

CONSULTATION RESPONSE: 'MOVING ON' FROM CARE INTO ADULTHOOD

This paper was submitted in October 2024 in response to the Scottish Government's consultation '[Moving on' from care into adulthood](#). The consultation response is informed by focus groups with staff teams as well as conversations with care experienced young people directly.

OVERARCHING THEMES

1 Planning and preparation for moving on from care into adulthood

1. How can we ensure that young people, and those who support them, are given enough time, advice and resources to effectively prepare them for moving on from care?

Cyrenians is an organisation dedicated to tackling the causes and consequences of homelessness – by taking a public health approach to preventing homelessness – and several of our projects work directly with young people and adults with experience of care.

Projects that have been involved in shaping this response include: residential communities that provide accommodation for young people aged 16 and over who are statutorily homeless, with residents often moving on from care into the communities; our residential community for unaccompanied asylum seeking young people aged 16-18; our Keeping Families Together project that provides whole family support for young people in secure care and their families, and several services supporting adults affected by severe and multiple disadvantages, many of whom are care experienced.

Before we detail the themes that came out of the consultation, we would like to make clear how these findings also feed into other Scottish Government priorities, namely around homelessness prevention. The Housing (Scotland) Bill, currently at stage 1 in Parliament, includes proposals for new homelessness prevention duties and starting prevention work at an earlier stage which – if implemented and resourced properly – could go a long way to improve the outcomes for young people moving on from care.

Choice and overlapping support:

For the young people we spoke to, all residents or former residents at our communities, choice (or lack of choice) was a vital part of their experience of moving on from care. Some young people shared that they had felt supported to make an informed decision, their social worker took them to visit different places and listened to what they wanted.

Others were supported by their carers to understand what the next steps would be and what their options were:

"I felt mentally prepared. My carers sat down and explained what would need to happen next about moving on. It was good coming from them because they understood me and could explain it in a way that I understood."

Having choice also helped find a place that suited their needs which made the transition a more positive experience. Visits were highlighted as an important way for young people to get a better sense of their options, and they emphasised that they needed to see the place they are moving to more than once to make sure it's right for them. As one person said: "When you leave care there's no option to go back so you really need to make the right choice."

The importance of visits was also highlighted by staff who work in Cyrenians' residential communities. Having a staged process of transition, led by the young person, leads to a more positive experience, for example where the young person is able to first join for a dinner and stay overnight before making a decision and moving in.

Social work payments for overlapping support would make it easier to support staged transitions i.e. where a young person has a bed in one of our residential communities for up to six weeks while still living in their previous placement, for example a residential care unit. While it costs money now, it saves money in the future by investing in the young person and giving them the best chance of succeeding. It would be helpful to have a more consistent approach to this across local authorities and social work departments.

We are seeing examples of how The Promise is driving change within some local authorities enabling a couple of months of preparation, asking for weekly meetings and engaging with the young person and their family to make sure it's the right decision for them. Unfortunately, this is still more the exception than the norm and young people are not always offered a longer transition period with overlap due to funding constraints from social work (see more below). Transitions are make and break for many young people, and if the transition fails there is a risk of undoing a lot of good work and ultimately costing more in the long-term.

Early preparation:

A recommendation to support early preparation could be to set up specialist transitions teams that young people would be linked in with before they turn 16, who could take a proactive and preventative approach to 'moving on' and focus on options for the future. Importantly, this would happen early, while young people are in a safe space, and not compelled to make snap decisions, but allowed time and space to carefully consider their options. This could also reframe how we think about transitions, i.e. not as something scary, but rather an exciting opportunity. The focus should be on early intervention,

including social and community activities and partnerships with the third sector. It should concentrate on what needs to happen for a particular young person to thrive.

Ways of working:

In Scotland, we have great policies and frameworks such as GIRFEC, SHANARII and The Promise that underline the importance of including children and young people in decisions about their care. However, this is not resourced sufficiently, and professionals are not always sufficiently trained, so this is not always done meaningfully. Children's Panels are an improvement but can still be intimidating for children and young people. There needs to be a focus on creating welcoming environments and time taken to involve children and young people, along with families, guardians and carers.

