CAS 5). This was echoed by two other care leaver interviewees:

Like you're just sitting there like, 'Yeah, yeah, yeah, no, I understand'. Then you leave like a meeting or something like that and then you're like, oh, actually I didn't take in what people were saying and then I'd have to go back and ask again (CAS 12).

Yeah, reading through, but also just understanding the basics, like what a tenancy is, why it's needed. Like if I was handed a tenancy today, I'd read it completely

because now I understand. But back then it was a piece of paper I just signed so I could get my keys, so I had somewhere to live (CAS 11).

Other care leavers raised concerns that, because they felt they had not received enough information, they were not able to make a fully informed decision about accepting a CAS for Care Leavers tenancy. For instance, a female care leaver did not understand the difference between a social housing tenancy provided by a local authority and an AHB, and that the option to purchase the dwelling was not available to AHB tenants:

I was told originally that this property would be like kind of getting a council house. I'd be able to buy it eventually. Like kind of do the rent-to-buy sort of thing that you're able to do with councils. And then they told me no, that won't be happening (CAS 6).

Similarly, a young parent did not understand that accepting a CAS tenancy would mean that she would be removed from the social housing waiting list:

I'm taken off everything, like, and they only told me after I signed it [tenancy contract] because originally told me no, sure, I'd be allowed for transfers, I'd be allowed to go back to [name of original local authority], to where my family is and then they told me afterwards no! (CAS 3).

Another care leaver said:

I just think the biggest thing to me is information. In the eyes of nearly everyone it's like a child coming out of care. They've been cared for their whole life. Everything's been done for them. You can't expect them to make an informed decision at 18 without explaining it. Like if so, many things were explained it would be so much easier... On options, on the CAS scheme, on tenancies, on all of it. And on your rights as well. Like personally I didn't know anything about a tenancy when I signed mine. I only knew what it was about *after* I'd signed it (CAS 11).

The need for information on the social protection, education and other supports available to care leavers was also highlighted by several of the care leavers. For instance, one young man said: 'I hear like you can get vouchers as well for food shops and all, some of the places. I didn't know that. I didn't know that. But I didn't know that until my friends told me!' (CAS 8). A female care leaver said: 'I didn't find out about rent allowance [available to CAS tenants] off my aftercare worker or the person that works with me through the landlord, if you get me'; instead, 'It was actually my mother that said it to me' (CAS 11). Another interviewee said they

had been unclear about how the aftercare payment worked: 'Like about aftercare payment. I thought being without, you didn't have to be in education till you're 21. You didn't have to be there at 21 but you're still getting the aftercare allowance' (CAS 4). This concern was echoed by another care leaver interviewee:

I wanted to go to college and do stuff. That they can actually help you out and give you a certain amount of money and help you though. I was like no, I didn't know any of that. I go, 'No-one ever told me this'. Like yeah, you need to just look into it more. I was like, honestly, they told me nothing about anything when I moved in, like. It's just so here's your keys (CAS 8).

Structured Transition Programme

While there was general support among the care leavers and key informants interviewed for an optional transition programme for care leavers before moving to CAS for Care Leavers, it was emphasised that this programme should be structured and monitored.

For instance, a Tusla manager was in favour of a transition focused on training towards definite goals:

I think they're too young at 18... I would nearly say it should be 20 ideally. But you're balancing the whole thing about limbo [versus] certainty... So definitely I would be of the view that a transitioning period needs to be for about a year so that... there, you know, picking up a trade, education, navigating services, adult services, all of that, the last thing you do is compound all of that for a young person. They have to grow. They have to move fast. They have to learn fast. They have to carry that whole journey that they've made to where they want to go (KI 15).

A representative of an advocacy group for children in care believed that a transition period that is unstructured could have negative consequences:

I saw some of them just quite stuck in it and they were getting a really easy ride to some extent. You know, they were doing courses and they were getting quite a lot in terms of the aftercare allowance... And they were easy targets then for drug-dealers and, you know, there was quite a lot of antisocial behaviour that I could see and not an awful lot of accountability to the same extent that you would get, say, in a residential foster home... There seemed to be minimal oversight of performance of the care leavers and where they were staying (KI 7).

Instead, this interviewee advocated a range of supports to suit individuals with increased or reduced supervision as appropriate but with structured goals and defined objectives that are ‘heavily monitored for the purposes of seeing you progress from here to somewhere over a specific period of time’ (KI 7).

