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The Importance of Relationship in Independent Advocacy for Care-Experienced Young People

Hilary Jenkinson

School of Applied Social Studies, University College Cork, Cork, Ireland

Correspondence: Hilary Jenkinson (hj@ucc.ie)

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ABSTRACT

Independent advocacy services for children and young people with care experience aim to connect with, empower and facilitate service users to have their voices heard and address issues of importance and concern to them. This paper gives an account of a review of independent advocacy services for those with care experience in Ireland, with a particular focus on the views and experiences of young adults and advocates. The article highlights how supportive relationships emerge as a strong priority for those engaged in the advocacy process and proceeds to explore the findings of this study in light of relevant national and international literature and research. In view of the research findings and the strong focus on relationships and support that unfold, a model of advocacy is proposed which places relationships at its heart, serving to provide an effective and essential foundation from which other key elements of independent advocacy such as voice, participation and empowerment are enabled. Such a model will, it is proposed, enhance the experience and heighten the impact of advocacy interventions for young people and the advocacy professionals that work with them.

1 | Introduction

Within the social professions, advocacy is an important concept, and according to the Health and Information and Quality Authority, it is about 'supporting and empowering people to communicate their will and preference, secure their human rights, or represent their interests' (HIQA 2023, 7). Macadam et al. identify a number of types of advocacy within the social care sector. These include self-advocacy, where support is provided to individuals to advocate on their own behalf; peer advocacy, which entails advocacy provided by those with similar lived experience to the people they are supporting; volunteer advocacy, which is conducted on a voluntary basis by trained volunteers; non-instructed advocacy, which occurs in situations where the individual is unable, perhaps due to illness, disability, or cognitive decline to communicate their wishes; and independent/professional advocacy, which involves a partnership between a paid, professional advocate and an individual seeking advocacy support (Macadam et al. 2013, 5). The focus of this paper is advocacy with those who are care-experienced and falls within the remit of professional, independent advocacy. In this context, advocacy has been defined as being about 'representing the views, wishes and needs of children and young people to professionals making decisions about their lives, and helping them to navigate the system, especially in times of transition' (Department for Education 2022, 5).

Independent advocacy for care-experienced children and young people seeks to engage with those requiring their services around issues of concern as identified by them. There are many dimensions to this work including upholding and promoting rights, articulating and communicating wishes, representing those wishes where required, elevating the voice of young people, empowering children and young people to advance and resolve issues of concern, and supporting them through these processes.

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This paper arises out of an in-depth, nation-wide review of independent advocacy services for care-experienced children, young people, and young adults, undertaken in respect of the services provided by EPIC (Empowering People in Care) in the Republic of Ireland. The study entailed eliciting the views of those using the service as well as those responsible for its provision. The research also garnered the experiences and perspectives of key stakeholders in relation to independent advocacy. The study sought to review the service in light of national and international research in conjunction with the experiences, views, and priorities communicated by those involved in the service, with a view to developing a model of independent advocacy that would inform the future direction and focus of the service. As the research progressed, the theme of supportive relationships came into clear focus as it was identified by both young service users and advocates as the most valued and important dimension of advocacy that enabled and fuelled other key aspects of advocacy practice.

This paper will begin by discussing the development of and rationale for independent advocacy with care-experienced young people. It will proceed to provide a background and context to care-experienced youth in Ireland and the provision of independent advocacy to this cohort. The origins and development of EPIC (Empowering People in Care) will be charted, including the genesis of this research study. The research methodology employed in the study will then be outlined. The paper will proceed to discuss the main findings of the research with a particular focus on the importance of a supportive relationship, which emerged as a most significant theme in the study. Finally, the article will propose a model of advocacy that has relationship at its centre and will argue that this approach is not only personally beneficial to young people but also facilitates and optimises other key dimensions of advocacy.

