



Foster Care and Supported Lodgings for Separated Asylum Seeking Young People in Ireland:

The views of young people,
carers and stakeholders



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Glossary of Terms

- ASCI:** Action for Separated Children in Ireland
- DOHC:** Department of Health and Children
- HIQA:** The Health Information and Quality Authority
- HSE:** Health Service Executive
- NGO:** Non-Governmental Organisation
- RIA:** Reception and Integration Agency
- TSCSA:** Team for Separated Children Seeking Asylum

Research Participants:

- YP:** Young person
- SH:** Stakeholder
- C:** Foster carer or supported lodgings carer.

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Chapter 1

**Separated children and young people in Ireland:
context, circumstances, and care provision**

Introduction

Separated children (also known as unaccompanied minors) are children who are under the age of 18, who are outside of their country of origin, and who are separated from their legal or customary caregivers. As the majority of separated children are teenagers, they will be referred to as separated young people throughout this study¹. This report is based on research that was conducted in relation to the placement of separated young people in foster care and supported lodgings. It draws on the views of the young people themselves, their carers, and key stakeholders working in this field.

This first chapter aims to provide a brief overview of the situation of separated young people living in the Republic of Ireland². It summarises the key developments in policy and practice that have occurred since separated young people began arriving, and it highlights relevant international literature in the field.

The history of separated young people in the Irish context

Ireland, like many other countries, has acted as both a 'sending country' and as a 'receiving country' in relation to separated young people. In the 19th and 20th centuries, the majority of Irish emigrants were young (Akenson, 1993; Travers, 1995), with records suggesting that some were children who left Ireland alone (Glazier & Tepper, 1983) to escape famine or to secure a better future. In addition, schemes were

implemented for the emigration of young female orphans, often to Australia (McLoughlin, 1995).

More recently, during times of huge unemployment in Ireland in the twentieth century, such as in the 1980s, it was common for Irish teenagers - both male and female - to travel to the UK and to the United States to seek employment. During the 20th century, Ireland also acted as a receiving country with groups of unaccompanied refugee children being permitted to enter the state, particularly during World War II. Many of these children were placed in the care of foster families (Keogh, 1998; Molohan, 1999). Records suggest that the first unaccompanied minor to arrive independently in Ireland for the purpose of seeking asylum came in 1996 (Mac Neice & Almirall, 1999).

Statistics in relation to separated young people

In the years subsequent to 1996, there was an initial sharp increase in the number of children and young people arriving (up until 2001), followed by a more gradual decrease thereafter. While clear and accurate national Health Service Executive (HSE) statistics are difficult to obtain (Horgan et al., 2012), the figures made available by the Team for Separated Children Seeking Asylum (TSCSA)³ certainly provide information in relation to the key trends, although they do not necessarily provide national figures. For example, HSE data suggests that the number of referrals to the TSCSA

¹ Where the author is referring to young people who have turned 18, this will be explicitly stated.

² In this report the Republic of Ireland will henceforth be referred to as Ireland.

³ Following the substantial increase in the number of separated children presenting to social work departments in the late 1990s, a dedicated team with responsibility for separated children was established in Dublin. This team is called the Team for Separated Children Seeking Asylum. While most separated children arriving in the country have presented to this team, other social work teams throughout the country have also provided services to this client group (e.g. teams in Cork, Galway, and Limerick for example.)

peeked in 2001 at 1085 and that the numbers have fallen almost consistently since then, with a slight rise between 2004 (617 referrals) and 2005 (643 referrals) (see Table 1 below). In 2010, 96 referrals were received, while the corresponding figures for 2011 and 2012 were 99 referrals and 71 referrals respectively.

Table 1: Number of referrals to the TSCSA by year, 2000 - 2012

Year	Total Referrals to the HSE's TSCSA
2000	520
2001	1085
2002	863
2003	789
2004	617
2005	643
2006	516
2007	336
2008	319
2009	203
2010	96
2011	99
2012	71

A significant proportion of children who are referred to the Dublin based team are reunited with family members: the statistics suggest that, in a given year, up to half of those referred are reunited (Joyce & Quinn, 2011). While occasionally these reunifications happen after a child has received refugee status and has applied for their family to be reunited with them, in general these reunifications are with family members who were already living in Ireland prior to the child's arrival or with family members living in the UK or elsewhere. Some children are placed in care and subsequently reunited, while others are reunited without

being placed in care. In 2001, 231 were reunited with family members, some of whom spent time in care (statistics for which are unavailable). The statistics are clearer for 2011: Of the 99 referrals, 66 young people were taken into care, 5 of whom were subsequently reunited with family members. Another 26 young people were reunited without having been initially taken into care. In addition, 7 young people were neither placed in care nor reunited, having been referred inappropriately. The figures for 2012 show that 71 young people were referred: 41 males and 30 females. Of these, 48 were placed in care, 24 of whom were subsequently reunited. A further 11 young people were reunited without being placed in care. In addition, 12 of those referred were neither placed in care nor reunited, having been referred inappropriately.

Table 2: Referrals to the TSCSA in 2011 and 2012

Year	No. of children referred	Referrals deemed inappropriate	Total number of children placed in care (including those who remained in care and those subsequently reunited)	Children placed in care who were subsequently reunited ⁴	Children reunited without having been placed in care	Total reunited (of those referred in given year)
2011	99	7	66	5	26	31
2012	71	12	48	24	11	35

Source: HSE Team for Separated Children Seeking Asylum

⁴ This figure pertains to children who were referred in the year in question. It does not relate to children who were placed in care in one year but then reunited in the next year.

Historically, a large proportion of separated young people were from Nigeria, with Joyce & Quinn (2011:239) reporting that between 2004 and 2008 Nigerian nationals accounted for between 49 and 60 per cent of those referred to the TSCSA. However, statistics from 2011 and 2012 suggest that this trend may be changing. For example, in both 2011 and 2012, Nigerian nationals accounted for just under 10% of referrals (9.0% and 9.8% respectively). In 2012 the 71 young people who had been referred to the TSCSA came from 26 different countries, including the following which had the highest representation: Democratic Republic of Congo (n=9), Nigeria (n=7), Brazil (n=6), South Africa (n=5), Venezuela (n=5) and Afghanistan (n=4)⁵. Regarding age, Joyce and Quinn (2011:240) report that, in 2008, 57% of separated young people referred were aged 14-17 years. For 2012 this figure was 66%.

The vulnerability and resilience of separated young people

Internationally, research suggests that separated young people are a vulnerable group, with many suffering psychological and emotional problems (Sourander, 1998; Bean et al., 2007) In Ireland, the available literature also points to this vulnerability (Abunimah & Blower, 2010; Rea, 2001). In many ways the reasons for this vulnerability are self evident: by definition these are young people who are under the age of 18, separated from their parents and family, and in a country that is usually very different to their home environment. In addition, many separated children have experienced situations of violence, the death of

loved ones, oppression, poverty, and lack of opportunity in their countries of origin (Thomas et al., 2004; Chase et al., 2008; Abunimah & Blower, 2010). Some have experienced abuse and exploitation on route to Western Europe. Indeed several cases of trafficked children have been uncovered in Ireland in recent years and it is likely that others have gone undetected (Department of Justice and Equality, 2011; 2012; Horgan et al., 2012; Kanics, 2008; Kelleher Associates, O'Connor and Pillinger, 2009). When separated young people arrive, they are faced with a very different culture, sometimes including a different language and a different religious environment. They usually have to cope with the asylum system and the stresses and uncertainty associated with it. Separated young people also have to deal with multiple losses, including the loss of family members (Delaney, 2006; German, 2004), whilst also forming entirely new social networks and adjusting to a new and different education system. In addition, they face the normal developmental challenges of adolescence.

While these pre and post migration challenges clearly point to the vulnerability of this group, attention has also been paid to their resilience. This theoretical concept has been written about extensively in recent years, including within the area of alternative care (Masten, 2001; Gilligan, 2000a; 2000b; 2007). Succeeding against the odds is the hallmark of resilience. In 1992, Muecke highlighted the resilience of refugees and since then numerous authors have reiterated his point, with many also commenting on the resilience of separated young people specifically (e.g. Goodman, 2003; Kohli & Mather, 2003; Kohli, 2006a; Maegusuku-Hewett, et al., 2007; Chase et al., 2008). Within the Irish context, although most of the literature has emphasised the vulnerability of separated young

⁵ These statistics were provided to the researcher by the TSCSA.

people, the strengths and coping abilities of this group have also received attention (Charles, 2009; Abuminah and Blower, 2010; Ní Raghallaigh & Gilligan, 2010; Ní Raghallaigh, 2011a). Increasingly, the literature, nationally and internationally, has emphasised the need for service providers to harness the strengths and resources of this client group, rather than focusing predominately on their weaknesses and vulnerabilities (Maegusuku-Hewett, et al., 2007; Ní Raghallaigh, 2011a; 2011b).

Care provision: from hostels to 'equity of care'

Until very recently, separated young people were accommodated in hostels. These were not registered children's residential homes and were not staffed by qualified social care staff. Instead, they were generally staffed by one security person, as well as some additional ancillary staff (cleaners, kitchen staff etc). HSE project workers were assigned to hostels and visited them on a regular basis. In the early days of service provision, some of these hostels catered for up to seventy young people, with males and females accommodated in the same premises. The young people shared rooms (sometimes with up to 12 other individuals). When they were first established, the hostels operated on a self-catering basis, whereby the young people cooked for themselves. Over time improvements were made, with the creation of smaller single sex hostels, where meals were provided. Young people shared rooms with fewer peers and indeed sometimes had rooms to themselves. In addition, one non-approved/unregistered residential unit for younger separated children was established and this unit had care staff employed on a 24-hour basis.

While the majority of separated children were always in Dublin, a small number were also cared for by HSE services in other parts of the country, most notably Cork. Separated young people who arrived in Cork were cared for under Section 5 of the Child Care Act 1991, as homeless teenagers, and were cared for in a variety of placement types, including foster care and supported lodgings (Mintern & Dorney, 2006). In contrast, most separated young people in Dublin have been cared for under Section 4 of the Act, dealing with voluntary care, with a small number in Dublin and in other parts of the country being brought into care under Section 18, which deals with Care Orders. Advocacy groups have criticised the HSE for not applying for Care Orders in relation to each separated child and have questioned the ability of the social worker to act in loco parentis where a Care Order is not in place (Irish Refugee Council et al., 2011). In addition, data gathering and information sharing are negatively affected by the inconsistency in approach amongst different areas (Joyce & Quinn, 2011).

The fact that most separated young people were accommodated in largely unsupervised hostel accommodation was criticised in numerous reports and publications over the last decade (e.g. Christie, 2002; Veale et al., 2003; Mooten, 2006; Ombudsman for Children, 2006; Commissioner for Human Rights, 2008; Corbett, 2008; Charles, 2009; Irish Refugee Council et al, 2011). Within these publications the HSE was frequently accused of operating a two-tier system of care, whereby most separated children were accommodated in unregistered, privately owned, profit-making hostels, while most Irish children who were in the care of the state were accommodated in foster placements and in approved residential homes that were subject to inspections. Considerable concern was

expressed about separated young people who were 'going missing'. In addition, these 'care' arrangements were in breach of both the UNHCR *Guidelines on policies and procedure in dealing with unaccompanied children seeking asylum* (1997) and the Separated Children in Europe Programme's (SCEP) *Statement of Good Practice* (2004; 2009), on a number of obvious grounds. Most clearly, the provision of hostel accommodation did not ensure that the best interests of separated young people were of primary consideration in all actions.

While the closure of the hostels is generally understood to have taken place as a result of the Implementation Plan published by the Office of the Minister for Children and Youth Affairs (OMCYA) in relation to the Report of the Commission to Inquire into Child Abuse (known as the Ryan Report) (OMCYA, 2009), HSE documents suggest that the process of closing the hostels had begun before this report was published but that a decision was made to 'fast track' the process in light of the Ryan Report (McHugh, 2009). During the transition period in which hostels were being closed and foster placements were being sought, Crosscare⁶ was engaged by the HSE to begin providing 24 hour support to the young people in the hostels. The last hostel was closed in December 2010. This paved the way for the possibility of care provision on a par with that provided for Irish children - equity of care.

6 Crosscare is a registered charity. It is the social care agency of the Dublin Catholic Archdiocese and provides a range of services to different groups, including young people and the homeless.

7 In the Irish context foster care is usually seen as the preferred care option for the general population of children in the care of the state. Residential care is generally used as a last resort for children who cannot be accommodated in foster care.

8 The terms 'family placement' or 'family care' will be used to describe both supported lodgings and foster care placements.

The current care context

Currently, the care arrangements for separated young people generally involve two stages - an initial care placement upon reception and a longer term placement - a system that is not unique in Europe (Halvorsen, 2005). Upon arrival young people who are aged 12 years or older are generally placed in one of three short - medium term residential settings that were specifically established for this client group.⁷ Each of these units is registered with the HSE and has the capacity to care for up to six separated young people at any one time. When the 'equity of care' policy was first implemented, it was envisaged that separated young people would be placed in these residential centres for between 4 and 6 weeks, before then moving them onto a different care setting. While the young people are cared for in these residential settings, their allocated social worker conducts an assessment of need and develops a care plan for the young person. However, the coalition of NGOs working with children and refugees, Action for Separated Children in Ireland (ASCI, 2011) and research by Horgan et al (2012) have both suggested that the young people were spending much longer than 4-6 weeks in the residential settings. When interviewed for this research, the Principal Social Worker on the TSCSA stated that the initial time frame of 4-6 weeks proved unworkable, in terms of assessing the needs of the young people, finding a suitable placement that matched their needs, and transitioning the young person into the placement. As a result, the remit of the residential units changed from short term to short-medium term, with the TSCSA aiming to move separated children into family placements⁸ within a period of 3-6 months.

After the period in the short-medium term residential unit, while some of the young people are then reunited

with family members or placed in a longer term residential unit, the majority of the young people move to family placements - either foster care or supported lodgings. These placements are provided by the HSE and by three private fostering agencies - Fostering First Ireland, Orchard Children's Services, and Five Rivers Ireland - which recruit carers throughout the country.

In the Republic of Ireland, foster care and residential care are regulated by the Child Care (Placement of Children in Foster care) Regulations 1995, the Child Care (Placement of Children with Relatives) Regulations 1995, and the Child Care (Placement of Children in Residential Care) Regulations 1995. In addition, the National Standards for Foster Care (DOHC, 2003) and the National Standards for Children's Residential Care (DOHC, 2001) set in place standards for the provision of these services. The Health Information and Quality Authority (HIQA) inspects both residential units and fostering services against these regulations and standards.

While the public generally has some understanding of the concepts of foster care and residential care, supported lodgings placements are less well understood. These placements have been used by the HSE since the mid-1990s. The supported lodgings information leaflet used by the TSCSA states that the supported lodgings system is "an accommodation scheme for young people aged 15 plus" and that these placements are seen as "a stepping stone". The leaflet sets out the aims of the scheme:

"[Supported lodgings placements] aim to provide young people with practical and emotional assistance, whilst in the safety and security of a family environment. The scheme enables them to develop their independence skills so they can

eventually live on their own. It helps equip a young person with essential life skills and to reach their full potential by developing into a confident and successful adult."

The leaflet continues by stating that carers will be expected to create a "safe and supportive environment" and that they will need to be sensitive to the needs of young people who may have experienced trauma. Ultimately, supported lodgings aim to provide a less intensive form of foster care to young people, with less emphasis on creating attachments with carers and more emphasis on preparing the young person for independent living at the age of 18. One of the crucial differences between supported lodgings carers and foster carers is that the former often work outside the home (perhaps reflecting the fact that those for whom they are caring are older), while in the case of the latter, at least one of the foster carers is usually expected to be at home on a full-time basis. The HSE's Policy, Procedures and Best Practice Guidance for Foster Care Committees states the following:

"It is necessary in the interests of meeting the needs of vulnerable children that at least one foster carer is available to care for the child on a full time basis. Applications may be accepted from working parents depending on their actual availability to the child" (HSE, n.d: 32)

In Ireland, supported lodgings placements are provided by both the HSE and some of the private agencies (although the term 'supported living' is used by one of the private agencies). Prospective carers are subject to an assessment that takes place over a number of months and involves a number of interviews with social workers. They must also provide Garda clearance documentation and references. Prior to April 2012

supported lodgings assessments were approved at a local level by the principal social worker but since the publication of the HSE's Policy, Procedures and Best Practice Guidance for Foster Care Committees (HSE, n.d) they must now be approved by the Foster Care Committee in the same way as fostering assessments. The supported lodgings placements referred to in this report were all in place prior to the new guidance and, as such, were approved only at a local level. Supported lodgings and supported living placements are not currently subject to inspections by HIQA. As a result, the Children's Rights Alliance (Children's Rights Alliance, 2012), amongst others, does not support their use.

Care provision for separated young people internationally

Finding up-to-date information on the care of separated young people in different countries can be difficult, especially given that, as we have seen in Ireland, care provision can change considerably within a short period of time. Diverse forms of care and accommodation are used in different countries (Halvorsen, 2005). The recently published '*Closing a Protection Gap*' national reports provide relatively up-to-date information in relation to several European countries (Ireland, Slovenia, Italy, the Netherlands, Germany, Denmark, Belgium, and Sweden). These reports show that the forms of accommodation and care used for separated children and young people include detention centres, 'asylum homes' with no social care staff, cross-cultural family placements, family placements with the same ethnic group (including with other asylum seekers), hostel type provision, group homes (both homes specifically for separated young people and ones that cater for separated young people

and the native population), general reception centres for asylum seekers, and shared flats or apartments (Bundesfachverband UMF and Noske, 2011; Danish Report, 2011; Defence for Children International - Italy et al., 2011; Defence for Children International - ECPAT the Netherlands et al., 2011; Irish Refugee Council et al., 2011; Service Droit des Jeunes & Fournier, 2011; Slovene Philantropy & Gabaj, 2011; Swedish Report, 2011). In some jurisdictions, the type of accommodation and care depends on the age of the child and on their migration status. While these reports provide a sense of the diverse arrangements that are in place, it is not always easy to compare the different countries due to different words being used to describe what could be relatively similar arrangements.

In the last decade or so, a considerable amount has been written in relation to separated young people in the UK context (e.g. Stanley, 2001; Thomas et al., 2004; Hopkins & Hill, 2006, Kohli, 2006a, 2006b), although very little literature has focused on foster care provision. Exceptions include Hek (2007), Chase et al (2008), and Wade et al. (2012). Hek (2007) highlighted the advantages and disadvantages of foster care provision for unaccompanied minors and suggested that for some young people group care might be more appropriate. Chase et al (2008) found that the majority of the young people in their study were positive about their foster placements, with the relationship between the carers and the young people viewed as central to successful placements. A small number of the young people were living in residential care, and in these cases too, the relationships between staff and the young people were seen to be crucial. However, recently Wade et al (2012) conducted research in relation to fostering unaccompanied asylum-seeking young people. Their large-scale study

involved a census survey of local authorities, postal surveys and interviews with foster carers and young people and focus groups with social workers, young people, and key stakeholders. While Wade et al (2012) identified elements of frustration in relation to a range of issues, the authors concluded that their overall findings were "broadly positive", with most foster carers showing a high degree of commitment to the young people. Reference will be made to this research throughout this report.

In the United States, several writers have written about the situation of unaccompanied Sudanese young people in foster care (e.g. Luster et al 2009; Luster et al., 2010; Lee et al., 2010). While these young people had arrived as programme refugees having spent years living in refugee camps in Kenya, the research findings are nonetheless relevant to the situation of separated young people in Ireland. In the research by Luster et al (2009, 2010) Sudanese youth were interviewed seven years after being resettled in the US. The research found that, not surprisingly, most of the young people struggled with parental authority initially. In the case of nearly half of the young people, placement breakdowns occurred, often due to relationship difficulties, with cultural differences and misunderstandings exacerbating these difficulties (Luster et al., 2009). The young people identified personal agency and a focus on education as factors that facilitated their adjustment, and acknowledged that foster carers played an important role in helping them to adapt to an unfamiliar culture. Foster carers emphasised that the young people's experiences in their countries of origins - their developmental histories - influenced their ability to successfully adapt to life in the US (Luster et al., 2010). In the study by Lee et al., (2010) while foster carers identified many rewarding

aspects of caring for the Sudanese young people (such as family enrichment, feeling appreciated, and fun), they also identified causes of unhappiness, such as unmet expectations, unexpected and longstanding cultural conflict, and a lack of preparation for their role. In the Irish context, while a number of studies examined the experiences of separated young people living in hostels, only one small scale study has referred to the experiences of young people in foster care (Mohammed, 2010). In that study, the author found that the young people "seemed to have settled in well with their foster families", but had little knowledge of their entitlements or of who to contact if they were experiencing difficulties with their foster parents (Mohammed, 2010: 7). Regarding relevant related literature, McWilliams (2012) has conducted research on foster care for ethnic minority children in Ireland and this research will be referred to throughout this report. Given the lack of in-depth literature on the situation of separated young people in foster care and supported lodgings in Ireland, this current study will attempt to address this gap.

Conclusion

Services for separated young people in Ireland developed in a reactionary manner in the late 1990s, resulting in inadequate care arrangements that were not on a par with those provided to Irish young people in the care of the state. However, in recent years the system of care for separated young people has changed fundamentally, with most of the young people now being cared for initially in residential settings and then in family placements. This shift in policy and practice represents an opportunity for Ireland to provide separated young people with care that will

counteract their vulnerability, compliment their resilience, and ultimately equip them for a successful transition to adulthood. This research begins the process of exploring the extent to which this is happening.

Chapter 2:

Methodology and Participants

Introduction

This chapter outlines the methods that were used in this research study. It also provides a profile of the participants that took part.

Research Methods

Although the methodology was primarily qualitative, it consisted of an initial quantitative element. Members of the TSCSA completed a profile sheet providing basic anonymous information about the clients to whom they were providing services.

The qualitative part of the study involved interviews with separated young people, foster carers and relevant key stakeholders. Face to face interviews were conducted with the separated young people, with the carers, and with HSE staff. The remaining professionals/stakeholders participated in either, a focus group, a telephone interview, or a face to face interview, depending on what was deemed most suitable given the research time frame and their availability. In total there were 69 participants: 21 separated young people, 16 foster carers/supported lodgings carers, and 32 stakeholders.