Group transitional settings could also enhance peer support and leadership according to one of the AHB representatives interviewed (KI 5). He suggested that a 17- or 18-year-old could be motivated to progress by following the example of an older care leaver who is reaching their goals and moving on. However, he also acknowledged that this might be difficult to operationalise in some areas of the country where there are low numbers of care leavers.

Aftercare and Ongoing Support Following Transition to a CAS Tenancy

Varying Levels of Support as Perceived by Care Leavers

As mentioned above, although accessing secure accommodation via the CAS programme is extremely positive for care leavers, this is not the only component of a spectrum of continuing care that this group of young people require. Aftercare workers employed by Tusla play a key role in providing this support following care leavers’ transition from care. Their support is available until care leavers reach the age of 21 or 23 if they remain in full-time education.

It is also notable that for many of the CAS for Care Leavers clients interviewed for this study, their aftercare worker was their only source of support. They were isolated and had limited support networks. Most received little support from their foster families or birth families. One male care leaver characterised the support he received from his family of origin as: ‘A little bit. Just kind of minimal support. Like it wouldn’t be major or anything like that’ (CAS 10). A young mother living in CAS for Care Leavers accommodation said: ‘I didn’t have any emotional support. I didn’t have friends that I could call on’ (CAS 7). A male care leaver said his aftercare worker ‘would be the main support, I suppose’ (CAS 12). As the following quotations from interviews with care leavers demonstrate, aftercare workers and other Tusla staff provided a key source of support for these young people:

The only person I could really reach out to for [emotional support] help is my mentor... I feel like that was my person to lean on. The thing that got me through some of the hardest years of my life was him. His guidance (CAS 2).

My residential home, my old key worker used to have me down for cooking sessions and she'd check in and make sure everything was okay with my budgeting and that I was okay paying bills and rent and I wasn't getting into arrears and stuff like that. But she really helped me out an awful lot just to kind of prepare me for CAS. So, I probably would have been lost without her, to be honest (CAS 6).

Because of that [therapeutic] support I know how to like control my triggers now. But just say now, if I never got that, if I never got that training, my temper could be like a completely different story today (CAS 1).

Despite the reliance on their aftercare workers, the experience and perception of aftercare support was variable. Some of the young care leavers interviewed were very positive about their aftercare workers. For instance, a female care leaver said:

One of my aftercare workers actually sorted out the CAS apartment for me and then the one that I'm sitting beside right now took over from her job. So, and she's followed through everything and made sure everything went well. Just support really. Support, support, support. That's all people really need when they're in care, you know, coming out of care. They just need constant support and knowing that someone's there for them, that they can pick up the phone and call somebody and get advice or let things off our chest, you know... My aftercare worker is brilliant (CAS 6).

This positive experience of aftercare support was also shared by two of the other CAS for Care Leavers clients interviewed:

Through my support workers they've offered me, like, my opportunities. So, through them know I'm supported for this course. Like in all my care plans all I've wanted to be a psychologist... I know my rights because of my aftercare worker... I know the rights because of my aftercare worker (CAS 1).

I don't think I would have got this apartment if it wasn't for [aftercare worker] and as you just said there, the consistency and stuff. He just kept pushing and pushing. And even the [name of AHB] staff were pushing for it. They went very hard for it (CAS 12).

However, some of the other CAS for Care Leavers clients interviewed were more critical of the aftercare support they had received. One care leaver said: 'Like the one [key worker] I've had now since, well, the start of the pandemic I've talked to her once or twice but that was it'

(CAS 3). Another female care leaver said:

But with [aftercare worker] it's so hard with her, communication, to get through with her. She won't meet up with you, spend time to get to know you... It [getting CAS] was a battle and I won it. And thank God, because my aftercare worker was going against me, like (CAS 7).

A male care leaver felt that the aftercare support system was too rigid and bureaucratic:

Everything was kind of by the book going through like residential care, and people's lives shouldn't be by the book, like, that's not how you kind of treat young people because... that's not how things should go exactly almost... My [aftercare worker] kind of gave it to you straight as well, which is what I like (CAS 9).

The importance of aftercare workers' regularly linking in with care leavers was stressed by the latter in the interviews. This was considered crucial because some care leavers may not seek out help, so it is vital that support workers link in with them a couple of times per month – particularly in the early stages of moving into the CAS apartment. As two of the male care leavers said:

But like some of the issues I would have had with it [CAS] is I can see a lot of people having problems with not having as much contact or support. I found my way through that, but I can definitely see people having issues and feeling isolated and maybe spiralling back down... services like counselling should be mandatory up and down the board. Like every single child in care should be involved. They need some sort of guidance (CAS 2).