Additionally, all frontline staff should receive training in trauma informed practice, neurodiversity, children's rights, and services should be able to use CRWIAs as a tool to recognise when children's rights are breached. This should also help support a shift from young people being seen as disruptive to being seen as distressed. More broadly, there should be a constant focus on attachment theory and the importance of consistency to make sure young people have at least one person with whom they have a relationship, e.g. a named social worker, who is a constant throughout their care experience.

2. Are there any barriers to starting the process of planning and preparing for young people leaving care at an early stage?

At Cyrenians, we have a wealth of experience working in a trauma informed way, however statutory systems are often not trauma informed and are not always set up to make person-centred decisions. Through workshops and training we've carried out with professionals, we have heard how they feel that they are made to make "systems decisions", based on risk aversion, rather than person-centred decisions based on the needs of the person. Training alone is not adequate to combat this, as professionals are restricted to working within systems and logics that are often not always flexible enough.

Our experience is that the success of transitions is often dependent on individual social workers – some are more proactive, and some local authorities have more robust processes in place around early planning and preparation. There is also a lack of consistency in social workers where young people don't have one named social worker, or they are changed when the young person re-locates, even within the same local authority (e.g. between different localities in Edinburgh). This means that the social worker doesn't have time to build a relationship and get to know the person.

As mentioned previously, social work tends to be reluctant to fund transition periods or overlaps of support and will usually only start paying for a placement at our residential communities once the young person moves in. This makes it harder to prepare and makes the transition more disjointed.

From the perspective of young people we support, they have had very different experiences with their transition, with some having no choice in their move and no explanation from their carer or social worker. Some shared how they didn't feel ready to move on and others talked about being placed far away from their support system: "I was told there was only one place available and it was far away from where I had been living". There is a danger that this reinforces negative previous experiences of moving through different placements in the care system without any choice and control, as one young person said: "I just move when I get moved, I'm used to getting moved in care."

Therefore, a big barrier that needs to be tackled is how young people are involved in decisions and given time to adjust to their new situation. Several people shared that what would have made the biggest difference for them would be "having a choice", "given more options" and "helping young people understand what it means in normal words".

2 Accessing information, services and support

3. How can we ensure young people receive the right support and guidance to build the life skills they need for adulthood before they move on from care?

Care experienced young people often need time and patience to rebuild trust if they feel let down by people and statutory services in the past. The best way to ensure they get the right support is by not imposing arbitrary timelines or limits on support. Young people shared with us that they appreciate consistent support that allows them to return to a service they trust, e.g. a third sector service, a residential unit or a community-based group, if they are struggling. Even when settled and living independently, it can feel pressurised and it's important that young people are able to contact or return to places that have felt safe in the past. We believe this should be reflected in funding and commissioning agreements.

The young people we spoke to also shared that more preparation for "actually having to be an adult" would have been helpful. This could include practical skills but also how to turn those skills into habits to make sure it sticks if you're having a hard time and feeling overwhelmed once you live by yourself.

4. What services and support should be considered and provided to a care leaver who returns home to live with their birth family?

At Cyrenians, we provide mediation and support to families as part of our early intervention services to prevent youth homelessness (see Question 5 for more details). Based on what we have learned from young people and families, we believe they would benefit from access to mediation, therapy or counselling, and support to attend local community groups that will allow all family members to have meaningful and safe spaces to go to outside of the home.

We believe it's important to provide support not only for the young people but for the whole family and make sure they are involved and informed throughout. Otherwise, there is a risk that the young person's support networks are alienated which makes the return to their birth family more complicated.

Families with children in secure care have shared with us that they often feel like communications get cut when their kids enter secure care. Even if families are supportive of the placement to begin with, they get anxious when they don't get regular updates. This legitimate concern can then come across as aggressive which might be reported to the Children's Panel and reflect badly on the birth parent(s). Cyrenians' mediators and support workers help advocate for children, young people and their families and make sure the voice of families are part of any considerations.

5. Can you provide examples of good practice where services have worked together in a holistic way to support birth families and young people moving on from care when the young person returns to live with their birth family?

Cyrenians' Keeping Families Together project provides whole family support and mediation to young people in secure care across Scotland and their families. Each family is allocated a mediator, who supports the family to communicate and restore relationships, and a family support worker who works in a person-centred way to address other needs in the household, e.g. income maximisation through benefits or employment, housing, mental health and wellbeing and community connections. This combination of support has proven successful for working with young people leaving secure care as well as young people at risk of homelessness due to a breakdown in family relationships.