All of the fieldwork was conducted by the author. Most of the interviews were conducted between April and June 2012, with one additional interview taking place in July 2012. All of the interviews, apart from one, were recorded on a digital recording device. In this one case the separated young person seemed uncomfortable with the idea of having the interview recorded and so the interviewer took notes instead. An interpreter was used in one interview but in the remainder of the cases

this was not necessary, with the interviews being conducted in English. The interviews were transcribed by two PhD graduates who had recently completed their PhDs in related fields.

Ethical issues

In conducting this study, the researcher was fully cognisant of the sensitive nature of research with separated young people (Hopkins, 2008) and this was taken into consideration at all times. Full ethical approval was obtained from the UCD Human Research Ethics Committee (Humanities). Permission to interview the young people was firstly obtained from their social worker and then informed consent was also obtained from the young person. The process of obtaining consent was considered an on-going one: in circumstances where the young person's interest in the interview seemed to wane, the researcher asked if he or she would like to stop. In a further effort to be sensitive to the circumstances of the young people, none of them were asked about their reasons for coming to Ireland. The confidentiality of each research participant was always maintained: the young people were reassured that what they said would not be passed on to their carers or to social workers except if the researcher was concerned about their safety or about someone else's safety.

In writing the research report, particular attention was paid to ensuring that the participants' identities were protected, especially the identities of the young people and their carers. Given the small number of separated young people living in Ireland, and the small number of carers caring for them, this was challenging at times. In order to ensure that young people could not be

identified, basic information was sometimes changed when quotations were used. For example, if a young person referred to a sibling who was also a separated young person this reference sometimes had to be removed or sometimes the gender of a young person was changed. When making these changes, care was taken to ensure that the meaning of the quotation was not changed in any significant way. In a further effort to protect their identities, the participants were not given pseudonyms as doing so would allow a young person's various comments to be followed throughout the report, thus leading to the possibility of the young person being recognisable.

Recruitment of Participants

The young people were selected as follows. From the profile sheets completed by the social workers and project workers the researcher identified 18 separated young people under the age of 18 who were living in foster care or supported lodgings on the last day of February 2012.⁹ The social workers for all of these children were approached about the possible participation of the young people in the study. In the case of 17 of the young people, the social workers agreed that they could be approached about participation. In the case of one young person, the social worker felt that it was not appropriate to ask the young person to participate as the research was taking place at a time when the local area social work team was beginning to take responsibility for the young person's care, instead of the TSCSA. Therefore, a total

of 17 separated young people under the age of 18 who were receiving services from the TSCSA were approached about participation. Sixteen of these young people initially agreed to take part but in the case of 4 of them, participation did not materialise: in two cases the young people changed their minds, in a third case the placement ended and so it was considered inappropriate to interview the young person, and in a fourth case the foster carer cancelled the appointment due to illness and it was not possible to reschedule. Thus, 12 interviews took place from this initial sample.

In addition, the HSE provided the researcher with details of 11 separated young people under the age of 18 who were placed in private agency foster placements outside of Dublin and who were receiving social work services from local area child protection and welfare teams. Before approaching these young people about participation in the study, consent was firstly sought from the responsible social worker. In the case of 3 young people, their social workers did not respond to requests to include the young people in the study. In the case of 2 young people, it was not deemed appropriate to interview them due to a foster family bereavement at the time of interview which resulted in the young people being placed in respite care. One young person declined to take part. Five young people were therefore interviewed from this second sample.

Given the fact that aftercare provision was a strong theme in the interviews with stakeholders, the researcher sought to recruit a number of aged out minors also. One young person who was still living in a foster placement was included as a participant. In addition, 2 young people who had previously lived in a family placement but who were now living in direct

⁹ In addition, a number of 'aged out' separated young people (aged 18 or over) were caring for their own children with the support of foster parents or supported lodgings carers. These children were not considered separated children given that they are not separated from their mothers.

provision¹⁰ were recruited through a local organisation that was supporting them. One final participant who was living with a friend at the time of the study was also included. She had lived in foster care prior to turning 18.

Apart from the three young people who were living in direct provision and private rented accommodation, the carers of all of the young people who participated were also invited to take part in the study. In the case of two of the young people their carers did not participate. The remaining carers all took part - this amounted to 12 carers who were caring for 16 of the young people who participated (some of the carers were caring for more than one young person). Additionally, in one case a young person changed her mind about participating at the last minute but the couple who were caring for her still took part. The final two carers who participated were a couple who were approached on the basis that they had been providing supported lodgings for a considerable number of years and they were known to the researcher. The young person in their care was over 18 and neither the social worker nor the carers deemed it appropriate for him to take part due to his difficult personal circumstances at the time of the study.

Regarding statutory participants, an invitation was extended to all members of the TSCSA to participate in the research. A total of 7 members of the team took part, including 1 principal social worker, 2 social work team leaders, 2 children's social workers, 1 fostering social worker and 1 aftercare worker. The HSE

psychologist with responsibility for providing psychological services to separated children also took part. One HSE social worker based outside of Dublin was also interviewed. Representatives of the Reception and Integration Agency (RIA) were approached about participating and 3 individuals took part.

A list of other relevant stakeholders was developed through consultation with the research funders and with other organisations involved in the field. These stakeholders were then invited to participate by email with 17 individuals taking part. Finally, the managers of the four residential centres that cater specifically for separated children were invited to take part, with 3 of the managers participating.

Profile of the separated young people who participated

The separated young people comprised of 8 females and 13 males. The average age of the young people was 15.8 years, with the youngest participant aged 11 and the eldest participant aged 19. Five of the participants were aged 18 years of age or older at the time of interview (one of the young people had just turned 18). The five young people were still going through the asylum process. Two of them were living in direct provision accommodation, one was due to move to direct provision accommodation within a few months, one had been granted permission to remain in a foster placement and one was living with a friend.

While ten of the young people were from Nigeria, the remaining 11 young people came from 9 other different countries. In order to protect the identity of the young people the actual countries are not identified

¹⁰ Adult asylum seekers and their families are cared for under the 'direct provision and dispersal system', whereby they are directly provided with accommodation in specific centres (often former hotels / hostels) which are dispersed throughout the country. Each adult receives a weekly allowance of EUR9.10 and EUR9.60 for each child. The Reception and Integration Agency (RIA) coordinates services for asylum seekers.

here: instead the regions of origin are provided. Six of the participants were from Eastern Africa, 2 were from Middle Africa, 2 were from Central Asia, and 1 was from Southern Africa. Regarding religion, 15 of the young people were Christian and 6 were Muslim.

All of the young people had been living in Ireland for more than six months at the time of interview: 4 had been in Ireland for less than a year while the remaining 17 had been in Ireland for between one year and 7 years. Regarding their immigration status, 6 of the young people had not yet applied for asylum¹¹, 2 had applied for asylum and were awaiting their interview, 2 had been refused refugee status and were awaiting their appeal hearing, 8 had applied for leave to remain, and 1 had applied for both subsidiary protection and leave for remain. Only 2 of the young people had been granted refugee status at the time of interview. Regarding the 18 young people who were in either foster care or supported lodgings, they had been in their current placements for varying lengths of time ranging from 4 months to 6 years.

Profile of the foster carers and supported lodgings carers who participated

The 16 carers who participated comprised of two male/female couples, 1 male interviewed alone, and

11 female carers interviewed alone. Of the 16 carers, 10 indicated that their country of origin was Ireland and 6 indicated that their country of origin was an African country (Nigeria, Kenya, and Cameroon). Five of the carers were caring for more than one separated young person. The carers who participated ranged in age from 26 to 62 with the average age being 43. One carer was Jewish and the remainder were Christian, of different denominations.¹² The two couples who participated were supported lodgings carers. Of the remainder, 4 were supported lodgings carers and 8 were foster carers. The carers had been offering placements for between 4 months and 11 years. Three of the 16 participants were parenting / caring alone.

Profile of the professionals / stakeholders who participated

The professionals / stakeholders comprised of 9 HSE staff members (social workers, project workers / after care workers, and a psychologist); 3 professionals working in residential units for separated children; 3 representatives of the Reception and Integration Agency (RIA); 5 professionals working in the private fostering agencies; 11 professionals / stakeholders / volunteers from organisations working directly with separated children, advocating on their behalf, or providing funding in the area; and 1 researcher / academic. Many of the stakeholders had been working with separated young people for more than five years, with some involved in the area for over a decade.¹³

¹¹ Of these six, 3 young people were waiting to be reunited with family members in the UK. The HSE stated a number of reasons why others had not yet entered the asylum process, including ongoing care proceedings and the fact that young people had only recently arrived in the country.

¹² One carer indicated that she was a non-practicing Catholic.

¹³ The terms professional and stakeholder will be used interchangeably throughout this report to denote either professionals, stakeholders or volunteers.

Data analysis and write-up

The transcribed interviews were analysed using QSR Nvivo Data management software. The data was coded thematically. An initial draft of the research was sent to the HSE and to Barnardos (the research funders) for comments. These comments were then given consideration by the author and changes were made where deemed relevant and appropriate. The author remains responsible for the content.

Conclusion

Overall, the study was exploratory in nature and aimed to examine the use of foster care for separated young people. It drew on the perspectives of young people themselves, as well as the perspectives of foster parents, supported lodgings carers and stakeholders. The study has several limitations, including the fact that the findings cannot be generalised. In addition, the study only sought the views of participants at a particular point in time, thus highlighting the need for longitudinal research. Notwithstanding these limitations, the study highlights key themes that should be considered in relation to policy and practice development. It is to these themes that we now turn.

Chapter 3:

From Hostel 'Care' to Family Care

Introduction

This chapter explores the participants' perspectives in relation to the implementation of what has become known as the 'equity of care' policy in relation to separated children: Given that many of the stakeholders as well as some of the foster carers and young people had experience of both the old and new systems of care, they were very well placed to reflect on the previous system and to compare it to the new one. In addition, the participants talked about the challenges that emerged during the process of transitioning from the use of hostels to the use of family placements.

The closure of the hostels

Many of the professionals had been working with separated children for a considerable number of years and so had been very aware of the challenges that hostels had posed for separated young people. Several of the participants had been to the forefront in advocating the closure of the hostels and had experienced the frustration of working within a system that was considered by many to have two-tiers - one for Irish citizen children in care and one for separated asylum seeking children. There was an overwhelming sense of relief that the hostels were no longer being used and, for some, a sense of incredulity that they had been allowed to be used in the first place. Participants referred to the hostel system in the following terms:

A complete and utter disgrace...

Like, I can't believe that kids were in the hostels just fending for themselves with a security guy downstairs...

The hostel system just wasn't supporting the young people. It wasn't supporting them at all. It wasn't providing a home or a structure for them in any case. And it wasn't protecting them. Child protection wasn't being done there.

I mean imagine, I don't know your personal situation but if I had been on my own since I was 14, 15, 16, what sort of person are you going to turn into and that's somebody who has to fit into normal adult life later on ... You do have to learn it from somewhere. You can't, you're not just going to make it up on your own do you know?

A foster carer, who had not been involved in the field of separated young people when the hostels were in existence, reflected on what it must have been like for the young people:

I try to put myself in that position, and I think it would be a very scary position to be in. You know? You're sharing a hostel with people and religions and cultures that you know absolutely nothing about, and as a young child, I don't think that's acceptable at all, and I don't feel it should have happened at all. You know? A child is still a child regardless of where they've come from.

While the young people who had experienced living in hostel accommodation had many positive memories of these experiences and struggled with the transition to foster care - as will be discussed later - they too recognised the value of closing the hostels. One young person who had one positive experience of living in a hostel and one negative experience stated the following:

It's very good they are closed. You know? I think if a

young person is coming to Ireland, they should get families just instantly ... If I was with a family ever since, I think I would have moved up by now and stuff. It's easy.

However, most of the young people who participated in the research had never been placed in hostels as the hostels were in the process of being closed when they arrived. They were told about the previous arrangements that had been in place and asked what they thought. In general, these young people were of the opinion that foster care and supported lodgings was a better form of care. Many of their opinions about hostels reflected the views of young people who had participated in research that was conducted before the hostels were closed (Charles, 2009).

In the current study the young people said that they thought they would find it difficult to live with so many other young people and to share rooms with people whom they didn't know. They also said that they would feel unsafe and that they would struggle with the lack of privacy and with the fact that there wasn't a carer readily available. One young person stated:

Oh my God ... that's just creepy, oh my God, oh Lord, no I wouldn't imagine myself living there, ... sharing a room with another person I don't even know, and how, how did they all live together?

Another young person talked about the fact that as a girl she wasn't permitted to go out in her own country. She felt that for boys the hostels might be ok but that for girls they would be unsafe:

For the boys to go out it would be OK. But for the girl, if you go out ... Something might happen to you since you, you're too small. If you were an adult like you can defend yourself or something but since

you're small you can't go, you can't go out. ... a lot of different things can happen to you.

Again and again, the participants commented on the fact that the closure of the hostels was a positive thing. One social worker referred to the challenges that had been faced in monitoring the young people while they lived in the hostels:

We had no idea what was going on for those kids most of the time, and we had so many kids we couldn't keep track. And it's not fair to them.

The closure of the hostels meant that service providers didn't feel the same sense of worry for the young people with whom they were working. Another social worker stated:

It's great. It's important and it needed to happen.... I feel safe. I don't worry now, thinking, okay, that kid who just got out of a truck from Afghanistan is now in a hostel where, who knows, like, there are a lot of kids in those places. And you don't know.... Maybe he sees someone from a different tribe and something happens. At least now I know that, hey, this child is now with a family and they're going to look out for him.

Positive aspects of hostel provision

While all of the stakeholders were positive about the fact that hostels were no longer used to accommodate the separated young people, several of the participants commented on some of the positive features of hostel provision that had often gone unrecognised. It was felt that these aspects needed to be remembered so that the

new care arrangements could ensure that they were still in place.

Most frequently, the participants talked about the shared experiences of the young people living in the hostels and about the fact that being in the company of other separated children, some of whom were of the same ethnicity, provided them with support and friendship. Indeed, both nationally and internationally, the importance of peer support for separated children and young people has been recognised in the literature (e.g. Anderson, 2001; Goodman, 2004; Abunimah & Blower, 2010; Ní Raghallaigh, 2011b; 2011c; Wade et al, 2012). A social worker stated:

I was always an advocate for not having the hostels - I didn't like it. But... Those children really leaned on each other. It was very sweet to see, you know? And it helped, you know? They had support in each other, around the process, around being somewhere different, around all of the challenges and hurts that the system can throw up. They had that, you know, there was a little bit of security in it, I guess, that they were all sharing it ...they were all together.

While in general the professionals and the carers were very critical of the fact that there was no qualified care staff in the hostels to support the young people, a number of participants talked about hostel staff members who performed important roles. One professional talked about the fact that young people had some continuity in the hostels because of the same small number of staff being present every day. This differed from the new arrangements whereby, initially, the young people were living in residential care with different staff members working on a shift basis:

While we all recognise hostels didn't have sufficient staff for monitoring and for care, in fact, my

experience of people coming in here is that they knew who was on every morning. And these people may not have been trained, but ... they're good people and [they] were able to provide what was required, which was a smile, a 'how are you?' A 'how did your exam go?' And that consistency and normal sort of relating was very, very positive.

Another stakeholder spoke highly of a hostel manager whom she described as 'the most caring person' in what was 'a fairly chaotic place'. She described how he went above and beyond the call of duty in trying to help the young people:

He would go round in the morning and he literally would find kids ... and he acted just like a father and he would take you out of there and 'get yourself out to school' or ... that kind of thing. They still very fondly talk about that, and it comes back again to the security and the caring thing. They might have, in one way, preferred not to be found, but they knew when they were found that we cared enough about them too. And they appreciated that so much, and so many of them say that to us now, that they remember those things.

Professionals also recognised that while they may have been critical of separated young people being placed in hostels, for the young people themselves the experience of living in hostels was not always bad.

I think in general there would have been a sense that although we could look in on those hostels and, shock horror: Weren't they awful? From the young people's experience, it wasn't all bad.

Five of the young people who participated in the research had lived in hostel accommodation (prior to their closure) and had then moved to family

placements. Some of these young people had also spent time living in an unregistered residential unit and two additional young people had lived in an unregistered residential unit but not in a hostel. One of the young people described the hostel in which she had lived:

Young Person (YP): It's fine. We are all the same age together so it was OK. Because we are from different, different countries, different places. There was a nice environment, love between us. So it was really good.

M: Was there anything that you didn't like?

YP: Um, at first because it was my first time departing from my family it was just a bit harder to get mingled with the others, so that was a bit difficult part.

The same participant described how she felt when the decision was made to close the hostel:

We were a bit upset because it was like our home, it was becoming like, we were feeling at home, so we felt a bit upset and sad.

Many of the participants referred to the freedom that the young people had whilst living in the hostels. While the professionals and carers expressed concern about this fact, it was recognised that many of the young people liked this aspect of the hostel lifestyle. This was not surprising given the typical adolescent desire for more independence (Bailey, 2006) and given that some of the young people might have had a high degree of autonomy prior to arrival in Ireland. One young person stated:

For me, when I lived in [the hostel] it was a good place. It was like a home to me because I had a lot of friends there and I had my own room myself there and I had my own television. Like, I could basically do whatever I wanted to do. So, I had my own key

and I could go out and come back whenever I want. For me, the good thing about living there was that I had a lot of friends there from my own country and from the other countries. So, like, we get on together as families and we play football together, we hang around. Most of us, we go to the same school ... It's close to town. ... And most of the staff who work there, they're nice. So it was good.

Regarding the closure of the hostels and the move to family care, the same young person stated:

Most people [do] benefit from [the hostel] and it does affect most people. Because you feel like your whole life has been in there ... Like, you lived in there ... Your whole live is within there...

Yet, despite the positive memories that these young people had of hostel life, overall their belief was that foster care and supported lodgings were better places for young people to be cared for.

Transitioning from hostel provision to family care

In its 2011 report card, the Children's Rights Alliance, although welcoming of the 'equity of care' policy, was critical of its implementation, and described the time as a "difficult and stressful one" (Children's Rights Alliance, 2011:65) for many of the separated young people. The organisation stated that there was not sufficient time to undertake the necessary groundwork. Similarly, Horgan et al (2012) also refer to the concerns that have been raised about the transition to the new practice, particularly in relation to the lack of support structures for separated young people who are accommodated outside of the Dublin region.

The research participants referred to a number of difficulties that arose in relation to the transition. In particular, they referred to the difficulties that emerged because of young people being moved from hostels in Dublin to families outside of Dublin. To begin with, there appeared to be some resistance to this arrangement from within the HSE, a point that a HSE social worker acknowledged:

I think that we struggled with getting to a place where we could say, we're going to trust other people to take care of the young people whom we've been running around and trying to take care of. ... Initially I was resistant to the changes, because, yes, we do have expertise, and we were seeing this incredibly vulnerable group of people. And, unfortunately, the system in place as it was, put us in almost an adversarial role with our own agency ... because there wasn't an equity of care principle. And so our social work code of ethics was jammed up against our work - our day-to-day work - and that was a constant dilemma for us.

Similarly, another social worker described the transition period as "a difficult one":

I was involved with moving the young people from the hostels to the foster care placements or supported lodgings. And I describe that period as a difficult period. Some of the young people were positive towards the moves, but I suppose most of the young people found it very difficult to leave their peers and their friends behind and the social supports they'd built up in Dublin and to go outside of Dublin ... where they had to join a new school, live in a family environment which is very different from a hostel environment. So there were a lot of challenges for them, and there were a lot of challenges for the carers who took them as well.

For the young people also, the move to placements outside of Dublin was a difficult one, particularly in circumstances where strong peer networks had been established within the hostel environments. A staff member from a private fostering agency commented on this:

There was a difficulty in that some of them had formed fairly good friendships, which ... because they were in the country without their family, were probably more significant even than a normal friendship. And if those two young people didn't get placed together or close to each other, which did happen, that was a kind of wrenching... a wrenching apart.

While this 'wrenching' from peer support remained a source of concern, the participants remained relieved that the hostels had been closed and looked forward to the new system of care for the young people.

Conclusion

Overall, the participants were relieved that the hostel system of caring for separated children was no longer in place. Many of the NGO participants had lobbied for 'equity of care' and many of the HSE staff had struggled to work within a system that they felt was at odds with their professional ethics. Notwithstanding this sense of relief, many of the participants noted the positive aspects of hostel care, particularly in relation to peer support. The period of transition to family placements was described as a 'difficult one'. In particular, the various participants acknowledged the challenges that young people faced moving to foster care and supported lodgings when they had become used to living in hostel accommodation with peers.

Chapter 4:

From Residential Care to Foster care

Introduction

In general, in the Irish child welfare context, residential care has tended to be used as a last resort in cases where foster placements have broken down or where young people enter care during adolescence exhibiting behaviour that is viewed as too difficult to manage within family placements. Indeed Byrne and McHugh (2005: 314) state that the purpose of residential care is "to provide a safe, nurturing environment for individual children and young people who cannot live at home or in an alternative family at that time". While Bullock (2009: 217) suggests the need to challenge the tendency to view residential care as a last resort, he acknowledges that, within the UK context, residential care will continue to be used primarily in situations of difficult behaviour.

In Ireland, the practice in relation to the use of residential care is different for separated children in comparison with the general population of children in care. Rather than using residential child care predominately as an option of last resort, the present general practice is that, upon arrival, separated young people over the age of 12 are placed on a short-medium term basis in one of three residential centres that were established specifically for this client group. This chapter focuses on the perspectives of the young

people, their foster carers, and key stakeholders in relation to the use of these residential centres.¹⁴

Positive aspects of living in residential care

Of the 21 young people who participated, 9 had lived in one of the three short- medium term residential units immediately prior to their placement in foster care / supported lodgings.¹⁵ An additional 3 young people had lived in other (approved) residential units immediately prior to the family placement.¹⁶ Another 3 young people had moved directly from a hostel for separated children into foster care or supported lodgings. Six of the young people had not lived in any residential unit or hostel, having gone immediately into foster care upon coming to the attention of the HSE.

In general, the young people had very fond memories of their time in the short-medium term residential centres. They described caring environments, where they felt safe and protected, and these views were reiterated by many of the stakeholders, who were very positive about the service that the residential settings provided. The young people pointed to several specific things that they liked about the residential units, including being in the company of other separated young people, living in Dublin, and going on outings. For one young person, the companionship provided by the other residents in a non-approved residential unit helped him to feel less lonely when he first arrived in Ireland:

The good thing about the residential house was ... everybody was like together. I got to know ... people from different countries and we become friends and we were having dinner, everything like together,

14 While the focus in this chapter is on the short-medium term units, several of the participants referred to the long term residential centre for separated young people or to Riversdale House (an unregistered residential unit that was used for younger separated children prior to the implementation of the 'equity of care' policy). These references are included in situations where they are of relevance to the general practice of separated young people living in residential care.