They [support workers] should link in with the – how would you say it? – they should link in more often than usual. Sometimes I wouldn't hear from my link worker in months, like, in about three, four months. And I'd hear nothing until I probably need to call and say this. But I think the link worker should ring us, like, maybe a few, a few times maybe in a month. Maybe three times in a month maybe. Do you get me? (CAS 8).

Similarly, another care leaver said it was only as he had matured that he appreciated the need to ask for professional support and guidance:

It was more just coming to realisation that I'm actually becoming an adult now and I need to start figuring out these things by myself, and even if I can't figure them out just go to someone and ask them. Don't be afraid to ask questions, that's what they're there for (CAS 12).

However, the care leavers agreed that the extent of the support provided by aftercare workers should reflect individual needs; some care leavers would need more support than others. For instance, a male care leaver suggested:

I definitely think there should be definitely more emotional support... it's kind of should be tailored like on a case-by-case scenario. Like it depends on what someone needs, there should be a general like platform and then it should be tailored to the individual (CAS 10).

Some recognised the limitations of the support worker's role and how the hierarchy of decision-making may mean that those making the decisions have little knowledge of what it is like to be a care leaver:

Like there's only so much that they [support workers] can do. Like they kind of have to answer to a higher power almost like that. Like they have to follow the rules – the people that make the rules are the people that don't know the young people going through the system, if that makes sense (CAS 10).

Cut-off Ages for Receipt of Aftercare Support

Tusla's statement of purpose in relation to aftercare highlights its role in promoting and achieving best outcomes for young people in care in keeping with the role of a 'good parent' but also acknowledges that, as young adults, care leavers can choose whether or not to engage with Tusla after their 18th birthday (Tusla, 2017).

After many years of Tusla involvement in their lives, some care leavers do not wish to continue with an aftercare worker. One aftercare worker noted: 'Then when I tell them it's voluntary their eyes light up. It's like they've got that control' (KI 11). However, a colleague worried that some care leavers refuse to engage with aftercare support 'until it's too late or until they're in a big crisis situation' (KI 2).

However, most care leavers do have formally identified aftercare needs and, according to Tusla, the core age for support is between the ages of 18 and 21 years, extended to age 23 for those in full-time education or accredited training. All of the aftercare workers advocacy group and AHB representatives interviewed recognised that every individual has different needs, and

some are more independent than others and require less support. Furthermore, a senior manager at Tusla made the point that, when the aftercare planning system works well and planning starts early, this means there should be a five-to-seven-year period in which to work with young people to develop their skills over time (KI 15). However, most of the aftercare workers, representatives and advocacy group representatives interviewed considered that the cut-off age of 21 for receipt of aftercare support is too early. For instance, an AHB representative stated: 'They're [Tusla] stopping at 21. So definitely it's too soon, particularly for the more complex ones' (KI 5).

Care leavers in full-time education or accredited training receive Tusla aftercare support for another two years after their 21st birthday, up to the age of 23 years. No interviewee suggested discontinuing this support; indeed, some raised concerns about high drop-out rates among care leavers in third-level education. However, many questioned the rationale for extending aftercare support after 21 years of age only to care leavers in education, given that their peers who do not or cannot engage in further education or training may be more in need of this support. One AHB representative said:

The focus on supporting young people being in education is a bit odd, frankly, because young people who manage to get it together to do the Leaving Cert and get enough points to get into third-level education or go in through DARE or HEAR or any of the other access schemes, however they do it, are far less likely to need support than the young people who can't get together to do that (KI 1).

Another AHB representative suggested: 'This is just such a middle-class view of the world where, you know, the assumption is that most people go to third-level education, whereas among this group practically nobody does' (KI 4). A Tusla aftercare worker concurred:

It should be the other way around. In my opinion it should be reversed, that people in education full-time, doing well, in year 2 in college, with another two – they can go to the duty system [Tusla on-call service for unallocated cases]. These young people that have complex needs, that are struggling, that are the hard-to-reach people, they get the extra support for two years because they really need it. They really need it (KI 11).

To address these challenges and anomalies, there was a strong consensus among the key informants interviewed that the cut-off age for receipt of aftercare supports should be

extended at least up to age 23 for all care leavers, not just those in education. A Tusla senior manager argued that this is necessary:

Because what tends to happen is that young people in care have had maybe an experience of trauma at some point in the past, they're developmentally behind where their peers are at, and we don't move our own 18-year-olds out and into accommodation on their own (KI 15).