2 | Independent Advocacy—Setting the Context

There are times in life when many of us require the assistance of a trusted individual to advocate for us or to communicate on our behalf when we are unable to do so. Often those who fulfil that advocacy role come from our family or social networks. However, it is not uncommon for those who have grown up in care not to have these natural networks to draw from. Care-experienced individuals have not only encountered the difficult life circumstances that precipitated their entry into state care but also find themselves in a care system that can be described as being under pressure, under-resourced, and lacking much-needed personnel. Corbett and Coulter describe it as a 'system under strain' and assert that despite the dedication of many professionals working within it, it is failing some of our most vulnerable children and families' (Corbett and Coulter 2024, 86, 89). According to Tierney, many of these children and young people find themselves in a system in which they feel lost without an effective voice or sense of agency in their own lives (Tierney et al. 2018). Isn't it all the more important that these young people are supported to communicate their wishes and have their voices heard?

Morgan articulates this succinctly when he asks:

> Shouldn't a caring and civilised society consistently ensure that those who are vulnerable and without other means of support are able to live safely and are not harmed on account of their vulnerability. Shouldn't we guarantee that they benefit from a comforting and practical presence, from someone who can advocate effectively on their behalf?
>
> (Morgan 2017, 2)

Independent advocacy specifically for children and young people in care is particularly well developed in the United Kingdom and in Ireland and less so in other European and western countries (McDowall 2016). Services in the UK and Ireland are at the forefront of providing independent advocacy for young people in care/with care experience where the focus is on facilitating young people to participate and have their voices heard. The earliest organisations in this sector originated in the UK in the late seventies/early eighties and included Coram Voice in England and Who Cares Scotland. The motivation behind such developments was to give children and young people a voice in relation to decisions around their care and matters affecting them. Since then, legislation (such as the Children Act 1989) and policy changes have strengthened and underpinned the development of services in this sector.

Over the past 40 years in the UK, multiple organisations have been involved in the provision of independent advocacy services for care-experienced people. According to Wood (2017), this has resulted in a wide variation and inconsistency in the provision of such services. Thomas et al. highlight the challenges this poses in terms of measuring outcomes and impacts of interventions but nevertheless identify issue resolution, young people being listened to and enabled to have a voice, and personal growth as being key dimensions of effective advocacy (Thomas et al. 2017).

3 | Care-Experienced Youth and Independent Advocacy in Ireland

The State body responsible for the protection and welfare of children in Ireland is Tusla, The Child and Family Agency. It is also responsible for the provision of care for children who are unable to reside at home and require alternative care, as well as the support of those who have left care until the age of 21 (or 23 if they are enrolled in education). In 2024, Ireland had 5759 children in care (Tusla 2024a) and 2915 young persons/adults in receipt of aftercare services (Tusla 2024b). In total, Tusla services were responsible for 8674 children and young people through the provision of alternative care and aftercare services.

In the past decade, the number of children in alternative care in Ireland has decreased slightly. In 2021, there were 5951 children in care, which represents a 6% decrease from the figure in 2015 (Tusla 2021). The current figure of 5759 demonstrates a further decrease. However, it should be noted that within the care population, there has been an increase (61%) in the number of children being admitted to residential care and a decrease (11%) in those in foster care (Tusla 2021).

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All children are entitled to 'express their views, feelings, and wishes in all matters affecting them, and to have their views considered and taken seriously' under Article 12 of the United Nations Convention of the Rights of the Child (1989), which was ratified by Ireland in 1992. This is particularly relevant to care-experienced children and adolescents, as the State is responsible for making decisions about their care and the subsequent circumstances of their lives, including their residence, education, and contact with their family and siblings. In Irish legislation, the Child Care Act (1991) and the Child Care (Amendment) Act (2022) further establish the right of children and young people to have a voice and influence in decisions that impact them throughout their care journey. The State's commitment to operationalising this is detailed in the Child and Family Agency's (Tusla) *Child and Youth Participation Strategy 2019–2023*. This policy asserts that the views of a child or young person are considered whenever a decision is made that directly affects them, either individually or collectively (Tusla 2019, 5).

Independent advocacy plays a crucial role in enabling individuals in care and care leavers to understand their rights, ensuring their perspectives are acknowledged and allowing them to engage in and impact decisions that affect their lives.

Empowering People in Care (EPIC) is a national organisation that works with and for children and young people who are currently living in state care or who have experience of living in care. EPIC also works with young people preparing to leave care, in aftercare services, and with young adults with care experience up to the age of 26 years. EPIC (then called IAYPIC) was established in 1999 through the efforts of social work practitioners and care-experienced young people (EPIC 2021). This was primarily out of a concern that the voices and wishes of young people in care should be heard and taken into account when decisions are being made regarding their care. The work of EPIC has three strands: Independent Advocacy, Youth Participation and Engagement, and Research and Policy.