15 In some cases, young people had moved into the short-medium term residential units when the hostels were in the process of being closed.

16 Several of the young people had lived in more than one type of residential setting during their time in Ireland (non-approved/unregistered, short-term approved, long-term approved).

activities and all that. So, I really enjoyed it like, you know, as a child when you leave your family, you come to a different country, you feel like so lonely, but when I went to the residential house it was like all the kids there together so you don't feel as much as ... when you're by your own, alone like.

Reflecting similar findings in the UK in relation to separated young people valuing the companionship aspects of residential care (Stanley, 2001), a social worker pointed to the fact that, upon arrival, young people got the opportunity to meet others who had similar experiences:

They find that, you know, they're not completely on their own even though the other person they're living with may be speaking a different language and be from a different country, but there's a shared experience in that they're all in Ireland, can't be in their own place, away from their family.

While residential staff mentioned that a resident might be asked if he or she wanted to show another person around the unit, or show them how to use the X-box or the Nintendo Wii, they always ensured that young people did not take on responsibility for their peers:

We make it very clear to the young people that it's our job, our responsibility, to look after the young person so that they don't feel that they have to do that, or that they feel that they have to listen to the young person's problems or if they're upset, that it's their responsibility in any way to deal with that.

While some of the young people struggled with the rules of the residential unit and the requirements to tell staff where they were going, most spoke very positively

about the staff members. They talked about the staff being welcoming when they arrived and about the support they provided. One girl, who appeared very settled with her foster family, reflected on her initial months in residential care:

Um, the first months were not very, not very OK because I was trying to settle in ... It was very difficult but ... they helped me in Grove Lodge¹⁷ to come over, to go over it, like to forget things, to be myself, to learn more things about myself, to grow like. It was very good, they really helped me in Grove Lodge. So while, while there the first few months were not really easy but they helped me to move out of the, of the pains that the, everything that was worrying me there.

In the UK, research found that residential placements at the point of arrival "provided a bridge to assist young people's adjustment to life in the UK" (Wade, 2009: 389), although the young people in that study were generally moving on to semi-independent settings. Similarly, the important role played by residential staff in helping with initial adjustment was highlighted by both statutory and voluntary sector stakeholders in the Irish context. Amongst other things, they mentioned the sensitivity of the residential care staff to cultural differences. At the outset, staff were credited with remembering the "simple things that are so important" such as having an interpreter available when showing the young person around the unit. In the more medium term, residential staff members were seen to be important in helping the young people in their adjustment to their new environment. One stakeholder, who was not a residential worker stated the following:

I suppose if a residential centre is used to getting in separated children and they already know, okay, we need to tell them about how to work the city and

¹⁷ Grove Lodge is a pseudonym used for all three short-term residential units.

work the buses, and they kind of get ... that initiation information ... probably a lot quicker than maybe if they were in a foster family that wasn't briefed properly or supported properly about how they should inform young people about how to live ...

Indeed, the residential staff who participated described how they engaged in such roles and how they helped the young people as they negotiated the cultural differences which they faced. This involved a mixture of planned input in which key-workers worked with young people in relation to cultural awareness, as well as more natural encounters whereby staff members responded when young people asked questions or made comments about Irish society. The interviews with residential staff suggested that this work involved cultural exchanges of information between staff members and young people. In essence, the staff facilitated the young people to begin the process of acculturation (Berry, 2001). While Berry (1997; 2001) has identified various acculturation strategies, the 'integration' strategy is associated with better psychological and sociocultural adaptation (Berry et al, 2006). This involves the immigrant wishing to maintain their heritage culture whilst simultaneously seeking interaction with other cultures. By helping the young people to "learn the norms of Irish society" while also encouraging them to hold on to their own cultures, the residential staff were playing an important role in this acculturation process.

Having initial placements in the residential units allowed social workers the time to conduct assessments of need and to develop more knowledge in relation to the children so that an appropriate placement could be found. The two short-medium term residential centre managers who participated stated that they had an

"excellent" relationship with the Team for Separated Children Seeking Asylum (TSCSA) and it was evident that these relationships were indirectly beneficial to the young people. While the HSE and the residential managers were clear that the residential units are not 'assessment units' per se (as seemed to be commonly believed among other stakeholders), the HSE clarified that the units are used for initial placements in order to assess the needs of children and plan for longer term placement options or possible reunification with family members. While social workers were responsible for conducting these assessments, from the social workers' points of view, the staff in the residential units served as very valuable sources of insight in relation to the needs of the young people and in relation to any issues that might need to be taken into consideration when planning for the child's longer term care. As they had experience dealing with many separated young people, they had become "aware of some of the cultural norms" and, as a result, "they can let you know if they think that there are any areas of concern". Related to this, in circumstances where children were deemed to be at risk of self harm, or at risk of trafficking, or where there were queries about their age, residential care allowed the young people to be more easily monitored on a 24 hour basis, something which professionals felt could be too much to ask of a foster family. However, it is likely that highly trained foster carers could provide this level of monitoring, particularly if 24 hour social work support was available. The HSE stated that its policy was to ensure that no separated children were moved into foster care until an age assessment and child protection risk assessment had been completed.

Some stakeholders, particularly social workers, pointed to the very practical benefits of using residential care in the Dublin area when young people arrived in the

country: The location of the residential units (in Dublin) meant that it was easier to organise initial appointments with the Office of the Refugee Application Commissioner (ORAC), with the Refugee Legal Service (RLS) and with health screening services. As the residential units were all located in the same city as the TSCSA, this specialised team was in a position to provide the young people with intensive support during their initial period in Ireland. The young people were able to be linked in with the City of Dublin Vocational Educational Committee's Separated Children's Education Service, where the Refugee Access Programme provided intensive preparation for mainstream education in Ireland (CDVEC, n.d.). In a context where Dublin-based family placements were relatively scarce, some participants expressed concern that if the young people were moved to foster care outside of Dublin upon arrival, there would be fewer such supports available to them. However, an argument put forward by the HSE was that social work teams outside the main urban areas might often have greater capacity to provide support, as social workers might have smaller caseloads.

Challenging Aspects of Living in Residential Care

The separated young people also identified some challenging aspects of the residential care experience, many of which are in keeping with the experiences other young people living in residential settings. The conversations with many of the young people suggested that, when living in residential care, they struggled with the rules of the residential units and with the level of monitoring of their activities. While some remained

critical of this aspect of their residential experiences, others looked back with hindsight and said that these rules were important as they had been younger at the time and needed this level of care. Another challenge that was frequently mentioned was the challenge of being cared for by a team of different staff members who worked on a shift basis. For example, one young person, who in general spoke very positively about her residential care experience, reflected on the fact that different people "come in and go":

It's not a normal place to be at like if you get me ... You're not really living in a stable place Like, it's great, like to live there but ... people come in and go and staff changes everyday so it's kind of like 'woooo', you know, and for other young people that might be too much, if you get me. For me ... at first it was like 'Ahh my God', today you're seeing this person and the next its another person and ... it's just always new people coming in and it's just like 'AHH' ... I don't know but I think that... people should be sent to families but then I like residential units as well, so I don't know.

Others struggled with being asked questions by different staff members. For example:

I just don't like it 'cause so many people, like their job is to ask you if you're OK blah, blah, blah which I don't like. If some, like, one person asks me I'm grand, but when so many people are asking me the same questions and then I just get nervous, just get angry.

Given that separated young people often find it difficult to trust (Ní Raghallaigh & Gilligan, 2010), it is likely that it will prove difficult to establish strong trusting relationships in a context where they are aware that the care arrangements are temporary and where multiple

professionals are present. This is a particularly pertinent point in circumstances where there are concerns about trafficking (Horgan et al., 2012). However, on the other hand, it is recognised within the broader literature that residential care might be helpful in situations where young people have difficulties allowing any one person to become close to them as they can benefit from having a number of different people available (Whitaker et al., 1998, cited in Bullock, 2009: 212). Indeed, one of the residential staff members stated that the residential unit was "set up so that you don't get too attached to people because people change daily" and continued by stating that this was "really the right way for the young people ... definitely, in the beginning". While such an approach might suit some separated young people, it is likely that for others it would be less suitable.

It was suggested by one professional that the young people came from contexts where they may not have been familiar with the professionalisation of relationships and thus, given that their initial relationships were with professionals, they were at risk of becoming socialised into thinking that all relationships in Ireland were like these. Inevitably, these relationships were limited, with paid staff generally unavailable outside of their working hours and generally only having limited contact once the young person had moved into foster care. In essence, as Bullock (2009) points out, it is difficult, if not impossible, to provide unconditional love within a residential setting. Professionals commented that it was sometimes hard for the young people to adjust to this type of relationship or to understand its parameters.

Also, the young people commented on the unnatural nature of the environment in which all of their activities

were logged by staff. In addition, they talked about the sometimes challenging aspects of living with other young people of varied cultural backgrounds, and the fact that young people with whom friendships were made would then move out of the unit and into foster care. For example:

Young person (YP): Grove Lodge was really fun ...and different cause lots of people come and just go and like you're there and you have to say goodbye to loads of people

Muireann (M): OK was that hard?

YP: Sometimes because you feel really like, become really good friends with them.

Many of these challenges related to the fact that residential care was not considered a 'normal' form of care. Stakeholders talked about the residential units representing a form of care that was 'alien' to most of the young people's prior experiences, where immediate and extended family care was generally the norm. Professionals and young people alike alluded to the stigma associated with residential care, with several participants stating that young people were often reluctant to tell their peers where they were living when in residential care. Professionals discussed the risk of the young people becoming institutionalised. Residential units had rules and regulations in relation to health and safety which meant that there sometimes could not be the same level of flexibility in their care as there might be with a foster family. One stakeholder (a social worker) stated the following:

Stakeholder (SH): I think the residential units could sometimes really institutionalise somebody. It can be very structured. Like, I mean, as it needs to be, it needs to function for six children, but it can be very structured and some can adapt to it but, you know, while they're adapting, they're just sort of falling into

this pattern of this real westernised type of care where we do everything for you and, you know, some of their own innate coping mechanisms ... get a little bit less. Whereas if they're in a family, the independence, the individuality of it all. Like, there seems to be a little bit more control over their simple things, like their routine.

The same stakeholder clarified what he meant by the residential units being 'very structured':

Curfew times, how much pocket money you can get, what you can spend it on, what school you can go to, you know, what chores you have to do. They can become very institutionalised. And I've had some kids, you can see them, and they'll be very robotic. Like, they'd be able to function great in the unit, and then find it very difficult to cope once they'd have to leave that unit.

The impact of residential care on adjustment to family placements

The young people were made aware from the outset that the residential placement was a temporary arrangement. The residential staff members were clear that their role was to act as a "springboard" between the point of arrival and the long term family placement. Regarding the move from residential care to foster care, one of the residential centre managers emphasised that the young people were very well prepared for family care by their social workers. This preparation involved talking to the young people about their expectations about family care, discussing what kind of placement they wanted, telling the young people about potential families and, finally, arranging for a young person to spend time with a family before a final decision was made. The residential staff fed into the social worker's

assessment of the young person's needs and they helped in the process of preparation. A residential manager stated that, when the moves occur, "sometimes we [the residential staff] are more upset than they are".

Nonetheless, the transition from residential care to family care proved challenging for some of the young people. There were various reasons for this. The two environments usually differed in a lot of fundamental respects.

To begin with, young people were often moving from a busy unit, with five other residents and two or three members of staff, to a family home with much fewer people and sometimes with no other teenagers. One of the carers who was providing supported lodgings felt that some young people struggled to adjust to the care that he and his wife provided as the care was so different to what they had become accustomed to. He commented on the fact that young people seemed to be "molly-coddled and spoiled" in the residential units. He described how the social care workers were young (in their twenties) while he and his wife were in their fifties; how the care workers worked shifts meaning that they could completely focus on the young people during that time because "it was their job" whereas the couple worked full time as well as offering supported lodgings; and how the social care workers, who seemed to be "like best friends" to the young people, had a generous budget to spend on outings. In this carer's view, these stark differences between the two types of care led to problems when the young person then moved to a supported lodgings arrangement and expected to live a similar type of life and experience a similar level of intense support:.

[In residential] there was always somebody there for

them to go to. But then suddenly, they go from that level of support, where they come to here, where we're getting up in the morning, we're with them, we get them out to, you know, they go to school, and then they come in home. We have to cook dinner, we have to get dinner, work hard, because we've been working all day. You know? And it's a home. It's a home as opposed to what was a fun factory for John¹⁸ in particular, you know? Now, I don't know if that's a good thing or a bad thing ... It was certainly a good thing for him, and I can imagine from his point of view, you know, what a welcome to Ireland that is! You know? And it got him on his feet, gave him great confidence.

The difference between residential care and foster care / supported lodgings was also referred to by one of the professionals who talked about young people becoming socialised into a materialistic culture in the residential homes. For example, she stated that they often had televisions in their bedrooms and that they received phones as birthday presents. In her view, these kinds of circumstances caused problems with the transition to family care, as foster and supported lodgings families might not provide these material things, either out of principle or because it was not possible financially.

There were other challenges too in transitioning from residential care to foster care. To a large extent these challenges reflected the fact that the young people were happy in residential care and thus a move elsewhere was difficult for them. One of the social workers described the desire of the young people to stay in their residential unit:

They really can, you know, want to cling to the first place that may be perceived as safe or where people like them ... So when they're in here, it can be really difficult to then explain that we're now moving you on. You know? We've identified a placement that will be long-term. This unit was only ever for six months at the most. So, yes, there can be a real reluctance to change because they feel safe for the first time.

A young person described feeling a mixture of happiness and sadness upon moving from a long term residential unit to foster care:

I was happy to finally find a family but I was also sad to leave, to leave the people I'd been living with ... I really got to know them and I liked them. So it was a happy and a sad moment.

In many instances, the move also involved a change in geographical location meaning that it was difficult for young people to maintain continuity in the relationships that they had established during their initial months in Ireland.

While divergent views emerged in relation to whether the young people should be placed in residential care or in foster care at the point of arrival in Ireland, the vast majority of the participants agreed that the move to foster care / supported lodgings should happen relatively quickly, with some professionals suggesting it should happen within four weeks. One social worker explained that when the move doesn't happen quickly it can cause problems for the young people in adjusting to their family placements:

But sometimes if there are age concerns, if there are health difficulties, if there are difficulties with asylum, they do remain there for longer than we would like, and they've built the support network, they've linked

¹⁸ This is not the young person's real name

in with churches, they've linked in with schools, they've started to make friends, and that is very, very difficult for them to move at that stage, whereas the quicker we get them moved to a foster family or supported lodgings family, outside of Dublin, the easier it will be on them.

Indeed, other countries have reported similar difficulties in relation to moving young people in a timely manner to longer term care placements, resulting in young people building relationships with staff, peers, and guardians and then "having to face a separation with all that it entails" (Swedish Report, n.d.: 50) once their permanent accommodation is found.

While most professionals were of the view that the move from residential to foster care needed to happen quickly, one professional involved in educational services suggested that, from an educational perspective, separated young people could often benefit from remaining in their residential placements for longer periods of time so that they could benefit from the services offered by the CDVEC, as often their move out of residential care equated with a move out of the Dublin area. This highlights the importance of considering the impact of a change in geographical context when young people are being 'matched' to carers (Selwyn & Wijedasa, 2009), something which will be returned to later in this chapter.

Overall, the young people had positive experiences in residential care and when asked if they thought young people should continue to spend some time in residential care upon arrival in Ireland, most of them thought that they should. While the professionals were mainly very complimentary about the care that the young people received in residential units, they had

mixed views about this practice with many believing that spending time in residential care was unnecessary and resulted in further disruption for the young people. However, there were other professionals who saw its benefits.

Foster carers and supported lodgings carers: recruitment, assessment, and training

Nationally and internationally, the recruitment of suitable foster carers remains a problem, resulting in shortages of placements (McWilliams, 1997; Sellick, 2006; Selwyn et al, 2010; HIQA, 2010a). The professionals who were involved in recruiting carers mentioned a number of strategies that had been used in recruitment, including recruiting through churches with large African congregations, through distributing fliers in shopping centres, and through word of mouth. While efforts had clearly been made to recruit ethnic minority carers, agencies had limited success in this regard. One professional working in a private fostering agency stated the following:

I think the main challenges are that we aren't that successful at the moment in actually managing to recruit carers that reflect their background. And so although we have managed to recruit some carers from different backgrounds, we haven't managed to have a range of carers, who in terms of matching and being able to place young people in same-race placements, for example, that's just not been possible.

The foster carers and supported lodgings carers all talked about participating in an assessment process prior to being approved as carers. Many of them

commented on the fact that this process was lengthy (the assessment interviews generally happen over the course of a number of months, if not longer), with views diverging in relation to whether this was a good thing or a bad thing. For some, the process was deemed to be 'intrusive' whilst for others it was described as 'good' or 'appropriate'. After the social worker initially provided information about what would be involved in foster care / supported lodgings and after determining the suitability of the accommodation that the applicants could provide for the young person, the assessments involved several in-depth interviews with the prospective carers as well as interviews with their own children and any other foster children living in the household. The assessments were conducted over time, which enabled the applicants to have time to think and reflect on what they were deciding to do.

Participants involved in the recruitment of supported lodgings carers and foster carers stated that the assessments that were conducted were the same, apart from the fact that supported lodgings carers were allowed to work outside the home while in the case of foster carers at least one of the carers was usually expected to act as a full time carer, as is indicated in the HSE's Foster Care Committee Policy, Procedures and Best Practice Guidance (HSE, n.d.). However, the research suggested that there were two other differences between the two types of care. Firstly, as mentioned previously supported lodgings assessments were, until April 2012, approved at a local level by the principal social worker, while the foster care placements had to be approved by a fostering committee which comprised of a number of different professionals. While this situation has now changed, with new best practice guidance requiring that all carer assessments are presented to the committee (HSE, n.d.), the supported

lodgings carers who participated in the research had been recruited while the older system was in place.

Secondly, it appeared that HSE supported lodgings carers received little or no training, while the vast majority of foster carers, who were generally recruited by private agencies, received a significant amount of training prior to the first young person being placed with them. One of the HSE social workers stated:

Training has been a bit of a challenge. We've tried, on various occasions, to link in with the private fostering companies to get our supported lodgings carers on it, and it's always been an issue to get the times together. So, in terms of actually any of the carers having done their formal training, I wouldn't say they have.

While social workers supported the carers and, in doing so, provided them with information and advice in relation to the care of separated young people, this is an area of particular concern, given the specific needs of this client group, including their vulnerability to trafficking. The need for carers to be adequately trained has been highlighted regularly within the literature (Horgan et al., 2012; Kidane & Amarena, 2004).

Matching of carers to the young people

In relation to foster care, Cousins (2009: 348) defines 'the match' as "the outcome of [a] considered assessment: the decision that this child and this family are indeed suited to each other, and that the connection should be formalised". *The National Standards for Foster Care* state that "children and young people are placed with carers who are chosen for their capacity to

meet the assessed needs of the children or young people" (Department of Health and Children (DOHC), 2003: 19).

The interviews with professionals in the HSE, with professionals in the private fostering agencies, and with carers themselves suggested that a considerable amount of time and energy was dedicated to the process of matching. This was in contrast to the interviews with other stakeholders who expressed concern about how decisions were made about the placement of children with particular families. Indeed, the organisation Action for Separated Children in Ireland (ASCI) expressed concerns about the carers with whom young people were being placed and stated that "cultural matches have proved to be problematic" (ASCI, 2011: 5). Concerns were also expressed by those who took part in the trafficking research by Horgan et al., (2012). Within this current study, some stakeholders acknowledged that their views in relation to inappropriate matching were based on examples of situations where placements had not worked out (see later section on placement breakdown), thus partly explaining why their perspectives differed from the process described by carers and by professionals. Overall, this current research found that matching involved considerable time and deliberation, as is outlined below.

The process of finding placements involves the child's social worker on the TSCSA sending a placement request form, firstly, to the internal staff recruiting carers and then, if needs be, to the private agencies. This form includes basic information about the child. The fostering workers then send information back about potential carers. The interviews with HSE staff suggested that social workers then discussed this information with

the fostering social worker and with the child before selecting a placement.

When assessing the suitability of carers for fostering / providing supported lodgings, social workers discussed with applicants what children they were willing to take, with carers sometimes expressing preferences for a particular age group or gender, for example. One female carer who was parenting alone indicated that she had asked for female children as she had a young child of her own and only had one toilet for the family. Another carer stated the following:

Every child is different. Some are quiet, some are noisy, you know. They also look at the kind of person you are ... so I will be someone that I'm comfortable talking to people ... so they would bring a quiet child knowing that I would be able to draw the child out ... So, I'm not really a party goer, so they won't bring a child that would love to go out, you know ... Things [that] make kids unhappy ... just like the child is in a place where the child is not used to their ways,. So I have more of an English approach you know, more like you know, dinner is served, you know, come down, table, family, everybody eats together, not too many friends, just private life, our own life.

In recent years, increasing emphasis has been placed on listening to the opinions of children and young people. It was evident that the social workers on the TSCSA talked to the young people about their preferences - whether they wanted to live with people from their own country or from their own ethnic group, people from their own religious community, people with children, people with pets etc. The data showed that the process of matching was an extremely complex one, where multiple factors had to be considered. Table 3 lists some of these factors.