A Tusla aftercare worker concurred: 'So I suppose from a general point of view it has to cut off somewhere, but 21 is awfully young... But I definitely would like to see everybody up until at least the age of 23 having an allocated aftercare worker' (KI 14). An advocacy group representative also supported extending the cut-off age for receipt of aftercare supports to 23 and pointed out that this 'seems to have worked well in Scotland' (KI 7).

The care leavers interviewed supported the idea of extending the cut-off date for provision of aftercare supports. They emphasised their need for ongoing support, which they said was fundamental to decreasing worry, anxiety and becoming overwhelmed. A formal support system was important for this group since, for some of these young people, building up a personal support network was a challenge and, given their past experiences, trusting others could often be difficult.

Longer-term Support for Care Leavers

In addition to extending the cut-off ages for receipt of aftercare support from Tusla, some of the key informants argued that some care leavers will require longer-term support after their early 20s. While some Tusla duty services are indefinitely available to care leavers who experience a crisis, this is not generally the case; therefore, CAS for Care Leavers tenants may have to seek support from other health and social service providers. This was a particular concern for the AHB representatives interviewed, who argued that some care leavers would need lifetime support in order to sustain tenancies. For instance, a representative of one of the AHBs which has provided dwellings under the CAS for Care Leavers scheme argued: 'The accommodation in and of itself is critically important but care also needs to be a part of it, potentially on an ongoing basis as well' (KI 5). She said the rationale for this view is 'that the

kind of length of time that people need the support for is just – it's gotten longer' and young people who had been in care lacked support networks from family and friends, so many 'do not have any kind of solid base to go back to... there's a reason why they came into care' (KI 5).

The withdrawal of Tusla aftercare support from CAS for Care Leavers clients at age 21 or 23 (depending on whether they continue in education), irrespective of need, was a key concern for the AHB representatives interviewed. One AHB representative said:

When we accepted them into the CAS properties, they had aftercare workers and Tusla was very involved. And then once they hit 23 and, kind of, they were dropped like hot potatoes. And then they were supposed to have a SLI [Support to Live Independently] worker. I haven't seen any SLI workers with the three young people [CAS for Care Leavers clients] I have in my service... My understanding when we got the properties was 'you be the landlord and we'll do the rest'. But it hasn't worked out like that (KI 2).

Other AHB representatives suggested that the need for significant long support for some CAS for Care Leavers clients was a problem for their organisation. Interviewee KI 1, for example, said: 'We're going to be liable for the tenants that are in there and we don't have the appropriate supports and the councils are getting quite pissed off about it as well'. Another AHB representative suggested that, from the perspective of his organisation, the lack of clarity regarding the availability of long-term support from Tusla reduced the attractiveness of the CAS for Care Leavers scheme:

... we're very happy to partner with Tusla on this, but we might actually be far better off just looking to acquire properties through the regular CAS [programme] because we're not tied by the licensed tenancy piece if we do that, potentially. And then we could potentially work with the City Council and Tusla on the nominations into the properties (KI 3).

A Tusla staff member who was interviewed acknowledged that the issue of ongoing and potentially lifelong support for CAS for Care Leavers clients was causing concern among the different partners involved in the operation of the programme. For instance, a Tusla senior manager acknowledged the challenges but said:

... in terms of timelines, I think it's not so straightforward really. I think it's a balancing act. One is the issue I would have is to what extent can a state service

remain – a state service such as ours – remain effective where people are of a particular age, as we don't have any real kind of statutory clout. So, let's say we've got a young person with a mental health problem who's in adult services and we're holding an aftercare brief. It's arguable to what extent that we can be effective. So, for me I don't necessarily look at it from the lens about the timelines, I look at it from a lens about where we are and how we can be effective. That to my mind matters mostly (KI 15).

One of the Tusla aftercare workers interviewed (KI 13) expressed a similar view, stating that HSE services were clearly appropriate for more vulnerable young people with a diagnosis of complex needs such as disability or mental health.

Conclusion

This chapter has examined care leavers' complex and multi-faceted experiences of transitioning from care settings into adulthood and independent living. It revealed that some young people are adequately skilled to live alone and sustain a CAS tenancy, but that many others are ill-prepared and lack the maturity to do so and could benefit from a structured transition programme. This programme could equip them practically and emotionally for independent living and ensure that their choices and decisions are fully informed.