Transitioning from 24-hour care to independent living is a big step for both the child and the family, and there is a risk that issues that caused the child to be in secure care can resurface and impact on relationships. Whole family support is therefore vital at these transition points. Scotland is currently in a housing crisis and supporting young people to return to their families – if that's what they want – is a key part of addressing this and their risk of youth homelessness.

It is an advantage for our early intervention work to have access to families and being able to listen to and learn from them. Young people and families are the only ones experiencing the whole journey through the system – professionals and agencies such as social workers and care staff only come in at specific times to solve specific problems.

For families, it can be a distressing and unsettling time, and the project offers support for restoring relationships to make sure they feel prepared when their child moves back in. We also help attending meetings with social work and Children's Panels as this can be distressful for parents as well as for children. There is often a feeling of being judged and lacking power and it helps to have someone to advocate for the whole family.

6. How do we ensure that young people with care experience, and those who provide them with care, can easily access information about entitlements and support?

Young people are not always aware of the rights and entitlements for people with care experience, and this is not always communicated at the point of leaving care. Having a personalised booklet that sets out rights, entitlements and expectations in plain language should therefore be available for young people and their families. An example is the Secure Care Pathway document which is very operational, and something similar could be rolled out for other types of care.

3 Continuing care

7. Are there any changes you would like to see as part of the eligibility criteria for Continuing Care?

Not applicable.

8. What additional support do you think is required for families, professionals and practitioners who are responsible for providing Continuing Care arrangements?

Not applicable.

9. How do we ensure that young people, and their views, are heard during discussions on Continuing Care which impact them?

Not applicable.

4 Aftercare

10. How can we make sure young people can access the range of support they need when they leave care through the provision of Aftercare?

In our experience, provision of throughcare and aftercare across local authorities is very inconsistent. Some places provide driving lessons, furniture etc. whereas others don't, which leads to a postcode lottery for young people. At the age of 26, young people are often still figuring out what to do with their future, and it feels too young to cut off statutory support – at least when there are few alternatives for care experienced adults above the age of 26.

Among some of the young people we support there is a reluctance to access both throughcare and aftercare because it's led by social work. This is a serious problem because, despite being their safety net until age 26, they see it as part of 'the system'. To combat this, throughcare and aftercare should be provided in close collaboration with third sector and community groups who have trusted relationships with young people.

Moreover, the onus is predominantly on the young person to ask for support (and knowing what is available to them). We believe a more proactive, holistic and assertive approach would make a difference by letting young people know that support is available until they're 26, who to contact and by checking in every month. For young people who are rough sleeping it is even harder to engage with throughcare and aftercare as they struggle to make use of an appointment-based system. For this group in particular, a more outreach focused service model would be suitable.

11. Are there any changes you would like to see as part of the eligibility criteria for Aftercare?

Not applicable.

12. What do you think the challenges would be in changing the eligibility criteria for Aftercare?

Not applicable.

5 Lifelong care

13. What do you think would be the best way to provide long term support and services to adults with care experience?

Many of our services support adults and older people who are care experienced and affected by homelessness, addiction, mental health issues and involvement in the criminal justice system. They unanimously agreed that the best way to provide support to this group is through provision of long-term relationship-based support with no arbitrary time limits to attempt to rebuild the trust in people and services that has been broken. This is often made more difficult with short-term funding streams.

Adults with care experience should also have access to trauma support, mental health treatment and counselling to help them recover from their experiences. Unfortunately, these services are difficult to access and are often only a short-term solution.

Finally, 'care passports' – or something similar – would be a helpful way for people to share information without having to retell their story and relive trauma every time they try to access a new service. This could be a way of streamlining support and care for people and make sure they can access the support they are entitled to.

14. What do you think the challenges would be in providing support and services to adults with care experience?

There are generations of adults with care system experience who suffered neglect and abuse while "in care" " with no support to cope with this – or with the situations that caused them to be placed in care in the first place.

People who we meet through our services for adults experiencing homelessness, living with addiction or leaving prison will often have lived through a compilation of traumatic experiences, including being in care. The lack of trusted adults throughout their childhood has caused deep mistrust of services, and they struggle to accept or engage with support.