Table 3: Example of factors considered when matching (as identified by social workers and representatives of fostering agencies)

<u>Ethnicity</u>	<u>Composition of family (e.g. one or two carers, ages of carers, ages and genders of other children)</u>
<u>Culture</u>	<u>Level of commitment carers can give</u>
<u>Language</u>	<u>Carer's links to the local community</u>
<u>Religion</u>	<u>Pets in the household</u>
<u>Geographical location</u>	<u>Views of the child</u>
<u>Practical elements (e.g. accommodation, transport)</u>	<u>Child's interests and hobbies</u>
<u>Education/special educational needs</u>	<u>Child protection and safety issues</u>
<u>Health needs / Disability</u>	<u>Challenging/offending behaviour</u>
<u>Contact with family members</u>	<u>Personalities</u>
<u>Possibility of keeping siblings together</u>	

While some stakeholders were critical of matching decisions that were made, social workers defended their practices by providing examples of the decision making process. Ultimately what emerged was that the lack of availability of a pool of foster carers and supported lodgings carers meant that social workers placed children with the carer who most met the child's needs, while recognising that in most situations some needs could not be met by this particular carer. It was widely recognised by the participants that, in an ideal world, more carers would be available and thus the matching process would be easier, albeit never perfect. For example, a professional in one agency talked about the 'matching checklist' that was used in her organisation to try to match children with families:

We try to match them as far as possible. We identify where the match hasn't been met. And I mean even with a white Irish child, it would be very unusual for

the matching checklist to tick all the boxes. There's always some shortfall. And then we, what we then do is consider how we can ameliorate that, you know, how can we minimise that shortfall? So it might be, for example, a child might go into a non-Muslim family, but how can we, if that child wants to be connected in with their religion and with members of their religion, how can we facilitate that?

While many of these factors were the same as those considered in relation to Irish 'citizen' children, some factors received a different level of consideration by virtue of the fact that the young people were separated asylum seeking teenagers. For example, while in most situations efforts are made to ensure that foster children are placed in families where the carers' birth children are older than those being fostered, this was often not possible in relation to separated young people as most of them were teenagers. In addition, one unexpected finding that was mentioned by several professionals was that many of the young people did not want to be placed in houses with pets, particularly dogs. This differed from Irish 'citizen' young people:

... In their own countries dogs were used to scare and weren't seen as pets. So, a lot of the foster families have pets and for an Irish child, I think pets are brilliant in foster families. I think they're a real comfort for young people. But when I started in the team, I realised that, oh, actually, it might not be the case for our young people because they do scare them. And, as well as that, in the Muslim religion, pets inside and against clothes and all the rest of it is a no-no. So that, that can definitely cause issues, you know, because if the young person is clearly saying to me they won't go to a family where there are pets. That's hard. That's a hard one. You could have an ideal family ... [but] ...their beloved dog.

Within the interviews, frequent reference was made to cultural diversity issues. *The National Standards for Foster Care* (DOHC, 2003:15) state that children should be encouraged and facilitated to practice their religion and to give appropriate expression to their ethnic and cultural identity. The Standards state that "whenever possible, children are placed with carers from their own cultural, ethnic and religious group". When this cannot happen, the standards state that foster parents should be "supported to enable the children to develop a positive understanding of their origins and backgrounds" (DOHC, 2003:15). Interestingly, while the new *Draft National Quality Standards for Residential and Foster Care Services for Children and Young People* (HIQA, 2010b) also emphasise the importance of allowing children to appropriately express their cultural/ethnic identity, they do not state that children should be placed with carers from their own cultural, ethnic, and religious group.

Ethnic and cultural matching was a contentious issue within the research, with several of the NGO stakeholders expressing the belief that such matching was done on a rather simplistic basis. Within the literature, frequent reference has been made to this issue, although often in relation to younger children. Selwyn & Wijedasa (2009: 378) suggest that providing "same race" placements on the basis of broad categories such as African or Asian "provides no clue to the culture of the child and prioritises skin colour over all the child's other needs". They go on to say that "even if 'matched' by a more precise ethnic category, families may differ culturally because of social class, generation, and neighbourhoods". Similarly, Goldstein & Spencer (2000) suggest that identical matches are often not possible as different families have their own interpretations of culture.

Several of the stakeholders stated that young people from Africa seemed to be placed with other African families without considering the fact that countries in Africa differed greatly from each other and, indeed, that within individual countries, there was huge diversity:

You would be looking for quite a ... range of skills, but certainly an understanding of cultural diversity issues and.... So it may be a family that is from the same country of origin as the young person. It need not be. It certainly shouldn't be, it shouldn't be matched on that basis because, you know, I've heard anecdotally of that happening ... from the same continent. "Oh that child is from Nigeria; let's place them with a Kenyan family." And that may or may not work.

However, the interviews with the social work professionals and with the representatives from the private fostering agencies suggested that this kind of simplistic matching was not taking place and that considerable attention was paid to the cultural needs of the young people. Professionals from the HSE and from the private agencies emphasised that efforts were made to place children with members of their own specific ethnic groups. However, given the range of factors that needed to be considered and the small number of carers that were available, it proved problematic to find carers that were of an exact match to a particular child's culture. For example, while a Nigerian carer might be available for a Nigerian child, their religion or ethnicity might differ. One professional involved in the recruitment of carers stated the following:

Even within the same countries, you have different ethnicities. And differences amongst them. ... But, generally, by the time a carer goes for approval and is approved, the difference wouldn't be from the carer's side. They're open and willing to accept a

child from any ethnicity, any country, you know, without any bias. So, it then might be with the child feeling that, 'oh, I'm from this tribe, they're from this tribe, maybe it wouldn't work'. It's generally not from the carer's side, because we would have discussed that with the carers before.

Where a carer from the child's ethnic community was available, the professionals assessed whether this was the right match for all parties. Where a carer of the same ethnicity was not available, professionals looked more broadly. Often children were placed cross-culturally, with a white Irish family or with an ethnic minority family who were not of the same ethnicity or nationality as the child. Social workers provided rationales for these decisions and their narratives suggested that the decisions made were based on the needs of the young people. For example, one social worker provided the following example:

We do have a Nigerian young person ... placed with an [East African] family. But, you know, they had the church in common and stuff like that. And the [East African] lady does have quite a lot of Nigerian friends and was, you know, was in a really good position to do some good work with this young lady.

Whether young people were placed cross-culturally or within a child's cultural community, meeting the cultural needs of the young people remained a priority. Professionals emphasised the importance of families having an understanding of cultural diversity. A representative of the private agency stated:

When you're matching, you have to be sure that the foster families really understand what it means to value diversity and to be able to sort of incorporate the child's culture into their family

In addition, the matching process for this specific group of young people was made even more complex by the fact that often little information was available in relation to their previous histories. The young people themselves were often reticent or secretive about prior experiences (something which will be discussed in more detail later). Usually it was not possible to contact relatives in their countries of origins. This differed from the placement of non-migrant children where, in general, relatives and service providers could provide a picture of the young person prior to the allocation of a placement. One professional acknowledged that it was difficult for social workers to adequately assess what placement was best for the young people given that they had such little information available to them:

If they have someone in the system already, they kind of get to know that young person and they kind of get to know the behaviour, and they get the reports from all other people involved in the young person's life. Sometimes they're just new in the country. ... And they don't know. And it takes months, if not more, to actually get to know a little bit and get to build a relationship with the young person. So, I can't say that the social workers know what they're doing; they don't know because they don't have that information.

When asked how decisions were made about what family a particular child will go to, one professional stated the following:

First of all, "Do we have a body?" "Do we have a bed?" We'll start with the basics first. Who's got a vacancy? And then, okay, what's been their experience? ... Looking at the assessment, about their family situation, their lifestyle, where they live. ... And the sort of people they are.

Many of the stakeholders were critical of the practice of placing children outside of Dublin, particularly when they had spent a number of months in Dublin-based residential care. Often, this meant moving to a different school and difficulties in maintaining relationships that had been built up during the early resettlement period. However, a senior HSE professional defended this practice, stating the following:

The geographical piece is not high on my list of matching priorities. It can't be. It has to be 'Who are these people?' and 'that kid is going to thrive best in that home, in Kerry, or they'll do okay in Dublin'. I mean, really, of course you want the young person you're responsible for to have the best placement possible. ...And there are great families around the country who have a lot of love to give. ... We've been accused for so many years of ghettoising these young people in Dublin. We move them around the country and now we're being accused of uprooting them. We're not uprooting them; we're placing them in stable homes with love and care.

Overall, many of the participants suggested that ultimately successful matching depended on the personalities of the parties involved.

In the final analysis, I tend to think it's mostly to do with the personalities, I think. ... Individual personalities of the child and the family. I think that will determine a... better, successful placement than just going by nationality.

Indeed, this quotation suggests the importance of young people and prospective carers spending a lot of time together before final decisions are made about the placement. The research interviews suggested that once a possible match was established, the process of transitioning the child into the placement would then

begin. This generally involved an initial visit to the family, followed by an overnight or weekend stay, after which both the family and the child would be consulted about their experiences. However, professionals acknowledged that because of the shortage of placements, while the young people's views were taken into consideration, there was usually not a huge amount of leeway for young people to try a number of different placements before choosing their preference. Again, this points to the need to recruit more carers. In addition, further research is needed in order to establish the link between the level of choice available to the young people and the subsequent placement outcomes.

Conclusion

The young people reflected on both positive and challenging aspects of living in residential care. It was evident, in particular, that the transition to family placements was a difficult one to make. While divergent views emerged in relation to the use of residential care upon young peoples' arrival, most of the stakeholders felt that if they were to continue to be used, the move to family placements should take place quickly. It was evident also that the process of matching children to foster carers and supported lodgings carers was a complex one, which involved the consideration of numerous factors. Ultimately, the shortage of foster placements made the process particularly challenging.

Chapter 5:

Living in a Family Placement

Introduction

This chapter focuses on the young people's general experiences of foster care and supported lodgings, with a particular emphasis on the relationships that developed between the young people and their carers. It explores the moving-in phase and the inevitable anxieties that the young people experienced. It examines the factors that helped them to feel settled with the families with whom they lived, as well as the factors that contributed to a less settled experience. The chapter explores both the positive aspects of foster care, from the perspectives of the young people and their carers, as well as looking at the challenges that were faced. Throughout the chapter the views of stakeholders are also included.

Moving in and settling down

Of the 18 young people who were currently in foster care / supported lodgings, 12 were living in such placements for the first time. Three of those currently living with families had experienced one previous family placement. Three young people had experienced more than one previous family placement. An additional three young people were no longer in the care of the HSE but were reflecting on their experiences in family placements: one had been in just one family placement, one had been in two family placements and one had been in more than two such placements.

While a number of the young people reported that moving in to foster care and supported lodgings placements was 'fine' or that they were 'not worried' and 'not scared', the majority of them spoke about initially feeling 'worried', 'scared', 'shy', or 'unhappy' and

described the actual move into foster care as 'difficult' or 'disturbing' for them. This is in keeping with both the general literature on foster care (Sinclair, 2005; Wilson et al, 2005) and the specific literature on separated young people in foster care (Wade et al, 2012).

The young people identified particular reasons why they found the move difficult. For some, they had been happy in a previous placement (for example in a residential placement or in a hostel), they had made friends there and had developed relationships with staff, and as a result they were unhappy about being moved to foster care or supported lodgings. Many were fearful of the unknown and didn't know what it would be like to live with a family that was not their own. They worried about not knowing what they could or could not do within the new family environment. They also worried about how they would talk to the families with whom they were living given that they did not know them. The young people made statements such as the following:

I was nervous cause ... coming to live with new people its like 'Ahhh OK, Can I act like this? Can I do that? Can I do this?' You know? But when I came here it was like, 'I know they're nice, so, yeah, I'll just go with the flow'.

It was kind of like weird because I didn't really know them, so I was kind of shy and I wasn't like really open with them.

It was ... it was OK, I was nervous but the second day I got over it.

Others found the move difficult as they were being moved to a different county within Ireland. The National Standards for Foster Care (Department of Health,

2003) require that priority is given to children being placed within their own localities. In its 2006 inspection of the fostering services provided by Fostering First Ireland (FFI), HIQA (2007) found that of the 10 children to which the report related, only one was placed within the same HSE area. This was partly due to a lack of availability of placements and partly due to safety issues in relation to the child. While some might question the extent to which separated children develop a sense of their 'own locality' while living for 3-6 months in residential care, the ASCI contend that young people are often "becoming settled" during this period (ASCI, 2011: 3). The interviews with the young people concurred with this idea in several cases. One young person was moved to a placement that was over 200 kilometres from the residential unit, another was moved a distance of less than 40 kilometres. However, both of these young people commented on the fact that they were moving from a city to a rural location and that they were concerned about this. One of them stated:

For me, like, when I just came here it was difficult because I haven't lived in the country before, so, like, it wasn't what I was used to, so ... for me it was just like boring, like all my friends are in Dublin so, for me, like moving down to the country, like I don't have friends, nobody to talk to, that kind of stuff. So, it's not what I was used to, so it was like. It was actually difficult for me.

The young people identified various factors that helped them when they initially arrived to live with the family. Many of them spoke about the fact that they had opportunities to visit the families prior to moving in and it was evident that this helped them with the transition. One girl stated the following:

I felt [at] home quickly because I was already coming here for weekends and I was like ok already, ... I was

already used to the environment. Yeah, because, when I come here for weekend, we are always moving and we go out and she shows me everywhere, like we have a walk in the evening and we go somewhere in the back garden or we go to the shopping centre up there, just for a walk. So I already know the area, like. So when I came here first of all it was like 'ok I'm fine, I know the place' but the school was like 'ohh!' [laughs]. I don't know this place.

While in most cases, it was evident that a considerable amount of effort had gone into introducing the young person to the family, social workers highlighted that this was not always possible as sometimes emergencies arose and young people had to move immediately. One girl talked about not being able to say goodbye to school friends, and while she was upset about this, she seemed to have some understanding of why this had happened. However, in another case a young person reported that he did not know why he had to move and so the move had been difficult for him.

YP: I just landed here and that was it. ... It was really bad. Nobody, like, that's just not right. You just can't do that. You can't lie. You can lie, but a small lie is as big as a big lie, so you can't just say 'you're going to visit the next day' and then 'pack your stuff, you're going to visit now'. And that's it.

M: Yes. And did you have any understanding of why that happened?

YP: No. (Laughs) That's what I'm saying. That's the worst thing about it. It was just confusing. Gets in your head, then. When you go back to it, it gets you in your head.

Carers also identified various things that helped young people to settle. These ranged from ensuring that

young people were kept busy in the initial period, especially if they were not yet attending school, to ensuring that the young people could see that they were being treated the same as the carers' own children. Others pointed to the need to help young people to develop a sense of security and this was partly achieved by ensuring that they knew how things worked in the house or ensuring that they became familiar with the family routines. Sometimes, carers simply reassured the young people that they would look after them:

It will always stand in my mind about two days after he was here or three days he came down and ... and it's hard for them too to fit in a family. Do you know what I mean? And the look of fear in his face was terrible. He was really scared. And I caught him by the two wrists. You know? I said, "You've no need to be scared. We're going to look after you." ...He was really scared.

Another carer pointed to the importance of giving the young person space in the initial period:

They are new like ... they don't have the confidence so it is important to give them the space, like give them their own space, don't intrude too much. Like it takes time, like relationship building takes time and it is important as well to know that they are different, everybody has their own way of seeing things ... So like, I just personally feel that if you intrude too much, it would be like 'oh my gosh ... why does she want to know this?' Just let them be, that's the main thing.

A carer who was providing a supported lodgings placement, found that including the young people in cooking the main meal was an important way to make him or her feel at home:

And I think there is something very nice about the activity of cooking. It is the one thing that, if you

share it, you now feel part of the home. So I think cooking is a really, really important thing. And it's exciting. And you can talk when you're cooking ... In a non-threatening way, because we all have to do it. And, rather than be a passive receiver of your meal, this is actually now your meal.

While social workers and family carers played very important roles in helping the young people to make the transition to family care, the carers' birth children and their other foster children also had significant roles to play. This was highlighted by one of the fostering social workers:

Generally the children in the home have been an icebreaker, whether they're younger or they're older. ... If they're older they've been, like, in the same schools, and so they've helped the young person to settle in. You know? If they're younger, well, little children like to have someone new to pester, basically. (Laughter) You know? And I've often had reports back from foster carers that, 'oh, the children really love her' and, do you know, 'they'll ...go and play with her in her room'.

However, it is important to note that several of the young people lived with couples or with individuals who had no children of their own and these placements also seemed to work well. In their research in the UK, Chase et al (2008) found that some separated young people who lived with such carers were able to feel more settled and were able to develop closer relationships with their carers.

For most of the young people, the move to a family placement happened at a time when change and discontinuity were prominent themes in their lives. Allowing them to hold on to things that were familiar

was therefore important. For some, this involved trying to ensure that something from their previous placements remained the same. For example, in one situation, a girl who moved from a hostel to a foster family talked about how she had convinced her social worker to allow her to stay in the same school even though this involved a considerable commute. She said that she told her social worker:

'I've already changed the place that I'm living. I'm going somewhere else but I don't want to change friends and school and stuff.'

One carer gave the example of ensuring that young people were allowed to keep any items of clothing that they had brought from their countries of origin. Some of the participants who were living with carers from their own countries of origin identified familiar language, food and the carers' similar backgrounds as factors that helped them to feel settled in the placement initially. For example, one carer felt that the young person settled in easily because they were of the same religion. In other instances, efforts were made to link the young people with members of their own ethnic or religious communities. These aspects will be discussed in more detail in the next chapter.

In discussing their relationships with their foster and supported lodging families, many of the young people talked about feeling more settled when they got to know the family over time. In some cases, there were particular individuals within the family who played a key role in helping them to settle. One young person identified his foster father as one such person: he chatted to him and they watched football matches together. Another young person talked about how he chatted to one of his foster siblings about her favourite

television programmes and how he became more settled when he made friends in the area.

Writing in relation to foster care for adolescents, Biehal (2009: 169) suggests that while some adolescents might want a close relationship with a carer, "others may prefer to maintain greater emotional distance". In the case of separated young people, this might be for a variety of reasons, including a sense of loyalty to their families of origin, a lack of understanding of foster care, the knowledge that the placement will be short-lived (due to a planned move to direct provision upon turning 18), or because a young person is older than he or she is saying. In the cases of two of the young people there was a sense that there was less of a relationship between them and their carers. To some extent they treated their placements as a type of B and B, where they lodged but did not look for support. One of the carers described the young person who was living with her:

For him to come into a family setting was quite difficult. Okay. Because to me he'd never been in a family setting. ... Now, he'd take himself off to bed and he wouldn't say good night.

In the other case the supported lodgings carer stated that she had not been looking for someone who wanted to be a part of the family. In many respects it seemed that the carer and the young person were well matched in that they had similar expectations of the placement:

M: Is she more like a lodger or more like a member of the family? Because she sounds like she, she likes to just be on her own or ...

Carer (C): I would describe her more as a lodger, a lodger with a certain amount of communal stuff. ... I don't think I ever wanted another member of the family as such, you know. That wasn't what I wanted

which is one of the reasons we're happy with Mary¹⁹. It's not that, if anybody wants to come in here [sitting room] and wants to do anything or talk to me or anything, that they couldn't, but I don't interfere with people's arrangements. Yeah, it seems to work for her... ... now we just set up the television in the kitchen just about a week ago... that means that we're always going to be rubbing shoulders at some stage and that's why because we were actually going to put the other television into a totally separate room for the kids and then we thought, well, we'll never see them.

While the expectations of this carer and young person seemed consistent with one another, in other situations this was not the case. For example, one of the HSE professionals discussed the fact that sometimes it was suspected that young people had family members in Ireland but that they were not revealing this fact. This meant that while carers were trying to integrate young people into their family life, the young people were spending time with their families of origin:

[The carers are] trying to involve the young person in their own family's activities or their extended family's activities. But, for a young person, like this, he will not try to, he will not want to involve himself more with this family; he will always want to isolate himself. ... Even when it's maybe around the dinnertime or around evening when all the family are in the house, even we find that person might not be in the sitting room with other people; he will be in his room. ... Listening to music or talking to somebody. So he is a young person who will be treating this placement as a ... what's it called? A B&B.

Some of the participants suggested that the plan to move young people to 'direct provision' (the term commonly used to refer to the system for accommodating adult asylum seekers) at age 18 meant that it was difficult to settle into family placements. There was a sense that some of these young people were "just passing through". This might partly explain the tendency of some young people to treat their placements as B&B's instead of trying to develop relationships with family members:

They know that their statuses are not yet decided. And because we told them that ... 'when you turn 18 and you don't have [refugee] status, you will be moving to [direct provision] accommodation'. So, that uncertainty around their long-term future, it always impacts on how they stay in the foster families. Because most of the young people who are coming are around 16, 17 - young people who know that after 18, they will be going to RIA accommodation. So, in terms of really immersing themselves with the family activities or trying to integrate with the family or to settle down, they might find it easier, but they know that 'I am just passing ... I'm going ...' They're just passing through.

In several cases, the young people had left their countries of origin understanding that they would be arriving in the UK to join family members there. However, instead they were brought to Ireland by the individuals who were charged with their transit. While efforts were being made to reunite these young people with their family members, this process seemed to be extremely slow, resulting in young people having been with foster carers for more than six months when initially it had been intended that they would move to the UK within a very short period of time. One young

¹⁹ Mary is not the young person's real name.

person's ability to settle in a placement was hindered by this:

This taking it slow like, is not even helpful 'cause I keep thinking ... when am I going to go to my mum and stuff like that [sighs]. It's hard like to settle here, like, 'cause like one day I know that I will go to my Mum but I don't know when and stuff like that, so I don't think I have to settle in here.

Inevitably, this also led to challenges for carers and their families. Sometimes carers (and their children) agreed to take a young person on the basis that it would be a short term arrangement but then the placement continued for a longer period of time.

Positive aspects of family care

In speaking about their current foster placements, the vast majority of the young people were very positive. The same was the case for the carers. Both the young people and the carers identified a variety of aspects of the fostering and supported lodgings arrangements that they liked. For many, these positive elements centred on the relationships that developed over time. The interviews with the majority of the young people suggested that they had created positive relationships with their current carers and that they had become quite integrated into family life.

In discussing what they liked about their foster placements, over and over again the participants talked about the importance of feeling welcome and included in the foster family, with one young person highlighting how "we don't feel we are apart". The participants spoke

about the efforts of carers in this regard. These efforts involved including them in family routines and activities, bringing them on visits to extended family members, and making efforts to ensure that they could attend family events such as weddings.

They gave me a room and ... they did everything that my family did for me basically and ... they brought me to their daughter's wedding so they said the family has to go to a wedding so you're part of our family so you have to come with us ... so basically, you know, they count me as their family so I felt like you know I'm part of this family ... I will never forget, never.