In Ireland, EPIC is the only organisation providing a direct 1:1 independent advocacy service to children and young people in the care of the State or in aftercare services. This is different from the UK, where numerous agencies are contracted to provide independent advocacy services to this cohort. The aim of EPIC's National Advocacy Service is to 'enable children in care and young people with care experience to have their views and concerns heard and taken seriously. It works to empower them to speak for themselves, resolve issues and challenges they experience, and to help them obtain the supports and services they require during their childhood and transition to adulthood' (EPIC 2024, 9).

Today, EPIC employs nine Advocacy Officers and two Advocacy Service Managers across the Republic of Ireland, who in 2023 worked with 581 children and young people across 869 advocacy cases (EPIC 2024). The types of cases are multifaceted, from helping young people know and understand their rights to offering practical support by collaborating with other professionals to achieve the best outcomes. In some cases, advocates attended Child in Care reviews or court proceedings (EPIC 2024). EPIC's core funding comes from the Child and Family Agency, Tusla. Advocacy Officers in EPIC have a variety of professional backgrounds, including social work, social care, and youth and community work.

An external review of EPIC's strategic plan in 2016 (Rush 2016) highlighted the key role of the organisation in elevating the voice of care-experienced young people both locally and nationally. It also recommended an expansion of the advocacy team and emphasised that all young people in care should know about EPIC. Since then the advocacy team has grown from eight to eleven and has opened additional regional offices. In 2024, as EPIC approached its 25th anniversary, the organisation was eager to specifically review its provision of independent advocacy services to children in care and young care leavers and thus this research project came into being.

4 | The Research Process

The research methodology employed in this project was qualitative in nature and used a number of methods to explore and gather data regarding participants' experiences and views in relation to advocacy. Methods used include interviews, questionnaires, and focus groups. Decisions around which methods to use with research participants were made in conjunction with them and took into account what would be most suitable in terms of the data to be gathered and convenience for participants.

The aim of the research was to review EPIC's provision of independent advocacy services to children in care and young care-leavers in light of national and international best practice in the provision of direct advocacy to care-experienced youth. In addition to conducting a literature review, primary research was carried out between July and November 2024 with four groups: young care-experienced adults, aged between 18 and 25, who are or have been service users of the EPIC National Advocacy service ($n = 11$); Advocates employed by EPIC in their National Advocacy service ($n = 10$); EPIC's management team with responsibility for the delivery of services ($n = 6$); and key stakeholders in the field of advocacy service provision ($n = 17$). Recruitment of research participants was carried out in consultation with the management and advocacy teams in EPIC. All management staff and advocacy team members were invited to participate via an online questionnaire conducted via MS Forms. It was considered that this would give them the opportunity to reflect on the questions asked and complete the survey at a time and pace suitable to them. All members of the advocacy and management teams completed the survey, giving a 100% response rate for these groups. The young adult cohort was invited to participate in the research by the advocacy team. Invitations to participate were made to care-experienced young people taking into account gender, age, ethnicity, and geographical location in order to achieve a cross section of experiences. Fourteen young adults were invited to participate and 11 chose to do so; of these, eight were female and three were male and ranged from 18 to 25 years in age. They took part in one-to-one online interviews which were between 20 and 45 min duration. Consultation with advocates and the EPIC Youth Council indicated that this would be the preferred method of data collection for the young adult cohort. Care was taken to ensure all research materials (information, consent form, interview questions) were relatable for this group, and

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EPIC's Youth Council were consulted and advised on this. In addition, all young adults were offered additional engagement with EPIC support personnel who were on hand for the duration of the interviews if participants felt they would benefit from this.

The stakeholders who took part in the research were from three distinct groups. These were invited on the basis of their involvement and experience of independent advocacy and/or relationship with EPIC. The first cohort was organisations that provide equivalent advocacy services to young people with care experience. Two such organisations within the British Isles region each took part in focus group interviews ($n = 10$). The second group consisted of staff ($n = 5$) from an advocacy organisation in Ireland that provides advocacy to adults within a different sector. The third stakeholder cohort consisted of senior management personnel in Tusla and comprised of two individual online interviews.