Psychologically, people need many years to heal from abuse. Older people may have been living with trauma for decades and likely need the same amount of time to recover. However, this goes beyond most service models that often have to adhere to strict timescales or funding constraints, e.g. six months of support or a limited number of counselling sessions. This makes it challenging to help people in a short amount of time and might leave them feeling rejected, reinforcing distrust in services and 'the system'.

Our staff teams shared concerns about the time available to support people versus the complexity of the cases. The third sector often supports people with complex trauma and mental health needs who find it almost impossible to access treatment and counselling. Or if people get a handful of counselling sessions it's just enough to bring everything up to the surface but not to help them manage that long-term, as one staff member put it: "Enough time to break all the eggs without getting anywhere close to making the omelette".

At Cyrenians, we try our best to stretch out services and offer open-ended support where people can return or re-engage based on their needs, however it's still tricky to navigate funders and commissioners' expectations and time constraints of when people should be moving on from support. This is all adding barriers and complexity to successfully supporting adults with care experience.

There is often an element of generational care experience where adults who went through the care system become parents and then have their own children removed or are at risk of losing their children. For people experiencing homelessness and living in temporary accommodation, they might be met with further barriers to maintain a relationship with their children due to rules around visits or (un)suitability of their temporary accommodation.

SUPPORT FOR SPECIFIC GROUPS OF PEOPLE LEAVING CARE

6 Support for young people leaving secure care

15. What improvements do you think could be made to the support given to those leaving secure accommodation?

As mentioned, Cyrenians provides support to young people in care and their families. This section is informed by conversations with our family support workers and mediators and touches upon some of the previous themes, focusing specifically for young people leaving secure care.

Improving planning and preparation:

Referrals to the Keeping Families Together service should ideally be made at an earlier stage, e.g. when the child or young person is first placed in secure care. Often, we are brought in closer to the point of transition, which gives us less time to work with the young person and the family to prepare for their return.

And going even further upstream, mediation and support would ideally be offered at the stage where the Children's Panel is first discussing different options and placements. Being able to support families at this stage could even mean that a placement in secure care could be avoided.

In our experience of supporting young people leaving secure care, transitions work best when communication is good and timely between different agencies involved and the family to keep the trust that has been built over time. An example of good practice is mediation and support being offered to a young person who still has about six months to go before returning to their family and when the relationship with their parent(s) is still good. Even if the young person is doing well in the secure care unit there is a risk that conflict can resume on return to birth family, so having something in place to prevent that is really important. This prevention work can involve talking about what home life looks like, manage expectations and making sure everyone is on the same page.

There is also a need for a more joined up and consistent approach across agencies and professionals. While each case is unique and should be treated as such, it would be helpful to develop some common standards by way of mutual support rather than criticism. Through our work, we're seeing a lot of inconsistency in how care is provided which means young people have to adapt to different approaches if they move between different secure care units. Early preparation in secure care is usually dependent on individual staff members rather than strong processes and protocols. Through commissioning, a set of standards could be set, for example around training, making sure that everyone working in secure care is trained in trauma informed practice, ACES, neurodiversity etc.

It would be helpful to give everyone the same knowledge and learning together to ensure everyone is on the same page.

To make sure young people and families are informed the whole way, documents should be designed with inclusivity in mind with accessibility being the default and not a request. This could for example include QR codes for audible videos with sign language and/or description text, written in their native language, and pictures to accompany text. As per question 6, a personalised booklet with clear, concise language without acronyms should be created for each young person to highlight key stages and support networks. This should be adapted with each case, so that the young person and their parent/guardian/carer are given the opportunity to discuss their expectations and what they think is needed for a successful transition out of care.

Barriers to early intervention:

The main barriers to early intervention are staffing and communication. In our work with young people and families, we're seeing a lot of inconsistent communication between social work, secure care units, families and Children's Panels, not only when communicating with families and young people but also between different agencies. Professionals often only know their own part of the overall system.

In terms of staffing, capacity and financing, statutory services are simply not funded to do the job we think they should be doing. There is also a lack of trust between young people/families and statutory support and systems. Families don't want to admit that they need support, e.g. with their housing situation, as they are afraid of repercussions. Mostly, the trust is with the third sector and community-based support groups. Parents feel blamed and don't seek help until things have escalated resulting in the young person or child going into care. Parents have shared with us that if they ask for help earlier, for example when their child is in school, they are either turned away or blamed for the situation. This creates a loss of faith in the system. Cyrenians' staff often operate as the 'bridge' between families and statutory services and try to mediate and restore relationships, not only between the young person and the family but also with services such as social work, housing etc.