Similarly, another participant stated the following in relation to her foster mother, father and siblings:

Marie, she's so kind you know, she's so caring, loving ... She's like my mum. Sometimes I even wish she was, like, my mum, you know? You can talk to her, you can just say anything ... that's what makes me feel like I'm welcomed ... Like Jane, Stacy and Keith, they're just caring you know. They treat you just like I am family. They don't separate like, ... treat me different or something, they don't do that.²⁰

While many of the young people valued carers who treated them like members of the family, several of these participants also pointed to the importance of carers not trying to replace their families of origin. Wade et al (2012: 114) found that most of the young people in their study were "keen to clarify that their foster families were not their real family". In essence, it was a fine balancing act for carers. One young person stated:

You want them to make you feel at home, make you at least part of things they do ... You know, involve you in stuff, make you feel like you're part of the

²⁰ The names that are used are pseudonyms.

family. ... Yeah, I think that's the most important thing like. Not that they're trying to fill that space that you are not with your family but ... just to be there, you know, just to let you know that ... its OK, you're going to be grand, you're going to be fine, to make you feel like you're one of the family.

Similarly, a social worker talked about one young person's relationship with her supported lodgings carers:

Like, it's clearly not, they're not her blood relatives or her family, but she's experiencing the care like it is. There's really no sense of, 'oh, you get paid by the HSE to look after me'. It really ... doesn't have that. I don't think. ... I think she sees that these people are genuinely interested that I am happy, doing well, and progressing. And, you know, they're very good role models for her, the two of them.

In a similar way to the carers in Luster et al's (2009) study, the carers in this research offered different kinds of support to the young people, ranging from emotional support to practical support and advice. Many of the participants referred to the importance of foster families "listening", "encouraging" and "being there for you". Others appreciated carers who gave advice, who provided guidance to them as they grew up and who helped them to prepare for the future. One professional emphasised that the role of advisors was an important one, as the young people generally came from cultures where advice and guidance were provided by adults. One young person referred to the importance of foster carers who "teach them the right ways of growing up." The practical support provided by carers was also valued. For example, one young person gave the example of a carer who brought his technical drawing board to school when he had forgotten it.

Others liked the fact that carers brought them on outings. Wade et al (2012) referred to separated young people's desire to feel safe and this was mentioned by one of the young participants:

Make sure ... keep you safe. Like ... come in before dark ... in case bad people come and take you and stuff like that.

While some of the young people struggled with the rules that foster carers put in place, other saw these as important. One young person described the kind of foster carers that he would pick:

YP: They're people you think you can trust. ... A parent can say, 'Oh, I will mind him,' 'I will keep him well,' and 'I will...,' Sure, anybody can say that and not do it. A parent who will say, 'no, I disagree'. A parent who stands up for themselves.

M: Who stands up for themselves?

YP: Yes. Like, 'oh, he's not allowed to do this at 10 o'clock' ... That's perfect. Like, because parents... have to have their rules because ... [The young people will] be doing anything they want, like. They'd be just getting in trouble and stuff, so ...It's important to have a parent who can tell you what they don't want. Instead of a parent who will let you do everything, like.

One of the social workers spoke about the many things that the young people like about foster care:

They like that they get pocket money; they like that they get their hair done; they like that they get help with their homework; they like that someone is worried about them, someone is thinking about them, someone is there to offer them help. They like that they have their own rooms, that oftentimes they have their own bathrooms in instances. They like the fact that they can feel like children and they can mix

with other children and that they can have a place for their friends to come home to. And they can go to their friends. And they like the fact that, for the most part, the foster families encourage them to have contact with their own families if that's an option for them.

A social worker described the relationship between one carer and her foster child:

I think it's actually quite a normal, natural relationship, where he can get angry with her. He can behave badly and he'll be forgiven. They won't be [saying] 'Take this kid away.' Do you know what I mean? He'll go off up the fields and disappear and act the eejit, and the foster carer will be very forgiving ... So, there's a normalisation about their family thing.

Professionals and carers emphasised the importance of characteristics and qualities such as empathy, flexibility, patience, understanding, emotional availability, openness and honesty in caring for separated children and young people. In addition, an understanding of cultural diversity was recognised as crucial. This will be discussed in more detail in the next chapter. Professionals praised the fact that fostering and supported lodgings could provide individualised care and a 'normal' family environment for young people, thus helping them to achieve some sense of stability and security. The important role of preparing young people for life after care was also recognised as crucial. In essence, like the foster parents in the Wade et al (2012) study, the carers took on parenting roles and advocated on behalf of the young people:

SH: And I suppose, you know, the capacity to become the parent - it is about becoming the parent and doing what parents do, and parents will be

advocates when they need to be advocates; they'll be encouragers when they need to be encouragers; they'll be rule-makers when they need to be rule-makers.

M: Okay. Yes. And in what sense have you seen the advocacy happening?

SH: Leaving at 18. ... And, I mean, school, like, obviously it's a current one. It's a very current one. With school, I've seen it. Making sure that the teachers know the challenges that are there or whatever. I suppose there's something just very normal. It's kind of hard to extract the good pieces, because, actually, the good stuff looks so normal, it just kind of blends into ... There's nothing extraordinary about it.

Carers also spoke about their efforts to respond to the young people's needs. The responses varied depending on both the carer and the young person. For some this involved giving young people their own space, for others it involved providing a listening ear and emotional support, and for others it involved providing distraction for the young person when he or she was lonely or upset. One carer talked about his efforts to distract a young person after she had spent time talking to her family on the telephone:

Often when she is speaking with her family she can be either very upbeat afterwards or very down. ... She's always thrilled to speak to them but it's, at times you'll get that, she sort of realises that 'I miss him', 'I miss her', 'I miss this', 'I miss that' and you just sort of need to just ... get her into her funny mood again in particular, like try and put on something she likes on TV or say 'do you want to go get an ice-cream?' or 'do you want to go for a walk?' or have a bit of a laugh with her.

The personality and character of the carers had a big impact on the placements. A professional compared a young person's previous placement to her current one, describing the current carer as being "more open" than the previous one. She described how the second carer invited the young person to join her when she was meeting some friends for tea. The girl "wrinkled her nose" and said that she was "not hanging out with old people". The social worker reflected on this:

Now, [the second carer] accepted that, but I have a feeling the other carer would have been very offended by that. So, again, attitudes do matter.... [The second carer was] more open to difference, to understanding that, 'oh, fine, she didn't want to hang out'. Well, maybe a more socially attuned person would not have wrinkled her nose and said 'old people'. Maybe you and I would have said, 'actually, I would rather hang out with my friends', or something, you know? ... But I think she understood. The present carer understood that it wasn't a personal reference to her, but it was just her way of saying 'I'll be bored' which maybe the other carer wouldn't have [understood].

All of the carers talked about the rewarding aspects of caring for the young people. In particular, they talked about the relationships that developed over time. One carer identified the sources of reward:

Seeing him develop and how people talk about him ... He has a great rapport about him around town and his manners and his courtesies with people. ... And just, you know, how appreciated ... He calls me mum as well. So, that there is very personal. Even the headmaster called me in one day and he said, 'I have to tell you that Yemi²¹ said that his mum would

be in'. He said 'I didn't know it was you'. Which kind of makes you feel that he's really accepted living here.

Others spoke about the relationships that the young people developed with extended family members. They talked about feeling pride in relation to the young people and about young people opening up to them as time went by. The fact that the carers found the role rewarding is in keeping with the research by Wade et al (2012) where the vast majority of the carers (95%) got a lot of satisfaction from fostering.

Overall, the carers were all generally positive about their experiences of caring for the young people. One couple, who had been offering supported lodgings for a number of years, succinctly summarised what they wanted to achieve when they offered a home to a young person:

And because we have bought into this programme and we're committed to the programme, we always see this new child coming in as a project, in a sense, you know? And our aim, our aim would be, if we can give them a positive experience for the time that they're in our house, maybe we might give them something that they can draw on as they go out into the world.

General challenges within the placements

Placements were, of course, not without their challenges. Apart from the initial challenges of settling in, the young people and their carers also discussed the more general challenges associated with the placements. For the young people these challenges

21 This is not the young person's real name.

related to a variety of factors including: the location of the placement (e.g. rural locations that were considered 'boring'; locations that were far away from where the young person had previously lived), issues relating to food (e.g. not liking the carer's food and the carer not allowing the young person to cook their own food), rules within the household (e.g. curfew times), personality clashes, and the composition of the family (e.g. a 'quiet' house with older carers; children who were very young and annoyed the young person; gender). For example, in relation to the last point, one male participant said that the foster Dad was away a lot of the time as he travelled for his work:

He wasn't always there; he was always driving [for work]. It was kind of like ... lady's thing. The woman, the mum, and the two kids. And I couldn't relate to them. ...I was just always in the room and I just did my thing.

Another young person spoke about a previous placement where the carers were "really old" and the location was rural:

They were really old, really old. I think that's the point, because they were like grannies and granddads, so they didn't know like what people would like and do, so they kind of thought of it like in an old sense ... Like, you have to go to bed at a bedtime ... and ... when you want to go somewhere, ... you can't really cause ... you had to really be dropped to the town because it's in the countryside. Yeah, cause it was really boring.

In circumstances where the young people were living in rural locations, carers had additional challenges linking the young people into religious and cultural activities and ensuring that they had opportunities to visit friends whom they met during their times in Dublin. For example, one professional told of a carer living in a

rural location, more than 200 km from Dublin who regularly brought the young people for weekend breaks in Dublin hotels so that they could continue to meet up with friends that they had met there.

While some of the challenges faced by the carers and the young people related to cultural issues or to asylum / immigration issues (both of which will be discussed later), many of the difficulties that arose during placements seemed to relate to the fact that most of the young people were adolescents who were attempting to gain more independence. Such challenges are also common amongst the broader population of adolescents in foster care, with Biehal (2009: 170) referring to the "difficult challenge of balancing care, control and autonomy". This was identified by one of the professionals (not a social worker) who referred to the fact that many of the young people faced "typical challenges":

I think there are normal conflicts - very, very normal conflicts. I think some of this will emerge within [attempts] to integrate, and not quite understanding the norms of behaviour. But I would see those as probably another version of adolescent developmental conflict with parents. ... I don't think they're such a challenge that they can't be gotten over. ... There are a couple I've seen where I think it has really been personality - it just has not worked because of personality, and I don't think that's anybody's fault. And I'm not even sure a longer matching process would have [helped]. I don't think so.

In situations where young people had moved from hostel accommodation (as opposed to residential centres) to family placements, particular problems arose. This was unsurprising, given that these young people had become used to living very independently

and then were suddenly expected to adjust to a family environment. In some respects, these findings resonate with the findings of Luster et al (2009), where it was found that Sudanese unaccompanied minors who had been used to living without parents and making life or death decisions, struggled to adjust to an environment where they were being told what time to go to bed. For one young person, while he recognised that he enjoyed some elements of living in foster care, overall he felt that it "wasn't for [him]" as he had become used to living in a hostel:

When I was moving to foster, I believed it wasn't for me, because, like, I lived in hostels where I did all those things for myself. Yes. I washed my own clothes; I do that kind of stuff. So, I feel like from the beginning I feel like it wasn't for me.

He suggested that he would have been fine in foster care had he moved there upon arrival. He also stated that if he had a young brother arriving in Ireland alone he would want him to live in foster care rather than in a hostel environment. Carers and professionals also acknowledged this challenge for young people who had previously lived in the hostel system. The carer of the young person quoted above stated the following:

But the hostel definitely did nothing for him. ...It would have made him cheeky. He had to fend for himself. ...So therefore if he had to get off the plane and go into a residential and come straight to a foster home, it would be a different story. But he had two or three years there of bad habits. Do you understand? ... He might decide to take himself off to Dublin. And he wouldn't tell me 'til the last minute. And his attitude was he didn't have to tell me anything, because he had no one to answer to in the hostel.

Another challenge for carers was the fact that they were generally caring for teenagers who were entering care for the first time or who had only recently entered care. One of the social workers noted that at times it was challenging to care for adolescents who had been brought up by someone else:

One of the big challenges that carers would face, and we do talk this through with them initially, is the fact that they are getting pretty much a grown-up child who has been raised by somebody else to different standards from how they would have raised their own child. I can imagine a child has been travelling for months, years, they've seen all sorts of horrors in their country. They've had to endure all sorts of indignities just to get to Ireland ... and that's not going to be a perfect child for you, you know? This is going to be a child who will have issues. So, for carers they have to understand that and be really open to not judging, to be flexible, and accommodating with the young person.

While the challenges varied depending on the young person and the family with whom he or she lived, there was one challenge that was relevant to them all, although it was only mentioned by some. This was the fact that no matter how good the carers were, they were not the same as family members.

Like if it's your own mum, you know, she understands every single thing about you, she knows you inside out 'cause she's your mom and you know there're some things your foster carer can't do for you like your mom can do for you.

While this is an issue relevant to all foster children, it may be particularly challenging for separated young people, most of whom have no contact with their family members, and some of whom do not know where their

families are (Green, 2000; Ayotte, 2002; German, 2004). One of the social workers highlighted that living with families often reminded young people of their own families. This was often very challenging for them:

A lot of the times when they move to the family it reawakens memories of their own family, and it reinforces how much they miss their own family. And while they're trying to deal with all of that, they're still expected to move to a new family. And integrate in a new family. And it's a huge ask. And for the most part they do. It takes time but for the most part they do adapt. And I have to say, the carers for the most part are very good in trying to understand their need, that it's going to take time, and encouraging them, and working with us to help them settle.

In a number of situations sibling groups arrived together. In discussing placements for sibling groups, Lord & Borthwick (2009: 417) have pointed to the fact that siblings can be "a very valuable resource for each other, both in childhood and throughout life." It was evident that in the case of current practice with separated young people in Ireland, every effort is made to ensure that siblings are placed together. However, challenges sometimes arose when one of the siblings displayed behavioural difficulties that led to placements breaking down. As a result, it sometimes became necessary to separate siblings from one another. Internationally, this is not an uncommon occurrence amongst the broader population of children in care (Lord & Borthwick, 2009). When separated young people who were siblings lived separately (either because of age differences or because of different needs), in some cases access visits occurred regularly but in other cases they rarely occurred. This research did not explore why this was the case.

The importance of foster children maintaining contact with their birth families is widely recognised (Schofield & Stevenson, 2009). While such contact is usually possible for Irish young people in the care of the state, for separated young people the situation is different. Often, the whereabouts of family members is unknown. In addition, in some cases parents and close family members have died or been killed or in other cases making contact with them might put the young person or their family members at risk. Nonetheless, some of the young people had contact with their families of origin, either family members living in the UK or living in their home countries. In two cases family members in the UK, with whom reunifications were being planned, had made visits to the young people. However, in most cases, contact involved telephone calls or Skype conversations. While this contact was clearly very important for the young people, at times it caused challenges. As has been mentioned earlier, sometimes young people became upset or lonely following telephone calls with members of their families. In addition, one carer reported that the young person's mother, who was in the UK, often told her what she should be doing to care for the children, something which frustrated the carer:

Sometimes I feel like a childminder. More so in this situation than say in my other situations because, maybe in the other situations the reason you are fostering is because they were sick or because they had an alcohol problem or there was drugs or they physically could not look after their children where as in this case her Mam is there. She's physically able to do it and I think she is kind of frustrated that, she's not here to do it. So sometimes, you know, she'd be on the phone and she'd be like you know 'you need to do this with her' or 'you need to get her teeth checked' or 'you need to do this'. And you're kind of

thinking, well, obviously I'm here and I'm looking after her and I know all these things. Whereas you know, she's in foster care for a whole different situation and it's, I suppose in her situation, it's just she ended up in the wrong place.

In the absence of their families of origin, feeling understood by their carers, or feeling that carers were at least trying to understand them, was important for many of the young people. In several cases the young people and their carers described initial difficulties that arose and how placements nearly broke down. However, with time, they grew to understand each other and developed good relationships. One young person stated:

When you come to a new place, living with new people you don't know how they are like and they don't know what you are like so ... it takes time to get used to each other. I didn't know Matt and Jenifer so we used to have fights a lot [laughs] ...She was telling me do this, not do that, I was like 'no I want to do this, I don't want to do that'. So, different person from each other,...different personalities, different culture. ... It didn't work from the beginning and I was gonna move. I told my social worker 'I want to move, I can't live with this lady'. [And] Jennifer says 'I can't live with this guy'. So, then the social workers got involved ... So, we sat down, we started talking and we figured it out ... I got, we got used to each other firstly and we kinda started liking each other. Thirdly, I got older, I got more mature.²²

22 The names used in this quotation are pseudonyms.

Placement breakdown

Foster placement breakdown is not uncommon (Sallnäs et al., 2004). Broadly speaking, the term 'breakdown' refers to situations where placements end prematurely or where placements do not last as long as had been planned. Placements break down due to a range of reasons, including young people's behavioural problems, a lack of support for foster carers, rivalry between the foster child and the foster family's child, foster family - birth family relationships, and foster parent stress and burnout (Triseliotis et al, 1995; Brown and Bednar, 2006). When they occur they can be hugely upsetting for young people and their carers alike. In their research in the UK, Chase et al (2008) found that when foster placements for unaccompanied asylum seeking young people broke down, this was often related to the expectations that the young people had of their carers or vice versa. They also referred to the fact that difficulties may arise in placements due to the fact that some separated young people have had to grow up much faster than their non-asylum-seeking peers.

In the Irish context, the CRA, in its 2011 report card, referred to information that it had received from an NGO about placements breaking down (CRA, 2011). The organisation emphasised the need to better understand why these breakdowns occur and the need to implement measures to ensure that more placements are successful. While NGOs were clearly concerned about matching (as discussed earlier) and about placements breaking down, at the time of publishing, the HSE stated that they had not received any formal complaints from NGOs regarding these issues.

Eight of the young people who participated in the study had lived in more than one family placement, with the

interviews suggesting that in at least 7 of these cases the young people had experienced placement breakdown (i.e. the premature ending of a placement).²³ The interviews with carers, professionals, and with the young people suggested various reasons why placements broke down. In three cases, the young people in question had lived in hostels or non-approved residential units prior to being placed with families, with the interviews suggesting that this period of relative independence resulted in difficulties in the family placements that then ensued. In 3 other cases where placement breakdown occurred, young people had been placed with siblings, with some participants suggesting that the behaviour of one sibling led to a placement breakdown for both siblings. Other issues that were identified as contributing to placement breakdown included queries about the age of the young person, personality clashes, the behaviour of young people, a lack of understanding on the part of carers, cultural misunderstandings, and tensions associated with adolescence. One young person, who was very settled in a placement after a number of other placements had broken down, described what a negative experience of foster care would be like:

Someone who doesn't talk to you, puts like, like, who doesn't understand you, hates you, who will treat you like you're a nothing, like you don't belong there ... they just have you there because they have to have you there or something like that.

Another young person described a previous placement which had broken down. She spoke about how she had

not been allowed to watch television, to go out after school or to have friends over to visit. She described the food as "rubbish", stated that she only received two meals per day and said that her foster father had physically assaulted her. She felt that her social worker did not listen to her and attributed this to the fact that the carers, like the social worker, were white, while she was black:

Like sometimes I think about it now and I cry, you know, like I don't know why social workers don't want to listen to young people. Because you've done something in the past doesn't mean you don't have to listen to her, you know what I mean? ...I'm not trying ... to discriminate or something but like if you're white and you are another white, obviously you will believe what the other white person is telling you, you don't want to go into 'oh this is what the black person [said]'. That's my own point of view because when I'm talking to my social worker I call her, I cried to her, I said everything to her. All they can do is believe what I say to them because at the end of the day [the foster carers are] being nice to my social worker. After my social worker's gone, they're not nice anymore and you know I really, really, really suffered.²⁴

Many of the young people emphasised the importance of communication within the foster family. One participant, who acknowledged that at times she was rude, described how a previous foster carer used to scream at her. She felt that this was not what should happen:

Even if the foster child is wrong, just listen and sit down with her and explain, but don't scream. Like, my foster mom, she used to scream sometimes and then when she starts screaming I would just walk and then she would tell me 'you're so rude' and then I want to answer her because I know I'm rude, I don't

23 In the eighth case it was unclear whether the young person's first foster placement had only been envisaged as short term or whether the placement had broken down prematurely.

24 In line with Children First details of these allegations were provided to the HSE, following consultation with the participant. The HSE stated that the allegations had been followed up appropriately at the time that they were made.

want to stay there, the more you scream I just get mad. But I just walk and then I just didn't talk to her. So it's better if you just, even if you know the kid is wrong, just sit down and talk to her nicely ... just don't go and scream like 'oh you're late, did you do your homework, you're this, you're that'. It's like pushing the kid, 'I don't want you, like go away, I don't want to talk to you'.

One of the carers whose foster child had experienced a number of placement breakdowns reflected on why the current placement seemed to be working well for the young person:

A good few of my placements have happened from other placements breaking down, and I just think it's ... carers differ no more than kids differ, so I suppose I'm quite routine and boundary-focused, and I kind of work with a motto of parent first, friend second, where you can get kind of sucked in when a new child comes to you, of trying to be overly nice, and you befriend them more than trying to be their parent. And then you set yourself up for falls. So I think it's just a different mind-set from carer to carer.

It was clear that placement breakdowns were distressing for the young people and meant that it took them longer to feel a security within Ireland. However, of the eight young people who had experienced more than one placement, in 5 cases the young people seemed, at the time of interview, very settled in their current placements: this was the view of both the carers and the young people. In two further cases the young people had turned 18 and were no longer in foster care / supported lodgings. Both of these young people spoke positively about a subsequent placement. In the final case, the young person appeared to view her current supported lodgings placement in a literal sense

- as lodgings - but seemed relatively content with this arrangement. However, it is reasonable to suggest that the experience of placement breakdown may have contributed to her not wanting to immerse herself in her new placement.

Luster et al (2010) point out that while a change of placement is generally seen as a failure in child welfare services, in the cases of 7 out of 8 of the Sudanese young people in their study who had to change placement, the change resulted in a more positive relationship developing with a subsequent foster carer. As adults reflecting back on their care experiences, these young people attributed the initial problems to cultural differences, being a teenager and a lack of compatibility with foster carers. Luster et al (2010) suggest that problems in initial placements may often be related to more general adjustment problems as a young person tries to adapt to a very new culture.