The second part of the chapter examined the aftercare and ongoing support needs of care leavers. They reported varying experiences of support, but it was evident that many are completely reliant on formal supports from their Tusla aftercare worker as they navigate early adulthood. This raises questions about the cut-off age for receipt of aftercare support from Tusla – currently 21 years of age, extended to 23 years for young people who remain in education – and how best to transition adults, especially those who are vulnerable or have complex needs, into adequate support services. The requirement in some cases for extensive ongoing support is an issue of concern for AHB landlords after Tusla withdraws aftercare supports. The analysis presented in this chapter suggests that the best way to address these concerns is to extend aftercare supports to all CAS for Care Leavers clients until 23 years of age. It is also likely that some clients will require longer-term social care supports after the age of 23.

Chapter Six: Findings and Recommendations

Introduction

This final chapter of the report sets out the key findings of the analysis of the CAS for Care Leavers programme presented in previous chapters. These findings focus in particular on the outcomes and impacts achieved by CAS for Care Leavers and the extent to which these indicate that the programme was successful in achieving the key strategic objectives as outlined in programme logic model (see Table 2.1). These objectives are:

1. To provide stable, long-term accommodation to vulnerable care leavers.
2. To increase the number of care leavers living in stable, secure accommodation.
3. To reduce number of care leavers entering homelessness.

In addition, the contribution of programme inputs and activities that contribute to the achievement of these strategic objectives are discussed. Some problems and challenges that have emerged in the selection, design and implementation of these inputs and activities are also highlighted.

The second part of the chapter sets out a series of recommendations for policy and service reforms which are intended to build on the strengths and improve the effectiveness of the CAS for Care Leavers programme in achieving its strategic objectives.

Findings

CAS for Care Leavers Outputs, Impacts and Achievement of Strategic Objectives

The establishment of the CAS for Care Leavers scheme provided a welcome recognition that many young adults who are ageing out of state care are at higher risk of homelessness than other young adults of the same age. The secure and affordable homes provided by the scheme to care leavers many of whom have experienced multiple moves, uncertainty and insecure

accommodation throughout their childhood and adolescence is a positive development. The analysis presented in this research indicates that the CAS for Care Leavers programme has been successful in providing significant numbers of social rented dwellings and has had an enormously positive impact on the care leavers who have secured accommodation under its auspices.

At the time of writing a total of 23 dwellings had been sale agreed by approved housing bodies under the CAS for Care Leavers programme, and a further 70 had been fully acquired of which 60 had been let to care leavers and 10 were being repaired and were therefore awaiting allocation. Around half of these dwellings are located in Dublin and the remainder are distributed across most of the Tusla after care service areas in the rest of the country.

Interviews with care leavers who had secured CAS funded accommodation and with other stakeholders who were involved in supporting these young people, revealed that turning 18 years old was associated with anxiety due to uncertainty about the future and the fear of becoming homeless. Securing social housing funded by the CAS for Care Leavers programme was a turning point in their lives which represented stability and an opportunity for them to acquire a secure, affordable place to call their own. The CAS dwelling provided them with a safe space that could not be taken away and most importantly removed the spectre of homelessness.

On this basis, it is clear that the CAS for Care Leavers programme has had significant success in achieving its key objectives and therefore a key recommendation outlined below is that this programme should be continued and that it should be expanded to meet the levels of projected need for this type of accommodation among young people leaving care. However, this research also shows that expansion of the programme will be challenging and will necessitate some reforms to its design, particularly in relation to arrangements for procuring dwellings and eligibility criteria. In addition, the design of after-care supports for care leavers will require significant reform in order to maximise the chances of these vulnerable young people being able to maintain independent living in the long-term.

Challenges of Transitioning to a CAS Tenancy

The interviews with CAS for care Leaver clients conducted for this study indicate that they found the transition to independent living very challenging. Given that most 18-year-olds would struggle with a move to independent living, it must be acknowledged that step is particularly difficult for most care leavers who have weak or non-existent support networks of family and friends. For those who grew up in the care system and were likely to have had numerous adults involved in every aspect of their life, the adjustment to living alone was very challenging and frightening. Some felt as though they had fallen off a 'cliff edge' such was their experience of the reduction in support. Many spoke of experiencing loneliness, isolation, depression and feeling afraid. In addition, some interviewees were not well prepared for the practical challenges of independent living and did not possess the skills necessary to run a home. A key message from this research study is that housing alone will not meet the needs of this group, it must be accompanied by practical supports (with independent living and household management challenges), social supports (with networking and making and maintaining relationships) and emotional support (to combat loneliness and isolation) if these tenancies are to be successfully maintained.