The research question schedule for the young adult cohort included the following:

Could you tell me a little bit about what your advocate does for you?

What have been the benefits of advocacy for you?

What would you consider to be the best aspect of advocacy/what do you value most?

Why would a child or young person need an advocate when they have a social worker/aftercare worker and maybe also a GAL (Guardian Ad Litem)?

Were there/are there any aspects of EPIC Advocacy that you are not happy with?

In what ways do you feel the EPIC Advocacy service could be improved or even better?

If you had a magic wand and could change one thing about advocacy in EPIC, what would it be?

The question schedule in the advocate survey covered similar themes and included:

What would you consider to be the key elements of advocacy when working with children and young people in care/with care experience?

Which of these elements would you consider the most important?

What are the main challenges facing the advocacy service in your view?

What do you consider the strengths of the EPIC advocacy service?

What would you consider are the weaknesses/areas that could be improved in the EPIC advocacy service?

If you had a magic wand and could change one thing about advocacy in EPIC, what would it be?

All those involved were provided with information regarding the project and consent was explained to and granted by each participant.

All interviews and focus groups were recorded and transcribed, and the survey responses from the advocates and management groups were each combined and collated. The data gained from each cohort was analysed using thematic analysis (Braun and Clarke 2021). The researcher familiarised themselves with the content of the data and then coded the material, identifying common concepts and patterns emerging. Colour coding of transcript text was employed in order to identify common threads and topics. From this process, themes were developed, and the data re-examined to ensure relevance and accuracy. The themes which arose in this process were further analysed in light of key findings in the literature review regarding effective practice in this field.

This paper will draw primarily from the data gathered in consultation with the young adult and advocate cohorts, as it was from these groups in particular that the importance of relationship came into focus as a significant theme arising in the research data.

Permission to conduct this research was sought and granted by both the Tusla Research Ethics Committee and the Social Research Ethics Committee in University College Cork. Particular consideration was given to ensuring the safety and well-being of the young adult participants by emphasising the voluntary nature of their involvement, assuring them that their participation or non-participation would have no impact on services received from EPIC or Tusla, and the provision of additional support during and after their interview if they wished to avail of it.

The research was not formally funded but was undertaken *pro bono* by the author, a university academic granted sabbatical research leave, and was completed within a one-year period.

This is a small-scale qualitative research project subject to the limitations of a single researcher and relatively small sample sizes in each of the cohorts. The small sample size impacts the generalisability of the findings and rather reflects the experiences and opinions of the individuals interviewed and surveyed. However, a considerable volume and depth of data were collected due to the generous, considered, and enthusiastic contributions of participants.

5 | Research Findings

A key focus of this research was to explore with participants the various elements they considered as being part of the advocacy process, and out of these, which aspects of advocacy were most important in their view. This was in order to gain an insight into the priorities for each group in terms of advocacy provision. Participants were also asked what was unique about advocacy compared to the other professionals involved in young people's

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lives. It was in the responses to these questions that the theme of support and relationships arose particularly strongly. Questions asked were in an open-ended format, so the responses were not prompted in any way.

5.1 | Young People's Priorities

The young adults interviewed were asked what element of advocacy was the most important or that they valued most. Their responses to this fell into two categories. Nearly two-thirds of the young adults interviewed ($n = 7$) identified support as the dimension of advocacy they valued most. Just over a third of the group ($n = 4$) specified the knowledge or expertise of the advocate as the most important element of advocacy. Hence, we can see that the support experienced by young service users in their engagement with their advocate is a hugely significant aspect of the process.

When articulating the importance of support, the young adults spoke about this mainly in terms of emotional support in the context of a trusted relationship, and it also included practical support.

It is a common experience for care-experienced young people to find themselves with a dearth of adults in their lives who are there for them and who they can rely on to be in their corner. Many of the young adults interviewed referred to the fact that they don't have family networks of support that other young people would have: 'for people in care it's like even bigger. I feel like a lot of people in care/aftercare already don't have family around them'.

Referring to the fact that other young people have the support of their families but they don't have these natural networks, the young adults in this study highlighted that having an advocate who is just there for them was invaluable. One young woman talked about how good it was to have someone in her corner, especially during the time she was a young teenager and had a lot of troubles; having an impartial adult there just for her was really important.