Conclusion

Having struggled in their placements initially, most of the young people spoke positively about their current foster care and supported lodgings families and identified numerous things that they liked about their placements. In many cases it was evident that strong relationships had developed between the young people and their carers. Inevitably, the young people faced various challenges, including missing their families. Many of the carers talked about seeking support from other carers or from social workers when difficulties arose. In particular, they valued the fact that 24 hour support was available from the private fostering agencies, even if there was rarely a reason to need it. Many had opted to foster for private agencies because

of this support. While conflict between carers and young people was generally worked out, some of the young people had experienced placement breakdowns. The participants' perspectives in relation to placement breakdowns highlight important issues that need to be considered in future placement planning.

Chapter 6:

Family placements in context: diversity and uncertainty

Introduction

Although providing care for separated asylum seeking children and young people involves considering many of the generic issues that are also relevant to other children and young people in care, there are some considerations that are specific to this client group. In this chapter, two broad issues will be discussed: Firstly, the issue of diversity and of meeting the cultural needs of the young people and secondly, the issue of uncertainty, particularly in relation to the outcomes of the asylum process and transitioning from family care.

Culture and Diversity

Within the discussions with all of the participants - young people, carers and professionals/stakeholders - culture was discussed in detail. These discussions centred on the core theme of meeting the ethnic and cultural needs of the young people. Having arrived in Ireland, the young people faced the challenge of both integrating into Irish society and the challenge of maintaining a sense of their own ethnic or cultural identity. 'Cultural identity' is a term used to describe the "sense of attachment a person has to a particular group, including beliefs and feelings linking him or her to these groups" (Berry et al, 2006, p. 3). It can be viewed as an aspect of acculturation that focuses on the immigrant's sense of self. During adolescence, this is particularly important as this is the time when people begin to address the question of "who am I?" in a way that involves continuity between the past, the present and the future (Erikson, 1968). Immigrants can develop an identity primarily based on their ethnic identity or based on their identity as a member of their new society. Alternatively, one's identity can be *integrated* or *bicultural*, whereby a person retains a strong ethnic

identity while also identifying with his or her new society (Phinney et al., 2001). Just as integration has been found to be the most beneficial acculturation attitude/strategy, research has shown that, in general, a bicultural or integrated identity is associated with higher levels of overall well-being, compared with the other identity categories (Phinney et al., 2001).

Culture and the young people's placements

Of the 18 young people who were in foster care or supported lodgings at the time of the research, 8 were living with couples who were Irish. One young person from East Africa was cared for by a couple from East Africa (although from a different country to the young person). One young person from West Africa was cared for by a couple who were also from West Africa (they were from the same country, but were of a different ethnicity and religion). Two young people were living with an Irish carer who was parenting alone. A further three young people were cared for by carers of minority ethnic origin (2 West Africans and 1 Middle African) who were parenting alone and who were from the same countries of origin as the young people. Two young people from West Africa were living in a family where the foster father was from West Africa (but from a different country) and the foster mother was Irish. One young person was cared for by a carer who was Irish and by her partner who was from Southern Africa. The 15 young people who were Christian were all living with carers who were also Christian, although often of different denominations. Of the 6 young people who were Muslim, 2 were living with at least one Muslim carer, while three were living with carers who were not Muslim.

Placements with ethnic minority carers

In discussing placements with ethnic minority carers, most of the discussion focused on the positive aspects of these placements. Young people, professionals and carers all identified many advantages associated with these placements, although the carers who identified these advantages tended to be ethnic minority carers rather than Irish carers.

To begin with, it was recognised that, having moved to Ireland, the young people were experiencing "a rupture in the narratives threads running through their lives" (Summerfield, 1998: 16). Same-culture placements could offer some sense of continuity amidst much upheaval and discontinuity. As has been mentioned, such continuity is helpful in terms of promoting a young person's sense of identity (Erikson 1968). The "desirability of continuity in a child's upbringing" has been enshrined in Article 20 of the UNCRC (1989) in relation to situations where the state places children in alternative care. One of the social workers stated:

There's so much change for them when they come here. They've lost their families and their culture, their friends, their food, the smells, their clothing, everything. The weather is different. And if they can have some kind of similarities that they can draw on - a language, it might be, or a food or something. Sometimes it's nice for them to have that ... at least that connection with their culture, and I do think a lot of them very much appreciate it.

Similarly, the young people who lived with carers of their own ethnicity highlighted the ways in which these placements benefited them, with their narratives pointing to the continuity that was provided for them.

They valued the experience of being cared for by individuals who could speak to them in their language and provide food with which they were familiar. When asked what helped him to settle in his foster placement, one boy stated the following, which was in keeping with Kohli et al.'s (2010: 238) contention that food was a "means of evoking past experiences":

I think it was like ... um, like, eat the same food that we eat in Nigeria. That was very nice. ... It made me think back about Nigeria.

Another participant talked about being able to learn about her country of origin from her carer and about the importance of being able to understand the carer's language:

YP: You can talk about stuff about Nigeria and stuff ... she has like more experience than I do, you know, in things about Nigeria and stuff like, I can learn stuff off her yeah and ...um ... we speak the same language [laughs].

M: OK ... and is that important?

YP: Yeah, um, sometimes because sometimes she might be saying some stuff and then if I don't understand her I just feel like she might be talking about me ... let's say I go to someone's house and they're like Indian or something and they're speaking another language and then ... you would feel like an outsider or something.

Indeed, several of the young people who had lived in residential care or in placements with Irish families reported that they were no longer able to speak their ethnic languages, a finding which is in keeping with the findings of McWilliams' (2012) research. This highlights the important role that can be played by placements with families from within the same cultural group. Language is an important part of cultural identity

(Goldstein & Spencer, 2000) and therefore efforts must be made to ensure young people can maintain their mother tongue.

Apart from continuity in relation to food and language, participants also identified other ways in which continuity could be provided by carers who were of the same culture or religion as the young people. Several people identified continuity in terms of cultural or religious values, norms and practices. Given the important role that religion plays in the lives of many migrant populations (McMichael, 2002; Thompson & Gurney, 2003) including separated young people (Goodman, 2004; Ní Raghallaigh, 2010; 2011a), the benefits of offering placements with carers of a similar religion are obvious. Doing so will more easily allow young people to experience comfort and continuity, through the use of religious coping, through companionship with like-minded individuals, and through the rituals associated with religious practice (Ní Raghallaigh, 2011a). Wade et al's (2012) research suggested that the religious identity of separated young people in foster care was developed through contact with places of worship and friendships with others of the same faith. In relation to participants in the current study, carers who were of the same religion as the young people were able to facilitate this religious identity development through integrating them into the religious practices and routines of their own families.

Apart from religion, cultural norms and values were maintained in other ways too. One carer emphasised that the extended family was very important within her own culture and she thought that it was important that young people would learn about this aspect of their culture. Other carers talked about young people learning cultural values such as the value of respecting

elders. For one Nigerian carer this translated into culturally appropriate ways of addressing older people. She spoke about a young person who had lived with an Irish family before coming to live with her:

The first one I had, he was living with an Irish [family] and as a Nigerian the challenges are that ... the respect is not there. It's not because it's wrong what we do here but the way we do it is different. Like here I can call you 'Muireann' you know but in my culture I don't have to say that, and if my kids ... they are to use an 'auntie' or something as a form of respect, that is not there.

One young person, who himself preferred to live with an Irish family than with a family from his own culture, said that if his younger sibling was coming to Ireland, he would want him to be cared for by an African family:

But for me I would prefer them to stay probably with maybe an African family. So, just to keep the culture up or follow the same African ways or something. ...Yes, yes. Especially if they were still young, like. You know? So they can get that African mentality as well, even when they're in Europe.

Other participants talked about carers from within the young people's ethnic communities being able to provide appropriate physical care for the young people, in terms of knowing how to care for their particular skin and hair needs. Several of the ethnic minority carers felt that Irish carers would not have this knowledge. Indeed, McWilliams (2012) found that many carers didn't initially know how to care for the hair and skin of the African children for whom they were caring.

Apart from understanding them on a linguistic level, young people also talked about the fact that carers from their own ethnic group understood them on a

deeper level because they had a more personal understanding of the young person's life circumstances prior to leaving their country of origin. In one case, a carer had also fled from the country of origin and gone through the asylum process. The young person referred to the understanding that her carer (Grace²⁵) showed towards her:

Grace didn't really ask much but there were times ... when I discussed with her, she said 'I know what is happening in my country, I know what you're facing, I faced something like that, they're similar, similar as you also, so don't be bothered you'll be fine'. So it's also good to be with someone from my country because she knows the background, she knows what is happening in the country yeah, she can help you come out from that situation.

In addition, professionals recognised the value of carers who had been through the migration and acculturation processes: carers who knew what it was like to move from a very different culture and to adapt to Irish society, sometimes whilst also negotiating the asylum process and the uncertainty that it involved. One of the HSE social workers identified this advantage of placements with carers from within the young people's own communities:

They would understand the background and they would understand where they're coming from and how they might be feeling from leaving their own country and coming to a new country. They would really be very understanding of that, and they would know exactly how the young person might be feeling because they've been through it themselves. And that can be really comforting to the young person ... It's almost like a modelling. Well, ... 'this adult has

survived and I can survive too' and it's really nice to have that model for the young people.

Same-ethnicity carers also had the capacity to help to promote a positive sense of cultural identity among the young people for whom they were caring. For example, one foster mother who was caring for a Nigerian young person stated the following:

Because we are from the same place, you know, sometimes I speak [our language] to her. ... Just [to] make the child identify, because sometimes Yetunde²⁶ herself ... makes comments about Africans because she would have been used to staying with Irish people. So, ... she had a negative kind of thing like, she didn't know how to deal with Africans. ... You now have to say to her, 'but you're Nigerian, ... there is no need [to be] saying those things because you can't change your colour...!'

In some cases, young people demonstrated some uncertainty in relation to whether they would prefer to live with an Irish family or with a family from their own ethnic or cultural group. One participant, who appeared to be very well settled in an Irish supported lodgings placement, pointed to the many positive aspects of living with the family that she was with, but her narrative also suggested that perhaps some part of her wanted to live with a family from her own country:

I think it's basically the people, it's just the person, how they are. I'd live with any race or any type of people as long as, you know, I can communicate with them and ... they are nice people, I can, you know, get along with them. That's all that matters to me, it's not really the race and everything, I don't mind. I don't mind if I lived with a family [from my country] I'd love speaking my language with them but other than that I really don't mind.

25 Grace was not the carer's real name.

26 This is not the young person's real name.

In many respects such uncertainty points to the complex nature of the decisions that were being made in relation to the care of the young people.

While most of the discussion in relation to placements with carers from within the young people's communities centred around the advantages associated with these placements, some challenges also emerged. Several of the participants made reference to the fact that a young person's capacity to integrate might be hindered by living with an ethnic minority or migrant family. Some believed that Irish families might have a greater knowledge of "what's out there" in terms of youth clubs, local groups, schools etc. - a greater knowledge of what one participant termed "cultural capital". A number of the stakeholders expressed concern that the young people might be more at risk of isolation if placed with ethnic minority families:

So you're better off just taking a suitable family and, you know, a family that really wants to foster, and never mind the cultural background, in some ways, because at the end of the day these young people, a lot of them are going to end up living in Ireland. They join churches, etc and they will meet people of their own ethnic background and mix. But if you have them with, for example, an African family, fostered, and [then] depending on how that family has integrated, ... you may be isolating the young person even more ...

One of the main challenges in relation to placing the young people with members of their own ethnic communities was the sheer lack of such placements. In some instances this meant that professionals had to decide what to prioritise within the matching process. For example, one of the social workers referred to the importance of religion. She tried to match young

people with carers of their own religion, particularly when young people had mental health problems, as she felt religion was a great source of comfort to them:

We do get a significant amount of Muslims, and if they're very strict Muslims, if they feel that it's really, really important to them, they would really like to live with a Muslim family where they could say their prayers together and go to the mosque.

However, in reality, few Muslim carers had been recruited. As stated previously, of the 18 young people who were in foster care / supported lodgings at the time of the study, 6 were Muslim but only 2 had been placed with a Muslim carer. In one example, a young person had been placed with a family from his country of origin, but he was Muslim while they were Christian. Both the carer and the young person identified the problems that this created. The carer stated that the young person attended church with the family as she did not want him to feel excluded. She spoke about how she talked to him about his religion and hoped to bring him to a Mosque during the summer holidays when she would be in a position to travel to Dublin. The young person stated the following:

YP: They are Christian and I'm a Muslim ... they don't go to mosque so I have to go to the church because they can't leave me at home ... so that's kind of difficult though.

M: OK and do you like going to church or would you prefer to be able to stay at home?

YP: Um, sometimes I'll prefer going to church but sometimes I would just prefer staying at home.

Finally, it is interesting to note that none of the participants who were due to be reunited with their families had been placed with members of their own cultural communities. This raises the question of

whether they will face added difficulties adjusting to life with their families, upon reunification, given that they were spending a considerable amount of time living with Irish carers.

Placements with Irish carers

The young people were asked if they thought that carers should be from their own ethnic background or whether they thought that they should be of an Irish background. Many of the young people commented on the fact that the nationality or ethnicity of the carers was not what was important. Instead, what mattered was what kind of person the carer was:

To me I cannot say I prefer Irish or African. If they're being nice to me, I stay with them.

In general, those who were living with Irish carers, expressed satisfaction with this arrangement, thus reflecting the findings of the research by Chase et al (2008: 69) which found that most of the young people who participated in their study had "very positive experiences of cross-cultural placements". They felt it was not necessary to be with a family of their own ethnicity in order for their cultural needs to be met. Over and over again, reference was made to the fact that what was most important was the personality of the carer. The young people wanted a carer who respected their cultural background:

To me, actually, it doesn't matter to me. ... For me, actually, I can live with anybody. I can live with any culture....The only thing about it is, like,...once they respect me for my own belief and whatever I do ... For me it doesn't matter if I live, I can live with Chinese person. I don't mind. So, the only thing is if

actually I can get on with the person and they can get on with me and, like, they respect me for what, respect what I believe or whatever.

In fact, social workers and staff of the fostering agencies pointed to the fact that young people often stated that they wanted to live with white, Irish carers. This reflects other literature in the field (Hek, 2007). Several reasons were given for wanting to live with Irish families. One professional stated that young people sometimes thought that families from their cultures would use corporal punishment while Irish families would not, or that Irish families would place more of an emphasis on education than families from their own cultures. Another professional, a social worker, stated the following:

Some of the children are fleeing their country of origin and for whatever reason want no contact whatsoever [with people from their country]. So that's tricky. You don't want to place them in that. I can see the benefit of why people think that placing someone with their home community, because of the language, the food, those sort of things are then easily recognisable and that adaption is not as hard, but some of the kids ...You put a child with someone from their own country and they're trying to get away from that and ... they don't know who knows who...The care won't work if the perception of the child is that, actually, you can't trust this [person]. So, it's really one that I explore with the kids themselves. Some will say 'I'm going to stay in Ireland; I want to be in an Irish family'. You know? 'I want to adapt; I want to, you know, acclimatise myself and really integrate'.

Similarly, several of the young people who participated in the study said that they wanted to stay with Irish

families so that they could improve their English and learn about Irish culture:

M: Is there anything in particular that you like about being in a family with different cultures

YP: Yeah, you, you learn more things ... I learn about Ireland from Stacy and I learn about [African country] from Peter²⁷ so it's a good thing we learn more things.

Indeed, for carers, too, looking after separated young people represented an opportunity to get to know more about different cultures and different countries. Several of the carers commented on this as one of the rewarding aspects of their role. It was one of the things identified by carers in the UK also (Wade et al., 2012).

The interviews suggested that Irish carers responded to the cultural needs of the young people to different degrees. Some paid little or no attention to the cultural needs of the young people whereas others emphasised these needs. In cases where little or no attention was paid to culture, the carers often believed that the young person was disinterested. The carers believed that young people had adjusted to Irish society and that their culture was not really important to them. In one of these cases, the carer described the young person as having been "really integrated into the Irish way of life before he came here" and stated that "culture wasn't a big issue". While the young person appeared very happy and content in his placement, when asked about his culture he expressed a desire to learn more about it:

YP: Yes. I would love to learn a wee bit more about Nigeria. Like, I only know a few things - that's about it. Yes.

M: So you would like to have the opportunity to learn.

YP: Just a wee bit. Yes.

However, often carers made concerted efforts to respond to the cultural needs of the young people. Unlike many of the foster carers in McWilliams' (2012) research, these individuals and couples did not seem to be operating a 'colour blindness' policy. Like the carers who participated in Wade et al's (2012) research, some of the foster carers and supported lodgings carers learnt basic information about a young person's country of origin, made efforts to provide food from the young people's country of origin or facilitated contact with cultural or religious groups and. For example, one Christian carer had sought out a local Imam, and regularly consulted with him in relation to her foster son. Another carer talked about conversations that she and her husband had with a young person in relation to the history of his country of origin. The interviews suggested that the young people often appreciated when carers attempted to help them to hold on to their cultures in different ways:

We have different culture when we come here. It's really difficult to adapt with the new culture ... So ... if we are treated maybe in a kind of way that it's similar to our culture because the way we are living in our culture and the way we face things here are different For example, what I like from my last foster mother, she always asked me what kind of food I eat, what kind of music I like, so, and she sometimes takes me to a place where, where there is a cultural programme [from my country], she would take me there, so because ... I always miss something about my own culture ... so she used to do that and I really liked that about them.

27 Stacy and Peter are not the carers' real names.

Regarding the learning of basic information, professionals talked about the importance of learning from the young people themselves, given that different people incorporate culture into their lives in different ways. A residential staff member talked about realising that the internet can provide very stereotypical information and stated that this was learnt by searching for 'Ireland' and 'culture' in Google.

Time and time again professionals expressed the view that it was important for carers to have the opportunity to examine their own cultural beliefs. Some felt that carers needed to develop a sense of 'cultural awareness' that went beyond learning basic facts. One professional believed that few carers were able to go that extra step of proactively promoting a young person's bicultural integration. She gave an example of carers looking after Nigerian young people:

Generally the public discourse and the media discourse around Nigeria is very negative, so I think a foster parent has to be very, very careful to be in a position to counteract that all of the time. So, I think, you know, in a very tangible way it's things like having a map in the house, ... finding positive examples of Nigerian culture on television. Reminding, you know, or even informing - because they won't know if they're young - of the fascinating history of early Africa and where man was first born, as we know it. So, whatever opportunities. And, I would say, defending or being available to defend, and also to challenge any of the negative mythologies.

Indeed, in her research McWilliams (2012) foster carers talked about how many of the ethnic minority children for whom they were caring held negative feelings about their skin colour. This highlights the importance of

carers and social workers attending to the cultural / ethnic identity needs of the young person and being able to counteract racist attitudes and beliefs that the young people faced. Carers and professionals alike could benefit from more training in this regard.

In some situations carers and professionals made efforts to promote the young person's cultural identity but young people showed no interest. This created challenges for them as they attempted to respect the wishes of the young person whilst also ensuring that their developmental needs were being met. One professional described the role that carers had in this type of situation:

At an adolescent developmental stage, the norm will be to want to fit in and to want to look like and be like... I think that requires very delicate holding. You can't force someone to acknowledge their Nigerian history. But having the conversation about ... you know, as you have two parents, you don't choose one over the other. You carry parts of both. So, just supporting it in that way. ... You can't be forcing someone to watch ... Nigerian cinema or something ... But I think just to keep it open all the time. 'Ah, you're not interested now. I remember I was like that when I was 15. ... My mother was from Tipperary and I never wanted to go down to the farm. But now that I'm older, I am interested, so that's very possible that that will happen to you.' So, you know, 'let's keep those books [about Nigeria] until then'.

When young people were cared for by carers of a different ethnicity, frequent references were made to cultural differences and to cultural misunderstandings that arose, particularly in the early stages of placements. At times these misunderstandings involved carers or professionals who misunderstood behaviours

of the young people but they also involved stories of young people who demonstrated a lack of understanding of the Irish cultural context, especially on first arrival. For example, professionals talked about young people not making eye contact with carers and how carers misunderstood this, thinking that it was a sign that they were hiding something or not telling the truth. Others talked about two young males who were friends and held hands when walking along together, as this was the norm in their culture of origin. They were not aware that in Ireland men rarely held hands, and that if they did it was usually because they were in a homosexual relationship.

At times, carers demonstrated cultural insensitivity in their interactions with the young people. One professional talked about carers who were happy to look after a Muslim child but then inadvertently upset the child by a comment that they made about the fact that the child did not eat pork products. This highlighted the need for carers to be aware of their own perceptions and beliefs:

SH: And there was just a comment made, not that it was meant to be insensitive, but just the way that it was, that the child couldn't recover from it.

M: Okay. What kind of comment?

SH: Oh, 'you don't know what you're missing if you don't eat bacon', or they were cooking it and the smell was going... Like, it was just something very simple that... But it's just being aware of that.

Young people also spoke about the need for carers to have an understanding of cultural differences, including communication differences, in their interactions with those for whom they were caring. McWilliams (2012) suggests that some cultures emphasise direct and authoritative communication while other cultures

emphasise a more indirect and hesitant style. Related to this, one young person talked about the need for carers to understand difference and gave an example of how communication or behaviour that is deemed 'rude' by one person or culture might not be considered rude in a different cultural context.

Like, when I came new, ... to give me something, I didn't even say 'thank you'; I didn't even say 'please'... You know? Because I'm not used to it... So, they can have the misunderstanding. Maybe they might think you are rude or something like that, but you are not.

Food was frequently mentioned as something that caused difficulties in cross-cultural placements, a finding that is consistent with other research (McWilliams, 2012). Young people often mentioned not liking the food that carers cooked for them. Carers, too, talked about this. One supported lodgings carer talked about a girl that he and his partner had previously cared for:

She was, she was eating our food but she wasn't liking it. She wasn't liking the potatoes, the carrots, the usual Irish dinners. But we were asking her, we were noticing that she wasn't eating much and we were asking her and ... she eventually told us after a while that she didn't like it so what we decided to do then is we gave her money each week and we used to say to her go to the Halaal or the African shops and buy what you want and cook something that you want to and if you don't want to do it then we'll learn how to cook it.

In another example, a young person compared two foster placements, one where he was happy and one where he was unhappy. In relation to the former, he stated:

And when I cooked African food, they let me cook, you know? So, when I cooked, they ate it with me as well. Yes. They really enjoyed it. So I felt really relaxed and stuff. ...So that they could eat my own food and I could eat theirs and stuff like that.

In contrast, he said the following in relation to the latter placement:

They didn't like my food as well. ...They complained of the smell of the food, and that made me feel not really welcome to the house. You know? It's like, you know, 'what are you cooking again?' Just call me like that. So, I didn't really relate to them.