Targeting of CAS for Care Leavers

Many of those interviewed for this study including care leavers raised some concerns about the targeting and eligibility criteria which currently apply to the CAS for Care Leavers programme. At present, the programme primarily caters for care leavers with 'complex needs.' However, many of those interviewed pointed out that, in reality, all young people leaving the care system have complex needs by virtue of the circumstances which initially precipitated their move into care and their subsequent experience of growing up in foster care, residential care or both.

This research suggests that more clarity regarding the definition of complex needs and the application of eligibility criteria regarding access to the CAS for Care Leavers programme is required. Some of the stakeholders involved in the design and implementation of the programme argued that considerable variations exist in the application of eligibility

assessments and argued for the introduction of national standard operating procedures to ensure more consistent application of eligibility criteria and to increase fairness and transparency for all candidates. Seeking and including the views of young care leavers was recommended as a way of establishing a more robust assessment process which would understand and address the specific needs of each care leaver and devise models of support and accommodation which are tailored to meet to meet those needs.

Preparation for Independent Living

The struggles which many of the CAS for Care Leavers clients experienced following their transition to independent living indicates that the preparation for this transition should be strengthened and tailored to individual need.

An individualised aftercare plan is an essential aspect of planning for those leaving care. This plan should identify a clear pathway for the young person at an early stage to reduce anxiety for these teenagers who, are also dealing with the same pressures as their peers such as struggles with identity, developing independence and practical challenges such as the Leaving Certificate exams. Although it is generally recognised that effective aftercare planning should start early to afford care leavers sufficient time to prepare before they leave state care some interviewees suggested that aftercare workers are not always allocated in good time and as a result the process of planning is sometimes rushed, under-resourced and late.

Care leavers who participated in this study emphasised that being fully informed about independent living was essential to build their skills and confidence. Some noted that they would have liked more time to read through the tenancy contract and to understand the implications as well as having the opportunity to ask questions or perhaps have something explained a second or third time prior to signing the contract.

In this context, there was support for the idea of a transition period prior to being allocated a CAS property particularly for care leavers who do not have adequate independent living skills and who lack the capacity to understand the full implications of independent living. This period would afford the opportunity to make an informed decision about committing to a CAS

contract. A transition period would also allow the young people to acquire key household management skills required to live independently such as money management, cooking and grocery shopping. Some residential care facilities already offer programmes to prepare for independent living and the possibility of its extension to other care leavers should be explored.

Many of those interviewed for this research including CAS tenants supported an optional transition programme. However, it was emphasised that any programme aimed at preparation for independent living should be structured, monitored and optional. Some cautioned, that if the transition period was not structured it could have negative consequences in care leavers getting stuck, becoming involved in crime and not achieving successful programme outcomes and impacts. Although most of the stakeholders interviewed agreed that a programme of this type would benefit most CAS for Care Leavers tenants, it was also emphasised that it should be optional given that a minority of care leavers have already acquired the necessary skills.

Aftercare Support

Ongoing support from an aftercare worker or link worker to help care leavers transition into their apartment is a key feature of the CAS for Care Leavers programme. However, young CAS clients who were interviewed reported varied experiences in the quality and consistency of aftercare support they received. Many were very positive about their relationship with their aftercare worker and the support they received and some recalled their aftercare worker 'going above and beyond' for them. While others reported a strained relationship and/or insufficient engagement. Interviews with care leavers highlighted the importance of proactive and frequent engagement by aftercare workers, particularly in the period following their transition to independent living to help them deal with the associated challenges.

At present, aftercare supports are provided by Tusla for all care leavers until the age of 21 and this is extended to 23 years for those who remain in education or training. Many of the key informants interviewed for this study argued that this is an anomalous arrangement, because care leavers are less likely to undertake third level education than young people have not been in care. Furthermore, care leavers who do not pursue education or training are in reality more

likely to require ongoing after-care support than those who do. Additionally, although 18 is the legal age for adult responsibility, societal norms have changed in recent decades and ‘adolescence’ has lengthened. It is generally recognised that a majority of young adults now remain in their family homes and avail of parental and family support until much later into their early adulthood than in the past. In light of these factors and the likelihood that care leavers will have experienced adversity in their childhood and adolescence, they are likely to be less able for independent living than other young people. Therefore, there is an argument that aftercare support from Tusla should be extended and strengthened for all care leavers until age 23.