Some staff members reflected on how police are doing a lot of work to change their identity and rebuild trust with communities, and that this work might be needed among other statutory services, e.g. social work, to restore faith in the long-term. This could help make sure young people engage with the safety net provided by throughcare and aftercare, and encourage families to come forward earlier if they are struggling and need support, thereby supporting a more preventative approach.

16. How do we ensure all young people in Scotland get equal access to the support services they need during the transition from and after leaving secure accommodation?

Please see section 4 on Aftercare for some recommendations that also apply to young people leaving secure care.

In terms of early intervention and providing support further upstream, we believe there are a lot of missed opportunities for preventative work with children and families before they enter secure care. For example, intensive support is needed in early year services to support early attachment issues. From then on, school settings are ideal places to spot problems before they escalate. We mostly work with young people when they are 14 and above, but often families will tell us that things started to get difficult several years ago, however issues weren't picked up or listened to at primary school age. Secure care unit placements are costly and money could be saved overall if we funded prevention rather than crisis.

Children in P6-P7 they are often told they are disruptive and causing trouble which then travels with them to high school and they're placed in lower sets and putting them at a disadvantage, or in some cases even expelled.

Instead of punishing distressed children, it would be useful if neurodiversity screenings were available at this stage to help professionals and families understand the child, and help the child understand themselves. We get thorough reports from secure care units on how to communicate with young people and triggers and preferences. For example, some of the young people we support have trouble with emotional regulation and distress, and in the past, this has been seen as violent behaviour. However, they now thrive in secure care in a smaller classroom. If this understanding and support had been available earlier a lot of disruption to that young person's life could have been avoided.

7 Support for young people leaving young offenders institutions and prisons

17. What improvements could be made to the support given to people with care experience at the transition point from leaving young offenders institutions or prison?

Prior to people being liberated, it's important for them to build a connection with services that are going to support them after their release. Based on learning from Cyrenians' services in Falkirk working with people leaving prison, we have found that building a connection prior to release is vital. From then on, an action plan can be created with small achievable goals, ensuring that the individual's priorities are captured and not just ticking a box.

18. How do we ensure all young people get access to the same support services when they are leaving young offenders institutions or prison, regardless of where they are located in Scotland?

To ensure all people with care experience leaving prison – whether young people or adults – get access to support services, we would recommend linking people in with specialised services before they leave prison or young offenders institutions. This could for example involve setting up external support pathways and giving the person a 'pathway journal'

with access to support that each individual would benefit from.

Some examples of good practice supporting people leaving prison, including people with care experience, are Cyrenians' QUEST navigation service and Justice Outreach service in Falkirk. QUEST has good links with the Prison Job Coaches who refer into our service, allowing the job coach to focus on the employment side of things and our QUEST navigator can support the person to access other services, volunteering opportunities and training, whilst building up a trusted relationship with them. The focus is also on removing barriers to employment by completing disclosure workshops with them – looking at their skills set and what they could offer a future employer and seeing the person and not the offence first.

Similarly, our Justice Outreach service supports those who have been recently liberated back into the community, who have been serving long term sentences. Focus is on integrating them back into society and creating a 'personal daily routine' as many are institutionalised. Focus on health and wellbeing has become very important, e.g. attending fitness sessions with our justice worker, as this not only helps people's physical and mental health, but it also gives them a sense of normality.

8 Support for unaccompanied asylum seeking young people leaving care

19. Can you share details of any services that are already working well to support unaccompanied asylum seeking young people transitioning out of care?

Cyrenians provides direct support to asylum-seeking young people aged 16-18 through a team of skilled key workers and accommodation in a shared flat with other young people. Within the community we have a wellbeing hub where we offer a range of services including mental health support, wellbeing workshops and access to training and education programs.

We make sure that young people can still contact us and come back to meet new residents when they move on, e.g. if they move into their own independent flat, as we recognise the need for support networks for this specific group. We make sure there is continuous care, although the immigration system is not set up properly to support carefully planned transitions (see more details below).