This boy's experiences suggest the importance that he attached to the carers' attitudes towards his food. The importance of food in foster care for asylum seeking children is increasingly being recognised. Based on their research with separated young people and their carers in the UK, Kohli and his colleagues (2010: 233) suggest that "food is related to many aspects of finding sanctuary, negotiating belonging within the foster family, and can powerfully evoke being at 'home' in a new land". Similarly, Sirriyeh (2013) suggests that for young people in her study, their "access to food, freedom to regulate their own consumption of food and their role in structuring the household's food culture" provided important examples of the extent to which they felt they belonged in the household and the extent to which carers helped them to feel at ease.

In most cases, over time, difficulties in relation to food were generally overcome, with carers and young people adopting different strategies. In some instances, carers learnt to cook new dishes that the young people liked, in other instances young people themselves were facilitated to do their own cooking, and in other

instances the young people got used to Irish food and grew to like it.

For some carers offering cross cultural placements, issues arose in relation to gender, gender roles and the treatment of women. These issues were similar to those mentioned in research in the US and in the UK (Lee et al., 2010; Wade et al, 2012). One of the residential managers spoke about a male client who expressed the view that it was appropriate to hit women. In addition, several of the participants talked about situations where male young people struggled to relate to female carers or female professionals. In one example, a carer told of how a young person had agreed to participate in this research but then changed his mind when he realised that the researcher was female. This carer talked about the challenges that caring for this young person posed for her and her husband:

He found it very difficult, and still right up to now, finds it very difficult to take direction from a female or to interact with professionals who would be female. ... He feels he shouldn't have to answer questions to females...I'm the full-time carer. And he does find it difficult, you know, if I say, 'Oh. Could you bring down your laundry?' it will be, 'No.' 'Well, why can't you?' 'I'm not doing it for you.' You know? So you can have that a little bit. Whereas if [my husband] said, 'Can you bring down your laundry?' there's no problem. It's done.

The carer described this situation as 'quite difficult' especially as the young person did not interact with her young daughter at all. Her own children questioned what they were witnessing:

My children do question different cultures a lot in that... especially with the young person that's placed with us at the moment, like why he doesn't talk to

them, or why when they ask him a question, he will not answer them. Or why is he always really rude to you? So sitting them down and explaining, look, where he grew up, certain things happen that don't happen here, or certain things were accepted there that are not accepted here.

Uncertainty

The impact of asylum seeking on placements

As well as placements being affected by culture and diversity, the issue of uncertainty also presented as a core theme that impacted on the lives of the young people as they lived in foster care and supported lodgings. In particular, the sense of uncertainty about the future was related to the outcomes of their asylum claims²⁸. Within the Irish and the international literature frequent reference has been made to the stress and anxiety associated with the asylum process (Sourander, 1998; Rea, 2001; Crawley, 2010; Wade et al., 2012). Wade (2009: 395) suggests that "the uncertainties generated by the asylum decision-making process are often overwhelming for young people". Of the 21 participants, only 2 had refugee status. Of the remainder, while 6 had not yet applied for asylum (due to a variety of reasons), 13 were going through the asylum or leave to remain / subsidiary protection processes.

Throughout the interviews, all of the participants spoke about the effect that the asylum process had on the young people and on their carers. Many of the young

people talked about the stress of attending interviews and being asked questions again and again. The stress associated with the process inevitably impacted on the young people's foster care or supported lodgings placements. One of the fostering social workers stated the following:

At times they act out because of anxiety, and we do see a lot of acting out just before they have to do their [asylum interviews] or just before they have to go for their appeals or when they get the letter of rejection²⁹ ... It could be a child who has been compliant in a placement. And then I get a call from the foster carer that, 'oh, such-and-such spoke to me in such a rude manner or talked back' or something. And if I'm talking with the child's social worker ... and he goes, 'oh yes, he got his rejection letter two days ago or three days ago'. It's constantly on their minds.

Over and over again, participants expressed the view that the refugee determination process was very slow. As a result the young people and the families with whom they stayed experienced a prolonged sense of uncertainty about the future. For the young people, this differed from their citizen peers or peers with refugee status or leave to remain who were busily making plans for adulthood. One social worker stated:

If there were one thing that I could change, that the process were quicker. ... It's hard for a child. They've made it here somehow, and this whole decision, it's like the sword of Damocles hanging over their head. How can they plan for their future and look at third levels and education and jobs and vocations and things if they don't know if they can stay here or not? I'm voicing it because I know that it's something I worry about, but I don't experience it, so for a child it must be horrible. ... You're able to protect and care for the children like in a daily sense, in a family, ...

28 In Ireland, the asylum system is the responsibility of the Department of Justice and Equality.

29 By 'letter of rejection' the participant is referring to a letter indicating that the young person's application for asylum has been refused.

but that, that longer term goal of where is the security and where they're going to remain is so out of our control.

Others, too, referred to the fact that family placements were supposed to provide young people with a sense of security, but, in reality this was not possible given the uncertainty associated with the asylum process, the length of time that it took for decisions to be made, and the threat of deportation.

Many of the participants pointed to the importance of carers having an understanding of the asylum process so that they could respond to the needs of the young people. In some instances carers themselves had gone through the process and this helped them to better understand the anxieties that the young people faced. Others, however, seemed to have little knowledge of the process and while they had usually received training in relation to it, it seemed that further training or refresher training would be beneficial. Without sufficient knowledge, carers may not be able to respond appropriately to the stress experienced by young people. One of the social workers emphasised the importance of carers not making promises to the young people about their immigration status, given that it might not be possible to keep such promises.

Ultimately, young people, carers and professionals were fearful of deportation, a fear that was evident amongst participants in McWilliams' (2012) research also. Given that separated children under the age of 18 are not deported, this fear was greatest for young people who were close to the age of 18 or who had already turned 18. Thus, the issue was often most

prominent when the young people were being moved to direct provision accommodation where they had less support. One young person who had previously lived in foster care but was now in direct provision stated:

Oh I'm here [in Ireland] more than like 8 years and nothing changes I'm still waiting for the Justice to decide ... so I'll be thinking 'Oh God am I going to be like them or am I going to get deported back home and what's going to happen if I go home?'

Similarly, one carer spoke about the stress that her foster son experienced when he was turning 18 in his Leaving Certificate³⁰ year. She also spoke of how upset she and her extended family would be if he were to be deported:

Terrifying, heartbreaking, to even think that I could lose one of my kids, they are my kids. As I said, the Irish government gave me these kids to look after but they didn't expect me to fall in love with them and to become part of the family in a very short period of time. And then they expect to just give them a negative answer and, 'all right off you go, report to this station, this, you're going'. I mean it's an awful lot for them to ask their own people to hand these kids over ... I mean, I think if an unaccompanied minor is with a family for over three or four years they should be left with that family because at that stage they are family. I mean he calls me mam and da, nanny and granda. ... It wouldn't just affect my family, it would affect my mother, my brothers, my sisters, my nieces, my nephews.

In relation to the UK, Wade et al. (2012: 246) have highlighted the importance of social workers and foster carers helping to "raise young people's awareness of the likelihood of a negative outcome and help[ing] them prepare for this eventually". However, they also

30 The Leaving Certificate (or Leaving Cert) is the state examination undertaken by students in Ireland at the end of their second level schooling.

acknowledge how difficult it can be to talk about these issues. The task of finding a balance between helping young people to experience a sense of security and helping them to be realistic about the future is an extremely challenging one, but one that needs to be addressed (Wade et al., 2012). Some of the young people dealt with their lack of control over the asylum process by focusing on their studies and not thinking about the future. In essence, they made efforts to suppress their emotions and to distract themselves (Goodman, 2004; Ní Raghallaigh & Gilligan, 2010). However, interviews with others suggested a deep sense of disempowerment which trickled through into other aspects of their lives. For example, one girl, talked about a previously bad placement experience and feeling that she could not complain about it. Her sense of disempowerment is palpable:

My father is not President of Ireland. I don't have papers. I don't have anything so I just kept quiet and let it go.

But as well as the stress associated with the actual asylum process, the migration status of the young people also led to other challenges, which affected their care placements. Those who did not have refugee status or temporary leave to remain were restricted in many ways: they could not take up employment, they were not entitled to free third level education, they were not entitled to rent allowance and they could not travel outside of the jurisdiction. A number of the participants talked about the fact that the young people were not able to have summer jobs, something which set them apart from many of their peers. Others talked about wanting to move into private rented accommodation but were unable to do so because of the restrictions on their social welfare entitlements. In addition, while some separated young people have received support

from philanthropic organisations to allow them to attend third level courses, most face restrictions in furthering their education after they complete their Leaving Certificate. This meant that it was often difficult for the young people to motivate themselves in school, and this, in turn had implications for the family placement. One young person who was interviewed as he prepared for the Leaving Certificate stated the following:

I don't know what I will be doing next month. After the Leaving Cert. You know? I think that is a wrong thing with the system. ... I've been here for years like. And I've been everywhere. I should know where I'm going next, you know? But now I don't.

The restrictions on travel outside of the jurisdiction posed particular problems for young people in their attempts to integrate into families, into schools and into communities. A number of professionals referred to the fact that the young people could not go on holidays abroad with their carers, meaning that either they were placed in respite placements for the duration of these trips or carers decided to holiday in Ireland instead. This issue was identified by participants in McWilliams' (2012) research also. In that study it seemed that some carers had managed to get travel documents for their children, while others had not, suggesting that there was confusion and a lack of information in relation to the issue.

For young people who lived near the border with Northern Ireland, the restrictions on travel had implications on a more day-to-day basis, thus highlighting the need for professionals to get clarity in relation to what is and is not permissible. These restrictions (or perceived restrictions) meant that they were not permitted to travel across the border to shop,

for school trips, or for sports events. One young person who was very successful in a number of sports referred to the frustrations which this caused.

It's just really annoying. I couldn't get into the Ulster³¹ team because I couldn't go to the North³². ... and someone else had to be put in front of me. I was on the team but I couldn't go ... Like, because we are beside the North. ... If they knew I did sport and stuff and they wanted to move me, they should have moved me to the middle of the country or something. You know? Where you can travel places, you know? Like, because the North is Northern Ireland and that's a different country, apparently.

It is important to note that not all of the young people were going through the asylum process at the time of interview. Some had not yet made applications for asylum but thought that applications were to be made soon. Two of the participants had been successful in their applications for asylum and had been granted refugee status. In these cases the young people were planning for the future, in terms of their education and living arrangements. One of the young people had been waiting for a number of years for family members to be reunited with him in Ireland. His social worker and carer expressed frustration at the length of time that the reunification took.

Silence and secrecy

Related to the question of uncertainty and the asylum process was the tendency of the young people to be

secretive about their past experiences. This issue has been highlighted in the international literature on separated children (Wade, 2011). Various reasons have been suggested for this secrecy, including a fear that applications for refugee status will be rejected (Anderson, 2001). Some young people have escaped circumstances of trauma and violence and speaking about the past is just too painful. Others may have been told by family members to keep information to themselves and not to trust anyone. Others may have been advised to tell a particular 'story' as it may have been believed that this 'story' would help the young person to achieve permission to remain in Ireland. Whatever the reason for their secrecy, remaining silent may act as a purposeful way of coping with their circumstances (Papadopoulos, 2002; Kohli, 2006b). From the interviews with young people, their carers and with professionals it was evident that many young people did not openly talk about their past experiences. One young person had the following advice for carers:

Don't talk too much about their life. That's about it. Just don't keep talking about it. It gets on their nerves. And anyone, no matter whether you're black, white or whatever, like, if it's been hard ... It's not easy to be a foster child, and I'm sure they understand that themselves. So, just don't talk too much about their personal stuff, like. Talk about it, because they want to know, but don't talk about it too much.

Not surprisingly, the silence and secrecy had an impact on placements. Many of the professionals spoke about the challenges posed for carers, who were caring for young people about whom little was known. To a large extent, 'uncertainty' was again a key theme: carers lacked certainty in relation to the background of the young people for whom they were caring and young

31 Ulster is one of the four provinces of Ireland. It comprises of nine counties, six of which are in Northern Ireland and three of which are in the Republic of Ireland.

32 By 'North' the participant is referring to Northern Ireland.

people may have been uncertain about whether or not they could trust their carers. One of the professionals involved in the assessment of carers stated the following:

One of the things carers find difficult is that they always say, 'What's the child's story?' in the sense of 'the child is secretive, they're not telling us things,' you know? Well, they're not telling us many things either, you know? We have to let the carers understand that the child's story is the child's story, and it's the child's right to keep the story to themselves or share it. And, with time, if the placement does last long enough, they do tell the carers even more than they tell us. They get to know them.

A stakeholder from an NGO expressed concern that young people were being asked too many questions by their foster carers. She put this down to the curiosity of Irish people:

I mean, if you have any sort of a heart and you're with someone 24-7 and they're in and out of your family, you know, I suppose the Irish as such ... are very curious...And we want to know people's backgrounds and where they've come from and how they've got here.... And everything. And these young people have had to have a lot of secrecy in their lives and they've built up a shell of protection around themselves, really. Survivors. They are survivors.... And if you sort of query too much and then you become judgemental or something, possibly, or you're making suggestions ... and people aren't trained. If somebody is traumatised, you need the experts to deal with that....Not within the family.

However, within the interviews with the foster carers and the young people, there was little evidence of carers attempting to delve into the past experiences of the young people. In fact, the vast majority of the carers

emphasised the importance of not asking the young people questions, thus suggesting that they respected their right to be silent or secretive about their histories. One carer stated:

We make a point of trying not to delve into their past. ...What we say to them is, 'look, you know, if there are any issues that come up for you as a result of what happened in your past that you really need to talk to us about, we're here, we're ready to listen. ... But don't feel that you have to tell us your past'. ... The curiosity that we all have, or my curious nature would be to ask, 'well, tell me what has brought you to here'? But, in a sense, we feel that we have to respect their need for privacy ...

Most of the carers showed an understanding of why the young people might keep information to themselves, saying that perhaps they were protecting family members or keeping a promise that they had made to their parents. Their narratives suggested that sometimes, over time, trusting relationships developed and young people felt more able to share, even if still only to a limited extent. This is in keeping with the findings of Kohli (2007) in relation to social workers working with separated young people in the UK.

However, in one case, while the foster carer stated that she did not question the young person, her narrative seemed to suggest otherwise. She spoke about suspecting that the young person was sending money home to his country of origin. Her interview suggested her desire to get to the bottom of the young person's story. It was unclear whether this was for her own benefit (to satisfy her curiosity) or for the benefit of the young person (to allow him to talk more freely about his family).

C: God knows when you think back. What have they come from? And, you know, he thinks about his

parents and ...It's just a pity they would not speak and tell us. ... I mean, if I thought he'd send that money back to his mother, I would give him a few euro to send to them. ...And that's the thing. The social worker said to me, you know, maybe he's paying off somebody or their family is paying off somebody.

M: ... So would you have talked to him about that then? ... You said you mentioned it to him.

C: I did, but ...you know, time is a great thing, and I'm confident I'll get it out of him.

Transitioning from family placements

Current practice in relation to after-care

Section 45 of the 1991 Child Care Act provides that when a child leaves the care of the state after-care may be provided by the HSE up to the age of 21 or where the young person is involved in a course of education, until the young person completes the course. However, after-care is not a mandatory entitlement: its provision is at the discretion of the HSE. The recently published *Report of the Independent Child Death Review Group* (Shannon & Gibbons, 2012) recommended that the Minister consider placing a statutory responsibility on the HSE to provide adequate supports for care leavers. In the UK, separated young people who are 'looked after' by local authorities are entitled to access the provisions of the Children (Leaving Care) Act 2000 at least until all asylum appeals have been exhausted (Wade, 2011). Different local authorities interpret this in different ways. In general, the young people are not permitted to remain with their foster carers. Instead, they live in flats or in shared houses with a number of other young people. They generally remain in the same

local authority area in which they lived while in foster care.

For separated children in Ireland, the HSE's Leaving & Aftercare Services National Policy and Procedure Document (2011) states that asylum seeking young people leaving care "may be eligible to access a Leaving & Aftercare service on the basis of their individual needs assessment" (HSE, 2011: 21). The document goes on to state the following:

"On discharge from the HSE at 18yrs, young people in the asylum process are entitled to reside in direct provision accommodation should they wish to access basis state supports, such as a medical care, funding for clothes etc. Young people in the asylum process are not entitled to work and / or receive full social welfare benefits. Nonetheless, asylum seekers who have been in the care of the HSE under the Child Care Act 1991 will have their specific complex needs and requirements addressed in their Aftercare plan. Support for accommodation etc will be provided by the relevant agency with responsibility in line with other government policy" (HSE, 2011: 22)

The practice at the time of writing was to move the young people to direct provision centres provided by RIA once they turned 18 or, in the summer after their 18th birthday if they were still in full time education. Many of the participants (including HSE social workers) considered this to be a change in practice: they had understood that the young people, like many of their Irish counterparts, would be allowed to remain in foster care or supported lodgings after their 18th birthday, as long as they were still in full time education. According to participants, placements were sought and planned for on this basis. Frequent reference was made to the distress that this perceived change in practice caused

for all concerned. One representative of an NGO talked about a young person and the family who had cared for her:

Well, the one particular family of that girl, they were very distressed that she was leaving. They had sort of settled with her, and she'd settled with them and it was working very well. They were very good to her. And, they just felt that they'd been let down because they'd been told that she'd be staying ...

Regarding the HSE's use of discretion to allow young people to remain in their placements, many of the professionals questioned how this discretion was being used. Again, it was felt that there was a level of uncertainty involved. They complained about a lack of transparency in decision making regarding whether a young person could stay in foster care / supported lodgings instead of going to direct provision. It was suggested by many that most of the young people were vulnerable and that direct provision was not an appropriate place for them to live. In essence, they were questioning whether the 'specific complex needs and requirements' of separated children, as mentioned in the HSE's aftercare policy (HSE, 2011:22) could be met in a direct provision environment. Participants felt that the threshold of vulnerability had been set very high by the HSE, resulting in only extremely vulnerable young people being allowed to stay in their family placements. One stakeholder talked about advocating for a young person who had serious mental health problems, suicidal ideation and who had lost two stone in weight during the move from foster care to direct provision. She stated that the HSE indicated that this was 'not vulnerable enough'. In this research, a senior HSE practitioner stated that decisions were made by the principal social worker on the basis of a full assessment as well as consultation with relevant staff. A distinction

was made between young people who were 'vulnerable' and those with 'exceptional vulnerability':

Basically, everyone is designated to be moving on, so if we don't move somebody, it's because an exceptional circumstance has arisen. And any time I keep somebody, I mean, really, in many ways it comes down to the social worker, the social work team leader. They would appeal to me to say, listen, we think that Debbie has to stay until August It's to do with exceptional vulnerability because all of our young people are vulnerable.

The position of the Reception and Integration Agency (RIA) representatives contrasted with that of the HSE. They did not distinguish between levels of vulnerability, thus suggesting that their understanding was that young people who were moved to RIA accommodation were not deemed by the HSE to be 'vulnerable':

It is within [the HSE's] remit to hold on to persons they deem vulnerable. Just to reiterate, ...if they are deemed to be vulnerable they will not come to us, because that is a decision to be made by the HSE.

Several of the participants mentioned that the decision-making often seemed to depend on strong advocacy from the young person's social worker or foster carer. Others talked about foster carers who made representations to local politicians or who asked parliamentary questions in efforts to advocate for the young person in their care. One of the social workers spoke about his role in advocating that a young person with refugee status be allowed to remain in a family placement:

There is a discretionary aftercare provision where he's in full-time education and he's a boy who has status ... and that's another thing I hope I could manipulate. If he wanted to stay there, that he could

stay there beyond 18. I would like to think that. Obviously that family is being paid every month to look after him and you just hope that someone would see the benefit, that I could make a real, strong case that it's such a benefit in this ... young man's life, that he stays there ... Because I would like him to stay there and I would like his family to arrive in Ireland and I would like there to be a movement between those two.

In addition, it was believed that young people who were given permission to remain in their placements (having turned 18) lacked any control within these environments. It was felt that the risk of being moved to direct provision hung over them and so the young people felt they needed to comply with whatever rules were in place, even though, as adults, they wanted to make more decisions for themselves.

Concerns about transitions from family placements

Since its introduction, the direct provision and dispersal system has been criticised on the basis of it being discriminatory, causing poverty, being detrimental to human rights and having an adverse impact on the well-being of residents (Amnesty, 2011; Arnold, 2012; Fanning et al., 2001; UNHCR, 2011). The Children's Rights Alliance previously expressed "grave concern about the suitability of direct provision for vulnerable young people" (CRA, 2011: 65). Martin et al. (2011) question the way in which these young people's 'best interests' are interpreted when they reach 18. Reflecting this criticism in the literature, the participants expressed grave concern about young people in family placements who were due to move to direct provision upon turning 18. The concerns centred on the impact of RIA accommodation on the well-being of the young people and the lack of support that would be available

to them in the direct provision centres. Indeed, drawing on research in the UK, Wade (2011: 2426) points to the "additional difficulties that young people are likely to experience in sustaining participation [in education] and broadening their social networks when living ... in environments that offer lower levels of support and encouragement."

Many of the participants talked about the huge difference between foster care/ supported lodgings and RIA accommodation. One social worker stated:

It's traumatic in terms of what they receive in foster care and then what they will receive in RIA accommodation, and the disparity between that is enormous. ... So, it's the move. Why it's traumatic for them. It's the move from foster care support to RIA where they share a bedroom, where they share toilet facilities, where they have 19 Euros a week, where they have a medical card, and that's it, and where they go from a lot of support to some support.

Indeed, this social worker's point reflects the views of Bullock (2009: 213) who, drawing on research by Sinclair et al (1998), states, "some young people find the contrast between the caring home and the uncaring community too much to handle". One of the young people who had already moved from foster care to direct provision described what it was like where she was now living:

Nobody will come to you, even if you're sick, nobody will come to your room to ask you are you OK. Even if they didn't see you for the whole day, nobody cares.

She went on to say:

I just sit in my room and I cry and cry and cry and cry.