Dwelling supply, procurement and allocation

The purchase or construction of the dwellings provided under the CAS for Care Leavers are funded by the Department of Housing, Local Government and Heritage’s Capital Assistance Scheme. The provision of rolling funding for CAS on a multi-year basis by the Department was identified as a very valuable reform because of its support for the implementation of the CAS for care leavers programme, given that the procurement of dwellings is often a lengthy process which cannot be completed within an annual budget cycle. However, several obstacles which hinder the successful procurement of appropriate dwellings for letting under the scheme were identified by interviewees. These include:

- limited availability of one-bed properties to buy, particularly outside the main cities.
- The cap on the price of properties which will be funded by the CAS programme, particularly in urban areas.
- DHLGH property procurement rules including curbs on purchasing properties in areas where there is already a high percentage of social housing, only bidding on homes that are already vacant and, not competing at auction or against first-time buyers.
- The process of approving purchase of a CAS property with the relevant local authority and the process of drawing down the funding to purchase it from the DHLGH was regarded by many of the AHB representatives’ interviewees as extremely difficult and lengthy. This process can take up to six months to finalise and in some cases property sellers become

frustrated and pull out.

To address these challenges, reform of the Capital Assistance Scheme property procurement rules is required. In addition, the requirement to purchase one-bedroom dwellings as far as possible for inclusion in the CAS for Care leavers scheme should be reviewed and made more flexible when procuring dwellings in parts of the country where one-bedroom units are in short supply.

In addition, because of the large scale of the need for social housing to let to young people leaving care, the potential for using the other government funding schemes for social housing and social housing support to fund the procurement of dwellings for letting under the CAS for Careleavers scheme should be explored. These include local authority housing, the Capital Advanced Leasing Facility (CALF) (which is currently the most commonly used source of funding for AHB housing), the Rental Accommodation Scheme (RAS) and social housing leasing. These funding schemes are more commonly used to fund the provision of 'general needs' housing (i.e., without support services). However, partnerships between the AHBs currently involved in implementing the CAS for Care Leavers programme and local authorities and AHBs who provide general needs social housing could ensure that the supports care leavers require continue to be provided if alternative funding schemes are used to procure the dwellings.

Quality of dwellings and housing management and maintenance

All the CAS for Care Leavers clients to whom we spoke felt that they were very fortunate to have secured a tenancy under this scheme. However, these clients reported varying levels of satisfaction with the quality of their dwellings and the housing management and maintenance service provided by AHBs.

Clients' assessment of the standard of the dwellings provided varied. Some commented that the apartment was in perfect condition with all appliances included, while for others there were issues with badly insulated windows, broken doors and furniture when they moved in. Some care leavers reported long delays getting AHBs to rectify maintenance issues, while others proffered a very positive assessment of the management and maintenance service they

received from their social landlord.

Another frustration for some interviewees was the contradiction between rules applied by the management company which managed the communal areas in their apartment blocks and AHB rules which applied to the CAS tenancy. For example, this was raised in relation to some young people's request to have a dog, which some AHBs did not permit despite management companies allowing pet ownership,. Care leavers were frustrated by this and argued that pet ownership is important for wellbeing and to combat isolation.

A forever home?

Some of the CAS for Care Leavers clients interviewed for this study raised concerns about the suitability of their dwellings as permanent homes. Although AHB have the same legal rights as private renting tenants, all AHB social housing including the CAS for Care Leavers dwellings is generally allocated on a permanent basis. This has obvious benefits in terms of providing permanent housing but idea that the dwelling provided by the CAS for Care Leavers programme would be a 'forever home' was quite a rigid predicament for some, the small size of the apartments was restrictive for those who had or were considering living with a partner and/or children in the near future. To address this issue the right of CAS tenants to seek a transfer to a larger AHB or local authority dwelling should be explained to them during their pre-tenancy induction. This would also free up dwellings for re-letting to more young people leaving care.

Recommendations

Recommendation One: Continuation and expansion of CAS for Care Leavers

This research demonstrates the CAS for Care Leavers programme has had significant success in achieving its key objectives and it is recommended that this programme should be continued and expanded to meet the levels of projected need for this type of accommodation among young people leaving care. It is also recommended that multi-annual funding for the scheme should continue to expedite the purchase and allocation of properties.