20. What supports and/or improvements do you think could be implemented to ensure we meet the particular needs of unaccompanied asylum seeking young people transitioning out of care in Scotland?

This section is informed by our staff team who supports asylum-seeking young people and touches upon some of the previous themes and how they relate to this group specifically.

Planning and preparation:

In our experience, unaccompanied asylum seekers don't seem to get LAC reviews or other processes for care transitions. There is a need for procedures that let the young person know what will happen at different stages and policies around what is an effective move on. There is need for good communication to young people and their support workers that explains the situation, e.g. if they have been placed in a young person's placement, in the young person's first language. These processes need to be youth led where young people have the opportunity to think about it and view the place they are moving to, to make it seem less scary

The Promise needs to be respected, but currently asylum-seeking young people have very little say or involvement in their care, and transitions happen abruptly with very little warning. Cyrenians' team has had to fight for young people to be given at least 14 days to consider a decision, but sometimes this is cut down to 12 days due to a weekend.

Similarly to our previous recommendation, having an overlap between placements would be beneficial to allow young people to prepare, especially when they have no support networks, parents or connections in Scotland. Being able to stay for an extended period of time in the residential community after they have received their leave to remain would be beneficial, and ideally for them to stay in the area where they have already settled. We work with the local authority to listen to the needs of young people, for example to be placed near a bus route and near their connections – good practice and learning is happening, however financial constraints impact what is possible in practice.

Translation of information can be difficult, especially with inaccessible legal language. Ideally, there should be advocates available that can translate and help young people understand their options – this is definitely a gap in service provision for young unaccompanied asylum-seekers.

Barriers to early planning:

The immigration system is not set up to support early planning. Leave to remain decisions can come with no notice, demanding that young people move on quickly with no time to consider their options or plan.

The number of presentations has increased which can push social work to make decisions that are not meeting the needs of young people. Some social workers have specific knowledge of the immigration system and services which is extremely beneficial, however this expertise is not consistent across the board, and high turnover of staff can mean loss of specific skills in this area.

Support and guidance:

We work with a great housing development worker in the local authority, employed by throughcare, who is good at taking the time to work with staff and young people alike.

It helps to have an allocated person to do this. They are good at explaining the bidding process to both staff and young people, and they have all the knowledge to answer questions, and help them understand the system.

The experience of young people engaging in education has generally been really positive. Some young residents are enrolled in high school and others in college. Both have been very caring and they link in with and communicate well with support services. We can see a big positive difference in the young people who attend school and college and it has helped what is a difficult transition for them.

Similarly, the team has worked positively with throughcare nurses around specific healthcare needs. They listened to staff and the young person and helped translate what was needed. It was a challenging situation but was made manageable due to their help.

Quite a few of the young people who stay with us are neurodivergent, although often undiagnosed and sometimes dismissed by doctors. They therefore have neurodiverse needs but are not always aware of what this means, and it can be challenging to explain it with different cultural knowledge and contexts.

Accessing information, services and entitlements:

As mentioned previously, more robust processes and guidelines could help manage expectations and ensure young people have knowledge of the landscape in their own language. Translation is essential and needs to be prioritised.

We would recommend that young people receive a resource pack when they first meet their social worker of all the resources available and with information about service provision around their local area.

A challenge is that the young people will often comply because they are scared and want to please. We have had a young person attend a meeting at the jobcentre where they didn't have a translator, and they simply agreed without understanding what they were saying yes to.

For young people it is a minefield to challenge their rights, and it can be very difficult for them to do this due to fear of being reported. They are 16-18 year olds who are fighting for survival and having to deal with the fallout of their own experience and trauma – they are resilient, but this can mean that they fall through the gaps as they are less likely to have their rights upheld, and also less likely to challenge decisions.

Continuing care and aftercare:

In practice, asylum seeking minors don't get as much support when they leave care. They tend to contact our team instead of their throughcare worker as they have built that relationship with staff. We also regularly experience that young people are moved on to

adult social work support and are not properly assessed for throughcare or aftercare.

The moment young people get leave to remain it tends to be more focused on immigration and less on the need for social work support. Young people tell us that they don't get active support, and they would appreciate more follow-up support after having moved on.

One of the biggest challenges to young people is the risk of re-trafficking and cuckooing. When young people move on, they are vulnerable and easily identifiable. This is a specific group of young people who don't always have their voices heard and are unfamiliar with the Scottish system, therefore, statutory support needs to be more proactive and connected. There is a risk of the system re-traumatising young people and making them feel the same lack of control as when they were trafficked.