In addition, participants were very critical of the fact that many of the young people faced the challenge of moving to accommodation centres which were far away from where they were living with families. This meant that many would have to develop entirely new social networks, as well as moving to new schools, thus suggesting that the transition from care involved a lot of change and uncertainty. Participants also commented on the environment within the direct provision centres and expressed concern about the impact of these environments on the well-being of the young people and on their education. Elsewhere, Arnold (2012) has drawn attention to the detrimental effect of direct provision on child welfare and development. In the current study, descriptions were provided of settings where many of the residents hung around all day and into the early hours of the morning, with many having done so for years, as they awaited for an outcome to their asylum claim. One participant described the environment as "generally depressive". Several of the professionals mentioned drug use within the centres. Many of the participants talked about the impact that such an environment would have on the ability of a young person to attend school. One professional expressed concern about the effect of the move from foster care to direct provision on the psychological health of the young people:

I'm very concerned about the impact on psychological health. ... I've seen it time and time again, those who have had traumatic experience, and those who have had a traumatic separation, all of that is reactivated around this time. Any of the rebuilding of their psychological health that has been possible ... since their arrival, is at risk of unravelling.

Often, young people had become more independent in their foster care or supported lodgings placements and

had learned some independent life skills, such as cooking. However, while in some senses they would be independent in direct provision - in that they were not living in anyone's care - in other senses it was felt that their freedom would be curtailed by the institutional nature of the setting. In direct provision, meals are cooked for residents and provided at certain times, there are restrictions on the number of nights you can spend away from the centre, people often share rooms with strangers, have little privacy and have nowhere of their own to entertain visitors.

In a sense, like the previously quoted participant suggested, it was felt that there was a risk that the extremely positive roles played by family placements could become unravelled by the move to direct provision. One professional stated:

[In direct provision] they struggle with a lack of independence because they have been given a glimpse of it, in a sense, and that's what I mean by false hope...they have been put in situations where they think, 'ok this is going to be put in place'...they see it as a backward step, they almost see it as a punishment and when we are working hard on self esteem and personal skills that can be a huge battle for us.

A number of the young people were due to move into direct provision accommodation a few months after the research interview was taking place. They approached this pending move in different ways. One of the foster carers talked about a young person who was looking forward to leaving foster care. In this carer's view the young person was looking forward to the freedom of turning 18 and living outside of the care system. He believed, though, that she was not fully aware of what living in direct provision would mean for her. A different

young person stated that he would not move into RIA accommodation, stating that instead he would try to find a friend to squat with. Another young person's sense of disempowerment was evident in his belief that there was nothing he could do about the situation:

But I know it's going to be tough in there because it's adults, so actually you might be sharing a room with three people or four people or more and that kind of stuff. But I have no power over, I can't do anything about it, so it is the life. So I just have to adapt to it and live with it. I can't do anything about it.

It was evident that the majority of the participants had huge concerns about young people moving to and living in direct provision, especially in the context of uncertainty about the future and fear of deportation. It was inevitable that the future plans to move the young people to RIA accommodation had an impact on placements. The anxiety and concern about moving out of foster care / supported lodgings affected the emotional well-being of the young people and hence it affected their behaviour and their ability to relate with carers and with other members of the family. A foster carer stated the following in relation to her foster son:

Well, I think it's a horrible experience for him. I just think that it has to be... I wasn't ready to move when I was 18. You know? So it has to be a very daunting experience for him, and ... you can actually physically see him, when he's talking about it ... It's something he really doesn't want to happen. And, again, he has no control over it... He has had very little control over everything, and the decision has been made for him. And, he's finding that very difficult to cope with.

In addition, professionals voiced concerns about young people 'going missing' upon turning 18, with one

professional giving an example of a particular individual who had been due to move from foster care to direct provision but had disappeared shortly before the move was due to take place.

In contrast with the concerns expressed by almost all of the participants, when asked if the move from family care to direct provision accommodation was difficult for the young people, one of the RIA representatives stated:

It's obviously a different way of living, but I mean, it's very hard for us to kind of generalise and say that it's a shock to the system. I'm sure some of them would find it more challenging than others, but ... there are clearly some who don't and they don't want to engage with their social workers afterwards and that's entirely their prerogative.

It must be acknowledged that the RIA representatives who were interviewed were primarily based in Dublin and so had little direct contact with the young people. They were clear that their agency's remit was not one of providing care for the young people. Their role was not to provide 'after care', but rather, simply, to provide accommodation to asylum seekers. Nonetheless it was clear that when hostel managers were concerned about aged-out young people, this information was passed on to the HSE. In one case RIA called a case conference in relation to a particular young person. Regarding their role, a representative stated:

We have a general duty of care to our residents ... If for example, it's noted that someone is severely depressed and so on, we patently have an obligation, the centre managers have an obligation to try and seek help for them. ... But it's not the same as the person being 'in the care of' the centre manager or 'in the care of' RIA.

Overall, given the nature of the provision when the young people turned 18 and the many challenges associated with moving to and living in direct provision, some of the participants had started to question the use of family placements. One participant suggested that perhaps it made more sense for the young people to remain in residential centres:

I'm almost at the point where I am saying, is there any point in continuing with this? Is there any real point in removing children from residential care homes, you know, for a very short period of time, placing them in foster care and then putting them into direct provision?

I really have to question, whether we need to take a step back and say, well, why don't we leave them in residential homes?

Similarly, one of the social workers referred to the sense that the move to adult accommodation had been less difficult for young people within the previous hostel system:

And I have heard social workers on the team say that in some ways the hostels are better, because there wasn't that huge disparity when they moved from minor hostels to adult hostels. And, do you know, I can see that. I can have an appreciation of that. My overall opinion is that they still need to move to foster care and supported lodgings - they're children, they need that. But I can kind of see, as well, the insight into that, even though I don't agree with it, but ...

However, while many of the participants had engaged in this kind of thinking in relation to the current policies, most felt that giving the young people opportunities to develop relationships with families for even a short period of time was beneficial to them in the long run.

After-care support: families and professionals

Many of the families talked about their plans to continue to have contact with young people after they turned 18 and left their homes. The research by Wade et al (2012) in the UK found that where things were going well and where there was a strong sense of "social connectedness", foster carers were more likely to want young people to stay. In the current study, several of the carers talked about young people who had lived with them previously, with whom they remained in contact. One supported lodgings carer talked about a young man who had moved on after turning 18 and receiving refugee status. This carer described the on-going relationship with him as a rewarding aspect of the caring role:

There is that on-going relationship ... it's not that you're doing it for that on-going relationship, but when you have an on-going relationship with them, it's kind of reaffirming that you did something positive. Because, you know, you've had some impact on them but they want to keep in touch with you.

Another carer talked about the first separated young person that she cared for. He had moved into a direct provision centre that was closer to his school but continued to keep in touch with his previous carers:

M: And would you have ... any contact with him still or would you hear from him?

C: Oh, every time. We talk. He will ring; he comes here. We're happy to have him any time. ...We love him. ...He was our first one, but we really gelled together. ...And this was his first home as well. ...So he calls it home.

In some cases carers stated that they planned to allow the young person to stay with them after they turned 18, even in situations where they would not receive any

financial remuneration from the HSE. However, professionals and stakeholders believed that doing so had wider implications than the fact that the carers would not receive the foster care or supported lodgings payments. Many of the participants believed that young people would not be entitled to their €19.10 allowance or to the medical card if they were not residing in direct provision accommodation. The policy in relation to the €19.10 was clearly stated by the RIA representatives:

I mean just in the same way if we decided to ask anyone on the street if they wanted to come in and live with us, the state has no obligation to support us in relation to that. They [the carers] are not acting on behalf of the state. They are no longer, as I understand it in the scenario you are talking about, foster parents. They happen to be people who have developed a good relationship with this individual and have asked them to live with them. So they are not foster parents and they are not entitled to any assistance from the state... and equally any individual concerned is not entitled to any direct provision allowance because he is not in direct provision..... In the same way with asylum seekers who opt not to live in direct provision, they don't get any state support, so they don't get rental supplement, they don't get bread and butter payment and the biggest one is not getting the medical card.

As well as receiving support from former foster carers, the young people also received some after care support from the HSE and from other agencies. At the time of writing (August 2012) the TSCSA had 3.5 leaving care and after-care workers, working with young people who were 17 and a half and who were preparing to leave the care of the HSE and working with those who

had already left the HSE's care. Many of their clients were living outside the greater Dublin area. For example, one leaving care and after care worker had 27 clients, 15 of whom were living outside the greater Dublin area (including Galway and Waterford). It is questionable whether providing adequate after-care support is possible given this caseload and the geographic locations of her clients.

One of the HSE after care workers described her role in terms of providing both practical and emotional support to the young person in relation to various issues including education, healthcare and the asylum process. She talked about linking the young people in with local services whilst also being available to provide ongoing support herself:

And for the adult accommodation, say outside Dublin or even within Dublin, we have local services that we link the young people with. ...And some of them, they benefit a lot from that ... Some still find it difficult. Some don't make an appointment, and they still come back ... They know they have support from us and they can always link in with us at any time, you know, within our working hours anyway. ...

In some situations, local NGO's provided support to young people in direct provision. One of the young people praised this support:

Like thanks to Ger³², if she's here I can talk to her, if there was no Ger I don't think I would finish my Leaving Cert. I don't think I would even do my course. I don't think I would even be talking to you here. It's just really hard.

Many of the participants criticised the HSE's after-care provision. In particular, they were critical of the fact that the after-care workers were located in Dublin while the

33 Ger is not the NGO worker's real name.

young people in direct provision were living in various locations throughout the country. HSE participants made it clear that the Dublin-based HSE after-care workers travelled throughout the country to meet their clients. However, it was evident that only a certain level of service could be provided with such arrangements in place. While efforts had been made to obtain after-care services for the young people from local child protection teams, there had been limited success in this regard. Apart from the geographical location of the after care workers, stakeholders were also critical of the nature of the services being provided. A representative of a local organisation supporting young people in direct provision suggested that the quality of provision depended on the particular worker:

Some of the social workers and project workers have been very good and very supportive and have kept very regular contact with their clients, with the young people. Others, and I don't know what the criteria are and I don't know what the differences are, but others have just basically signed off. ...Just signed off no contact at all ...I think it is individual social workers and project workers, yeah. I think that there are some who go above and beyond and there are others who just go exactly by the book ...

Another stakeholder stated:

Provision in my eyes within that team is relatively poor... I think in this country we are very stuck in an outdated model of aftercare which is, you know, lets go and visit them in a coffee shop for a cup of tea, you know, 18, 19 year old young people don't want cups of tea and that kind of mentality.

While the HSE stated that "a lot of planning" occurred between social workers and young people prior to their move to direct provision, many stakeholders felt that the

young people did not receive enough preparation for the move to direct provision placements. It was suggested that more emphasis needed to be placed on leaving care planning so that the young people could be adequately prepared for leaving foster placements and supported lodgings placements. This may be particularly important given the many layers of uncertainty surrounding the young people as they transition from care. Indeed, given the age profile of separated young people who arrive in Ireland, "preparation and planning for adulthood should be a central feature of social work practice" (Wade, 2011) from the point they first come to the attention of the HSE. This is particularly important given research evidence which suggests that care leavers are at risk of adverse outcomes (Mayock & Vekic, 2006; Stein, 2006). It is important to note that while many of the non HSE service providers were critical of the leaving care and after-care provision, further research is needed in order to gain the perspectives of young people in relation to their experiences of these services.

Conclusion

Overall, while separated children face many of the challenges that other children in foster care face, they also face some additional ones. In particular, this research suggests that issues in relation to diversity and uncertainty are to the fore within their placements. Regarding the former, social workers and foster carers seemed very aware of the importance of meeting the cultural needs of the young people who were placed with them. Efforts were made to find placements that could meet these needs. While there was little evidence of social workers engaging in simplistic cultural matching, the findings suggest that carers could benefit

from further training in relation to proactively meeting the cultural needs of those for whom they were caring. In addition, while religion was considered, its potentially important role was not always given due recognition. More efforts need to be made to recruit ethnic and religious minority carers. Also, increased emphasis needs to be placed on helping separated young people to hold on to their own culture, while also enabling them to learn about Irish culture and to integrate into Irish society. Social workers and carers need to be extremely proactive in this regard.

Regarding the latter theme - that of uncertainty - it was clear that placements were affected by the fact that the future was largely unknown. It is perhaps not surprising that the asylum process causes considerable anxiety for young people and carers alike, and affects the ability of young people to experience a sense of security within family care. Also, the silence and secrecy that often surrounds past experiences poses challenges for all concerned. Finally, many of the participants were due to move from family placements to direct provision accommodation: Again this was a source of worry and concern not only for young people and their carers, but also for most of the other stakeholders who participated. And indeed, for most of the young people, this transition from care to 'independence' took place in the context of turning 18 and the increased fear of deportation which surrounded this milestone.

Chapter 7:

Conclusions and Recommendations

The move from hostel care to foster care and supported lodgings marked a very significant and positive development in service provision for separated young people living in Ireland. The previous system developed in response to the arrival of significant numbers of asylum seeking young people in the late 1990s. Amongst the participants in this research there was a strong belief that the change in policy and practice was a positive one and that the new arrangements meant that the needs of separated young people could be met in a more appropriate and safe way.

The young people were very positive about their time in residential care. Partly as a result of this, they found the move to family placements challenging. However, while the initial period living with a family was often difficult, in general the young people settled well over time. In the main, in discussing their current placements, young people and the carers provided a sense of what successful foster care and supported lodgings looks like. It was evident that, in general, the carers had great affection for the young people and that they not only cared for them, but also cared about them. In turn, most of the young people felt included in the families and felt that they were well looked after. In most cases, it was evident that strong relationships were developing and that the young people were responded to in an individualised way.

Notwithstanding the sense of relief that the hostels had been closed, stakeholders - particularly those from NGOs and advocacy groups - continued to express concern about the services offered to separated young people. Some had begun to question the use of foster care and supported lodgings and wondered if residential care would be a more appropriate form of care for this client group. For many, it seemed that these

beliefs stemmed from their knowledge of situations in which foster care had not been successful. Several of the non-statutory stakeholders acknowledged that they tended to hear about placements that did not work out, as opposed to situations that were successful. However, there was evidence that a significant number of young people did not have positive experiences in their first family placements. Eight young people had experienced more than one placement, with the evidence suggesting that in at least 7 of these cases an earlier placement had broken down. A variety of complex and interrelated factors contributed to placement breakdowns and these were discussed in Chapter 5. Many of those who experienced a placement breakdown subsequently seemed to settle with a different family. Stories about placement breakdowns led many stakeholders to conclude that family placements worked when 'good' foster families and supported lodgings families were found. However, they were not confident that 'good' placements were always or even usually found, with many questioning how matches were made. While it cannot be assumed that placement breakdowns were due to matching issues, it does highlight the importance of the matching process. Within this study it was evident that considerable attention was given to finding the right 'match' and that the time the young people had in residential care allowed this to happen. The matching process was a very complex one and there was little evidence that it was undertaken in a simplistic manner. Ultimately, the shortage of placements exacerbated attempts to establish the 'right' match.

In the majority of situations placement breakdowns did not occur. Nonetheless, some participants felt that long term residential centres might offer a better alternative as it would mean that the transition to direct provision

at age 18 might be easier. Carers, young people and stakeholders were very concerned about the practice of moving separated young people to RIA accommodation and about the impact that it would have on the emotional well-being and psychological health of the young people. While only two of the participants were living in direct provision, their narratives suggested the huge challenges that they faced in these settings. For many of the participants - particularly statutory and non-statutory stakeholders - there was a feeling that the benefits of foster care would become undone when young people moved to direct provision settings. However, for many young people it may be the case that the benefits of family care stand to them in the longer term, by building their resilience and providing them with additional support, thus enabling them to cope better with the direct provision environment. Further research is needed in order to seek the views of young people who have had positive experiences of family placements and who then move to direct provision accommodation.

It was evident that further improvements in the delivery of care to separated young people can certainly be made. In particular, there is a need for more foster carers and supported lodgings carers to be recruited so that there is a 'pool' of carers available, hence resulting in more placement choices, better matching and a greater ability to meet the diverse range of needs that separated young people have, including their cultural needs. Relevant stakeholders need to work collaboratively to achieve this. In particular, if young people are to continue to live in Dublin-based residential care, upon arrival, there needs to be more emphasis placed on the recruitment of a diverse group of carers in the greater Dublin area. Doing so will mean that the crucial connections that young people make at

the beginning can be maintained and developed, thus providing the young people with more support and a greater sense of continuity.

However, overall, what is most important is that separated young people are provided with individualised care. For some, foster care might be best, for others, supported lodgings, and for others, various forms of residential care. There was evidence that the TSCSA was attempting to provide this sense of individualised care. However, the established practice is to place young people aged 12 and over in residential care upon arrival. There is a need to further examine this practice - including seeking the views of young people who have made the transition from residential care to family care. Practitioners need to consider all options at the point of arrival and ultimately to make decisions, at all times, that are deemed to be in the best interests of the child. It may be the case that short-term foster care would better meet the needs of some separated young people when they first arrive. However, this requires a pool of short-term carers to be readily available and for these carers to be highly trained so that they can meet the complex needs of young people who have just arrived, in circumstances where little is known about their histories.

Indeed, all carers need to attend intensive and ongoing training. Sellick (2006) emphasises the importance of support for foster carers and suggests that good support and supervision is likely to result in carers feeling satisfied and staying on in their role. However, general foster care training is not sufficient. Instead the training needs to focus specifically on the needs of separated young people. Within this training, carers need to be facilitated to develop their own sense of cultural awareness so that they can respond to the

ethnic and cultural needs of separated young people in a proactive and constructive manner. In light of the findings that separated young people face particular challenges coping with the asylum process, with the uncertainty surrounding their futures, and with the move to direct provision, family carers need to be facilitated to respond to these issues, in conjunction with their social workers. Indeed, from the point of arrival social workers need to begin considering the issues of permanence and long term planning and carers need to be included in this process.

Unsurprisingly, over the past 15 years, in a context where service providers were focused on advocating for the closure of the hostels and for better services for separated young people, the positive aspects of hostel provision were generally not highlighted. Most significantly, it was evident from the interviews with stakeholders and young people alike that the hostels provided a huge element of peer support to their residents, something that was also identified by the CRA in its 2011 report card (CRA, 2011). In the hostel environment, young people gleaned comfort from the fact that they were living with others who were sharing somewhat similar circumstances. While the negative aspects of hostel provision certainly outweighed the positives, these positive elements need to be kept in mind as services continue to develop. In particular, some young people might benefit from a system of peer support, either on a formal or informal basis. This system could operate hand-in-hand with a support system for carers of separated young people. Continued social work support for foster carers is crucial and it needs to be available on a 24-hour basis. While peer support for carers may also be beneficial, agencies must ensure that the confidentiality of the young people is maintained.

Recommendations

- Continued concerted efforts need to be made by the HSE and by private agencies to recruit a diverse 'pool' of foster carers and supported lodgings carers. All stakeholders need to work together to adopt a strategic plan in this regard. Consideration needs to be given to whether it would be beneficial to focus these efforts in the greater Dublin area as this could allow separated young people to more easily maintain the networks they establish during their initial months in residential care.
- Ensure that all carers - foster carers and supported lodgings carers - are provided with intensive pre-placement training on meeting the specific needs of separated young people. Continue to offer on-going training, on a regular basis, particularly in relation to providing culturally competent care. Comprehensive 24-hour support also needs to be available to all carers.
- Ensure that all placements, whether foster care or supported lodgings, are subject to HIQA inspections.
- Upon arrival, place separated young people in the placement that most meets their needs. Recruit specialist foster carers who could provide initial short term care for separated children in circumstances where this is deemed to be in the best interest of the child. This would provide an alternative to placements in residential care, could result in a smoother transition to longer term foster carers and would also provide an important resource that would safeguard potential victims of trafficking (Horgan et al., 2012).
- Only place children outside of the greater Dublin area when a local social worker has been allocated

the case and when a suitable school place has been found.

- The expertise of the TSCSA and of NGOs who have worked with separated young people since they began arriving needs to be harnessed and utilised by local social work teams and by local services. The services should collaborate to create a resource pack that could be distributed nationally.
- The HSE and NGOs should collaborate to consider establishing peer support networks for separated young people.
- Ensure that separated young people are aware of the procedures whereby they can make a complaint against service providers, including their carers. This is particularly important given the finding that some of these young people seem disempowered by virtue of their status as asylum seekers and by virtue of the fear of deportation in the future.
- Where individuals or organisations have concerns about the care or services being provided to separated children, these concerns need to be formally communicated to the HSE. This should be done in line with the HSE's complaints procedures and in line with the Children First guidelines and following consultation with the young person/people in question.
- Ensure that carers and social workers have a thorough understanding of the asylum process and that they are trained to respond to the young people's needs in this regard and to know when and where to seek legal advice.
- Ensure that care planning continues to take into account the various potential outcomes in relation to the refugee determination process.
- Develop further links with organisations in the young people's countries of origin so that young people can be supported by these organisations if they are deported or if they return home voluntarily. Young people need to be prepared for possible deportation and also be made aware at the earliest possible stage, of voluntary return options.
- Develop agreements between authorities in the UK and authorities in the Republic of Ireland so that children who have come to Ireland can be reunited quickly with family members in the UK.
- Develop agreements between authorities in the Republic of Ireland and authorities in Northern Ireland to ensure that young people living in border counties are not excluded from travelling to Northern Ireland.
- Ensure that young people and their carers know how to apply for travel documents that would allow them to travel abroad on holidays.
- In the short-term, ensure that young people are adequately prepared for leaving care, particularly in circumstances where they are moving to direct provision centres. Specialist after-care providers and the HSE should work together and share their mutual expertise to ensure that separated young people are provided with appropriate preparation for leaving care and with appropriate after-care services.
- Where young people are leaving their foster care or supported lodgings placements at the age of 18, ensure that the carers are facilitated to continue to support the young people, if they wish to do so and if the young people want this continued support. For example, such carers should continue to be able to access the support of fostering social workers and

should also be linked in with relevant NGOs.

- While positive working relationships exist between many of the agencies working with separated children, further efforts need to be made to improve these relationships. It was evident throughout the study that, at times, there was a considerable lack of trust between the HSE and NGO's and between the RIA and NGOs. The importance of effective interagency cooperation and of working in partnership has been highlighted in numerous reports and inquiries. Building trust between these agencies is key if the best interests of separated children are to be met.
- Conduct research to compare the rates of placement breakdowns among separated children in foster care / supported lodgings with the rates among children in the general population.
- Conduct research in relation to outcomes for separated young people who have left the care of the HSE.

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