Another young person spoke about the advocate fulfilling the role of a support system he didn't have:

> It's just that support network that I think maybe for other children will be fulfilled through family, whereas I think the EPIC advocate fulfils that support function as well, which I think is very important because I think what it did was it gave me the space and the energy to keep moving forward, especially with my education, whereas I really do feel if I didn't have the advocate I would have burned myself out.

We can see from this young adult's experience, having someone who is there to share the load facilitated him to get on with other important dimensions of his life. Having someone dependable to help them understand and navigate their care journey and thus lightening the burden on them as young people arose frequently in the young adult interviews. Ultimately, as articulated by one young woman, 'The most important thing is the support...whenever there's anything that comes up, it's not as heavy on me'.

The young adults identified the teenage years and the transition to adulthood as being a particularly challenging period, especially when they were in the care or having left the care system. Having their advocate as a consistent, dependable adult was, and continues to be, really important—'I don't know how I would have survived without advocacy work... Having my advocate was so amazing'. Another young woman spoke about her teenage years being particularly tumultuous—'a really difficult time and she (my advocate) was there to stand in the middle. It was looking like just so crazy and she was in the middle to still support me'. Some highlighted the importance of the non-judgemental nature of the advocacy relationship: 'my advocate in particular, he respects me for who I am and never judges me in any way'. As well as being accepted and not judged, the young people valued being listened to, one stating that an advocate 'is always there to listen to you' and that is 'really good'. Overall the research data reflect the pivotal role of the advocate who is a steady, consistent professional, supporting, listening to and advocating for the young people, even (and especially) when life seems 'crazy'.

The issues that young people identified their advocates helping them with ranged from supporting them at their review meetings, network meetings, accompanying them to court, advising them on accessing their files, and advocating on their behalf with other professionals. However, within that practical support, the emotional support was very significant for them. As one young woman put it: 'just to be there, to emotionally secure you'.

Another feature of the young adults' feedback was that they appreciated being able to link in with their advocate when specific issues arose for them and they needed support. Three young adults said that they had met their advocate when they were younger but didn't have a need for advocacy at that point. However, when issues arose at a later stage, they got back in touch to access support. For one, it was when she became pregnant and another when he was seeking his files through Freedom of Information.

In addition to being able to access the support of their advocate when particular issues arose, the young adults also expressed how they valued their advocates 'checking in' with them, highlighting that they wouldn't have parents or a family network doing that for them. This could be periodically or at particular times like exam results/college offers, a significant medical appointment, or the period after receiving one's files. One young woman highlighted how she appreciated her advocate checking in with her the week college offers were made. She didn't get an offer she was hoping for: 'I didn't call anyone obviously because that's embarrassing, but (my advocate) called me and was like, did you get your course? And I was like, oh, no, I didn't. And then I was able to tell her the problem.'

This young woman may not have made contact with her advocate as she was embarrassed at not receiving the university offer she was hoping for. However, the advocate, having an awareness of what was going on for this young person and checking in,

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meant they could share the disappointment and figure out a way forward together.

Another young person articulated the value of their advocate checking in:

> That would be the biggest thing, especially for somebody who's been in care and who might not have somebody to reach out to, having somebody there to go through the things with you and also for after for a check in. Like for the Freedom of Information, I could have done that on my own, but it would be better to have (my advocate) there to check in when I do get my files you know that everything was OK and to talk through things.

This young person emphasises the significance of their advocate's support not only around the process of obtaining their files but also checking in afterwards to support them process what their files revealed.

Another young woman spoke about becoming unwell and spending time in hospital. As a result, she was unable to continue her education, which resulted in her loss of aftercare support, including accommodation. This was a very challenging time for her, and she found herself in homeless services. 'It's like they just throw me out and they're like, yeah, now you do it yourself – this shocked me a lot'. While she was in hospital, her advocate visited her, which was hugely significant to her as a gesture of support and compassion in a time when she felt entirely isolated and 'cut adrift'.