Recommendation Two: Increased age limits for Tusla Aftercare Support services

In light of the findings that many care leavers who do not or cannot pursue further education or training are possibly more vulnerable than those who do, it is recommended that the age limit for Tusla aftercare support should be reviewed and, if possible, increased to 23 years for all care leavers including CAS tenants.

Recommendation Three: Additional support for foster care placements

Where foster care is working well and is meeting the needs of the young person, additional support and resources, including payments to foster carers, should be considered so that the placement can continue for as long as possible and preferably until the foster child is at least 23 years old.

Recommendation Four: Further develop and improve Tusla Aftercare support services

Although securing a CAS tenancy has been enormously beneficial for care leavers, properties alone will not meet the needs of this group given that the majority have complex needs and many experienced anxiety, fear and loneliness after moving into their new homes. Therefore, it is recommended that Tusla aftercare support services for CAS for Care Leavers clients should be further developed and improved to a consistent national standard as should the housing management and maintenance service provided by the AHBs. These supports should include formal structured measures to respond to the loneliness and anxiety experienced by those in CAS for Care Leavers properties. This could include: allowing care leavers to keep pets, establishing peer support networks and regular checks by aftercare workers.

Recommendation Five: Early commencement of aftercare planning

In order to address the anxiety and stress associated with aging out of care formal aftercare planning should commence at least at age 16 without exception for all of those in the care system. Every possible effort should be made to ensure that all young people in the care of the state have appropriate placement will be available for them after their 18th birthday and that they will not be at risk of homelessness. This will also help to ensure that care leavers are fully ready for entry to CAS for Care Leavers accommodation.

Recommendation Six: Optional transition programme prior to becoming a CAS tenant

Many of the young people who are allocated CAS tenancies lack the basic practical household management skills which are necessary for independent living and this is a key source of anxiety for them. To address this issue, it is recommended that a transition programme be established which would prepare care leavers for independent living. This programme should be structured, monitored and flexible to tailor training to meet the individual needs of care leavers. It should also be optional because some young people have acquired sufficient independent skills by the time they leave care.

Recommendation Seven: Review of the eligibility criteria for the CAS for Care Leavers scheme

To address the lack of consistency with regard to eligibility criteria and to enhance transparency it is recommended that a full review of eligibility criteria for the CAS for Care Leavers scheme is carried out with a view to establishing clear and standardised criteria and improving openness, transparency and accessibility. This review should also consider the requirements of care leavers with very complex needs such as mental health, addiction or multiple disabilities. The scheme is currently targeted at this group, which has clear benefits because they may not be able to secure alternative housing, but also has risks because they may not be able to sustain their tenancy successfully. A specifically tailored and personalised response to meet the needs of this group should be developed which may include the CAS scheme or may require some other alternative type of personalised service provision. As those with very complex needs will likely require life-long support, it is also recommended that a mechanism to transfer this group more seamlessly into appropriate health and social services - who will work in partnership with the AHBs after Tusla support is withdrawn should be established.

Recommendation Eight: Reform of Capital Assistance Scheme dwelling procurement rules

The availability of affordable, suitable and appropriately located properties is a significant obstacle to the expansion of the CAS for Care Leavers programme. The impact of these supply side barriers to provision are aggravated by some rules and procedures for procuring dwellings under the Capital Assistance Scheme, including the insistence that one-bedroom units should be procured as much as possible, caps on the purchase price of dwellings and the time taken to approve property purchases by local authorities and the DHLGH. These CAS operating

procedures should be reviewed to remove any unnecessary impediments to the procurement of dwellings for letting to CAS for Care Leavers clients.

Recommendation Nine: Standardise the quality and ongoing maintenance arrangements for CAS for Care Leavers dwellings

The quality of dwellings provided under the CAS for Care Leavers scheme should as far as possible be standardised across the country and between the participating AHB's to ensure that all tenants move into properties of equal standard. Prior to the care leaver commencing a tenancy, adequate time should be allowed to clearly explain to them the tenants' rights and responsibilities.

Recommendation Ten: Streamline stakeholder relationships

Good working relationships between Tusla, the AHBs and local authorities are a positive feature of the CAS for Care Leavers programme and these should be strengthened and developed to further enhance the scheme. It is recommended that stakeholders work collaboratively to review current arrangements in order to streamline arrangements for the operation of the scheme.

Recommendation Eleven: Ensure the views of CAS for Care Leavers tenants are included in strategy and decision making

Mechanisms should be established to ensure that the views and perspectives of the young people who are availing of the CAS for Care Leavers scheme are taken into account in programme design and reform decisions.

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