Having one allocated person overseeing the transition and continual ongoing assessments would be beneficial. The vulnerability of young people is still there after they move, and there should be continuing support from the place where they have built the best relationship, focusing on building supportive communities with informal drop-ins and connections with cultural and faith groups. Throughcare workers are not always able to do this due to high caseloads but that continuous support is much needed.

9 Support for disabled young people leaving care

21. Can you tell us about any specific services or supports that already work well for disabled young people or people with complex health needs leaving care?

In recent years we are supporting more young people with learning disabilities, neurodiversity and complex health needs in our residential communities for young people who are statutorily homeless. The complexity of what our residents are going through is growing but budgets are tighter than ever. There seems to be a gap in service provision around supported housing specifically for young people with learning disabilities, autism and ADHD – a more specialised residential community would be ideal to meet their needs.

22. What improvements do you think could be made to ensure disabled young people leaving care have the support they need when they make the transition into adulthood?

We are struggling to find suitable move on options for this group of young people who still need some element of supported housing and might struggle to live independently (see more under section 14 on housing). There is sometimes a lack of long-term planning from statutory services, e.g. social work or health and social care, in terms of considering next steps and the journey of that young person when they move on from Cyrenians' communities. Ideally, the time they spend in the communities would be used to find suitable, permanent alternatives.

For young people with complex health needs and learning disabilities a main area of concern is their lack of sexual health and relationship education. Some of the young people we support might not have the capacity expected of their age but they find themselves involved in sexual interactions through social media and the internet. Relationships are one of the main themes in individual key work with young people, and we try to work with them individually to understand consent and boundaries. However, this should ideally happen at an earlier stage, for example as part of a dedicated transitions support team.

A young person with a learning disability shared that they would really appreciate seeing pictures of what things look like and where they will be moving to in advance. For example, seeing pictures of staff members, the building etc. can help them familiarise themselves with the new setting. Otherwise, they will be reluctant to move because they don't know the people and the place.

10 Support for people leaving care who are parents

23. What improvements can you suggest in the support provided to young people with care experience as they prepare to give birth or become parents?

Not applicable.

24. How can the workforce be better supported to help care experienced people as they become parents?

Not applicable.

25. How can children's and adults' services better work together to provide whole family support for parents who are care experienced?

Not applicable,

FORMS OF SUPPORT FOR CARE LEAVERS MOVING INTO ADULTHOOD

11 Peer support and maintaining lifelong links

26. In what ways would you like to see peer support used by people leaving care and/or caregivers during a young person's transition from care into adulthood?

Not applicable.

27. Do you know of any examples where peer support networks have had a positive impact on the experience of leaving care, either for care leavers or those who supported them?

Not applicable.

28. How can we better enable young people and the supportive adults in their lives to maintain healthy relationships once the young person has moved on from care?

Not applicable.

12 Out-of-hours services providing support and advice

29. What types of support and advice do you think should be available to care leavers as part of an out-of-hours service?

Not applicable.

13 Health and wellbeing

30. What improvements do you think could be made to ensure care leavers have access to services which support their physical health, and mental health and wellbeing?

Not applicable.

31. What improvements do you think could be made to ensure a smooth transition is made between children and adult physical health services, mental health services and wellbeing services?

We have supported young people in our residential communities who have lost access to prescriptions when they moved from children's services to adult services. This should not happen, and there is a need for health and social work services to communicate with each other and ensure that prescription access is transferred and maintained.

When we receive referrals from mental health services into our residential communities it seems that planning is very sparse and communication around medication and health needs is often insufficient. These cases are higher risk but seem to have less planning

involved than when young people are moving from a young person's residential unit or a children's home.

A young person shared that they would appreciate support with things like registering for a GP and advocating for themselves in health settings after moving on from care. They struggle with speaking up for themselves when it comes to mental health and trauma, and having someone to support with this would make a big difference to avoid being dismissed as "a wee bit of anxiety". The young person aptly described what it feels like moving on from children to adult health services: "I have trauma but it just seems like now I'm an 'adult', everything I went through up till 16 doesn't count and it's now all on me to sort it out".