Within the young adult interview data, the long-term nature of the relationship with EPIC advocates arose as being significant. Some interviewees had reconnected with their advocate/the advocacy service intermittently as the need arose over the years. Others expressed the reassurance that their advocate would be there for them on an ongoing basis: 'I really appreciate everything he's helped me with and will probably help me with down the line if I'm stuck again.' A couple of respondents contrasted their experience with their social workers and advocacy, highlighting the consistent, available, and long-term nature of advocacy. One person referenced having had two different advocates, but there was still that sense of consistency in the service being provided.

5.2 | Advocates' Priorities

The importance of support and relationship was not only highly valued by the young adults interviewed; this theme was also identified as a key priority for the advocates.

In response to being asked what is the most important dimension of advocacy, the 10 advocates' responses were more varied. Between them, they identified four dimensions of advocacy that were considered most important. One person cited independence, and another identified empowerment as being the priority. Two of the advocates said empowerment would be the most important. However, it is striking that responses citing relationship as the most important element of advocacy are by far the most frequent, with 6 advocates (60%) identifying this as the priority. They expressed this in terms of the centrality of relationship building, caring, listening, having respect for the young person, and not being judgemental.

The advocates expressed the primary importance of building relationships with young people as 'it will be difficult for the young person or child to speak openly with the advocate if they do not feel comfortable with them'. There was a strong sense that the relationship dimension of advocacy was the foundation on which the other elements of the advocacy process depended and 'if you don't establish it the young person will not purposefully engage in the process'.

What does this important foundation look like? One advocate articulates what is involved in building effective relationships with young people:

> Being non-judgemental, reliable and having strong relationship building skills. Advocates work with some of the most vulnerable people in the country and it is extremely important to be able to connect with them. Being empathetic helps with this and allows advocates to have a better understanding of what the young person may be feeling. Many of these young people have been let down by adults in their life and being reliable is an important trait to have so you can build trust and rapport.

This reflects themes arising in the young adult data where they valued reliability, not being judged and having a strong connection with an adult they trust, who understands and supports them through their care journey and the challenges they encounter.

This focus on the centrality of relationship also arose in the stakeholder data. During a focus group conducted with a staff group of an Irish advocacy service in a different sector, one member passionately articulated the pivotal role relationship plays in their work:

> Relationship is the absolute epicentre and fundamental aspect of the basis of any good advocacy work. It can't happen without this... you can't provide good advocacy and not have a relationship established of trust, of understanding how the person communicates, understanding the context in which things are happening for them, and that takes time. That's very precious to advocacy—having adequate time to develop relationships.

Views expressed by advocates in this study and in other studies demonstrate that relationship building is at the centre of meaningful and effective advocacy practice. Building relationships with young people takes time, care and investment thus providing a crucial and essential platform of trust and connection,

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facilitating a strong working relationship in the context of advocacy.

6 | Discussion

6.1 | The Importance of Supportive Relationships Within Advocacy

The data in our research depicts young people whose experience has been that of being subject to very challenging life circumstances, navigating the often turbulent territory of adolescence in the context of a care system ill-equipped to meet their needs. There is a strong sense that these young adults have felt alone in their journeys through these difficult terrains. This contrasts with most other young people in their stage of life, who often live with and are supported by their parents well into their third decade (Palmer et al. 2022). We have seen that for the young people in our research, their relationship with and the support they receive from their advocate has been immensely important to them. This sentiment is reflected in other research studies exploring the experiences of care-experienced young people. Young people in Barnes' study articulated that their relationship with their advocacy worker was of key importance to them (Barnes 2007). This finding is echoed by young people interviewed in Quinn et al.'s (2017) research who emphasised the importance of support both during and after leaving care; in particular this study identifies that, 'emotional supports and a relationship with a supportive adult are key' (Quinn et al. 2017, 152). In Thomas et al.'s study exploring independent advocacy outcomes, young people reported that whilst achieving their desired outcome was important to them, even more than that, they valued the relationship with their advocate irrespective of the achievement of desired change (Thomas et al. 2017).

It is important to consider the nature of the advocacy relationship valued by care-experienced young people. As reflected in our data, qualities of reliability and trustworthiness are valued highly by young people in other studies (Barnes 2012; Boylan and Ing 2005). Similarly, being listened to and heard features as being very important to young people, particularly when often their experiences are of not being listened to (Tierney et al. 2018; Boylan and Ing 2005; Jones 2023). Listening was also identified as a key and important outcome by young people in Thomas et al.'s study (Thomas et al. 2017), a sentiment echoed by Barnes who found young people 'particularly valued workers who were friendly, who treated them with respect and listening was key' (Barnes 2012, 1279).