14 Housing

32. Please tell us about any good practice you are aware of that supports young people leaving care to find a home that meets their needs.

As mentioned previously, Edinburgh employs a housing development worker funded by throughcare with a focus on preventing youth homelessness. They are great with the young people; they visit the communities in person to explain different options and nurture one-to-one relationships. They have a very supportive approach and understand different needs, for example if some young people are not ready to live by themselves. Having that person-centred approach that is focused on people rather than numbers is huge.

We have seen successful transitions when we have managed to advocate for a long transition period (e.g. between six weeks to a couple of months), allowing the young person to settle in their new home and support them to link in with services ahead of moving.

33. What do you think are the main barriers in securing appropriate housing for a young person with care experience?

Different local authorities will have different housing systems and often they don't work together or understand each other's systems. This makes it more complicated for young people to understand and navigate these systems.

It is difficult to find suitable move on accommodation for the young people we support, especially for young people with additional needs such as learning disabilities, and there is a gap in service provision for this group. The lack of good move on options makes young people even more reluctant to leave the communities which means that less spaces are opening up.

Another issue is young people being told they are getting a place, e.g. supported housing, and being brought to see it by their social worker but then it has fallen through due to funding not being secured in advance.

Visiting support services are getting cut and deemed non-essential, although it is a vital preventative service. Often support just stops once young people move on. One of the young people we support previously moved into a flat with some housing support, but the support was minimal – 3 hours a week – and inflexible:

“The times of the support was right after college and between saying bye to my friends and bus times I was often late for my support, but if I was 15 minutes late they would leave. I didn't want to leave college early, I was in the middle of exams”.

In the end, they had to return to Cyrenians' community as the independent tenancy with no support wasn't working.

Another barrier, which is less about finding housing and more about keeping a tenancy and living well, is around boundaries and risk of cuckooing. For many young people who have grown up in shared housing and residential units as part of their care experience it can be difficult to know when to invite someone in, especially if they are feeling lonely and isolated. This should be built into any form of transition planning and young people should have a trusted adult to talk to if they are experiencing any problems with strangers trying to access their new home.

34. How can we ensure there is sufficient support, planning and preparation provided to care leavers moving into their own accommodation for the first time?

Not applicable.

35. What forms of support do you think would help someone leaving care and entering their first tenancy to stay in that property for as long as they want to?

Some young people might not want to live on their own right away, especially if they have additional support needs. A cluster model of flats or homes with staff nearby would be a helpful stepping stone, especially if it was focused on young people. This would be particularly beneficial for some neurodivergent young people and young people with learning disabilities.

As mentioned, for young people who do get their own tenancy, long-term, personalised visiting support is vital. From the perspective of Cyrenians' residential communities, and other similar services, having an outreach approach for when residents leave to extend their support, would be beneficial. This could potentially be funded through aftercare. While this is currently not within the scope of the service, young people are always welcome to contact us if they need a chat – we have phone calls and visits weekly from ex-residents who need to see a friendly face or ask a trusted adult a question.

Sometimes this is about small things that are going wrong or something in their flat that's not working and can be solved relatively easily, however if these frustrations build up and people have nowhere to go this can cause a lot of frustration and anxiety and put their tenancy at risk.

Some previous residents are also involved with our youth participation work and now use their own experience to influence change for other care experienced young people. This has been very beneficial to them and helped build their confidence and made the transition out of the residential community feel less daunting.

36. How can we ensure the views and needs of people leaving care are taken into account when decisions are made about where they should live when they leave care?

Taking a person-centred approach, listening to the needs of the individual young person, and allowing them choice in their housing options is essential. As mentioned previously, allowing enough time to plan and prepare properly as well as funding overlaps between support/placements/new tenancies will go a long way to make young people feel involved in the decision.

15 Further and Higher education

37. In what areas would you like to see improvements to the service, support and funding for students who are care experienced?

Not applicable.

38. How can we better support care experienced students to complete their studies?

Not applicable.

16 Employment

39. What would help young people with care experience find secure and fulfilling work, develop their skills or build their confidence?

Not applicable.

40. Can you share any examples of good practice, in the private and public sector, where young people leaving care have been supported into employment or training, or have been supported to build their confidence?

Not applicable.

41. How do you think employers can be better supported or encouraged to recruit, train, support and retain young people who are care experienced?

Not applicable.