The young adults in our study referred very positively to the expressions of care they experienced from advocates, whether that was by checking in with them, visiting them in hospital or just the warmth and respect they experienced in the relationship. The issue of 'checking in' arises in research conducted by a Tusla Advisory Group of care leavers who expressed that they wished workers would check in with them more frequently rather than young people needing to be the ones to make contact (Tusla Advisory Group (TAG) 2021). Barne's study also bring into focus the value young people placed on feeling cared for by professionals. The participants in her research appreciated the caring relationship they experienced with professional adults, in particular their advocates, and gave examples of workers remembering birthdays and other significant events (Barnes 2007, 2012).

The consistent and long-term nature of their relationships with their advocates was highlighted by our young adult participants, some of whom had known their advocate since childhood and had connected with them periodically as the need arose. This corresponds with findings from other studies highlighting the importance of relationships being enduring and long-term (Quinn et al. 2017; Boylan and Ing 2005). The enduring nature of the relationship between the young person and the advocate was notably valued by the young people interviewed in Boylan and Ing's research. In their study, young individuals who had encountered advocacy on a temporary basis or limited to a specific issue or problem communicated that while they appreciated the advocate's input and expertise, they would value more highly a supportive ongoing relationship over a limited intervention (Boylan and Ing 2005, 8). This is further reflected in a recent review of children's social care in England by the Department for Education, which, in addition to emphasising the importance of independent advocacy, advises that services designed to assist children in care and care leavers should be modified to facilitate the building of long-term rather than temporary relationships (Department for Education 2022).

The advocates in our study placed a high value on the relationships they have with the children and young people they work with. Advocacy workers interviewed in Barnes' study also communicated that relationship is at the centre of their practice, with many advocates saying that 'positive relationships with the young people were the most important element of their work' (Barnes 2012, 1283). They also stressed how important it is to be available, dependable, and not let young people down. This perspective is supported by Pascoe's research, with one participant stating, 'relationship is at the core of all of it; otherwise you are just throwing things, you are using tools that, without the relationship first, they just don't work' (Pascoe 2024, 12).

These studies, as well as the findings of this research, bring into focus the significance of support and a trusting relationship in advocacy practice with young people who are care experienced; in particular, a relationship that is caring, consistent, and enduring.

6.2 | A Case for Relationship-Based Advocacy

It is apparent from our research findings that the connected themes of relationship and support are key priorities when it comes to identifying what is most important to those directly receiving and providing advocacy services. Upon reviewing other research which examines independent advocacy for those with care experience, we can see these sentiments echoed across studies. It is particularly poignant that young people themselves are highlighting this so strongly, and McColgan and McMullin remind us that 'Service users'...perspectives on the services they receive should be considered fundamental to service delivery' (McColgan and McMullin 2017, 25). Overall, the findings point to a model of advocacy that acknowledges the centrality of a supportive relationship between the advocate and young person in the advocacy process. A model that has relationship at its heart

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is informed by rights and maintains a focus on progressing issues of importance to children and young people in care and with care experience.

The case for advocacy with relationships at its core is strong. To experience positive, constructive relationships not only provides the basis for effective practice, but according to Ruch (2018), has a therapeutic impact on the individual and constitutes an intervention in its own right. To engage in relationships characterised by support, trust, and honesty can be a vehicle for change in a young person's life, leading to an increased capacity to manage challenges and develop agency. McMullin (2017) echoes this view and asserts that experiencing such professional relationships can be especially important for young people who often have multiple experiences of damaged and broken relationships and being let down by adults. Having the opportunity to engage with an adult who is reliable, supportive, and consistent has the knock-on effect of developing a young person's confidence, increasing their self-efficacy, and improving their capacity to build other adult relationships (McMullin 2017). Winter (2015) develops this further and asserts that developing stable, nurturing relationships with professional adults plays a key role in helping care-experienced young people process and come to terms with their difficult and often traumatic life journeys; thus, a positive relationship assists the young person in the process of reconstructing and comprehending their experiences and incorporating this into building trusting connections with others.

Whilst the therapeutic, self-development, and relational impacts of building constructive and trusting connections are important and valuable, the advocacy process is one with a further focus and professional purpose, incorporating key dimensions of practice such as empowerment, elevating the voice of young people, and facilitating their participation in matters and decisions concerning them. Advocacy practice with relationship at its core provides an effective platform from which the other dimensions of advocacy can be built. For a young person to feel safe enough to voice their concerns and seek the support of an advocate to help them progress their issues of concern, they need to establish a connection of trust where the young person feels confident in the advocate's intentions and support for them. According to McIlven et al. (2017), strong relationships serve as a prerequisite for facilitating meaningful participation and empowerment and, in Henry et al.'s view, establish the conditions for young people to 'own the outcome of their own destiny' (Henry et al. 2010, 38). Todd asserts that the probability of achieving successful, enduring change 'is promoted by the availability of a helping relationship' (Todd 2017, 98), change which, according to McIlven et al., can be 'positive' and 'far reaching' when underpinned by a trusting relationship (McIlven et al. 2017, 131).

The significance of relationship and its impact on children and young people, including it being a core enabling factor in the other key elements of advocacy, points to a model that has this as a central element. This model is visually represented in Figure 1 and can be summarised as: relationship-based independent advocacy rooted in rights and facilitating voice, participation and empowerment.

As discussed earlier in this paper, children's rights and associated legislation provide the rationale for independent advocacy

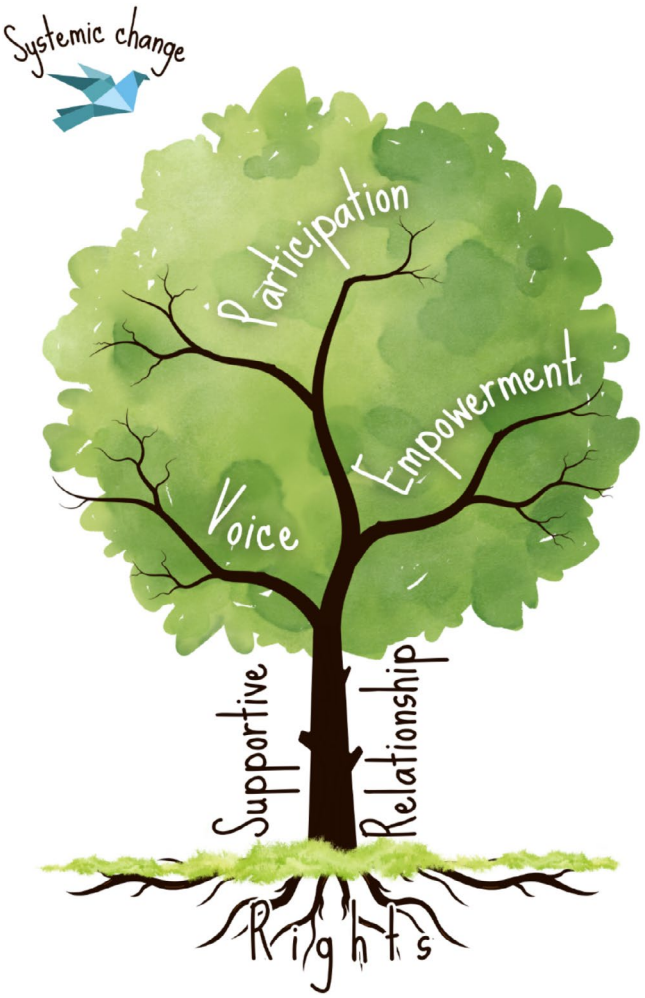


FIGURE 1 | Relationship-based advocacy model. [Colour figure can be viewed at wileyonlinelibrary.com]

in this sector, and the roots of the tree reflect this. The trunk of the tree represents the supportive relationship at the heart of advocacy and is the centrepiece that enables and supports the branches of voice, participation, and empowerment. In this model, a strong trunk or relationship makes the other dimensions of independent advocacy possible and optimises their efficacy. Systemic change is also impacted by the advocacy process (a theme arising in the overall research but not a focus or within the remit of this paper).

A model of advocacy that places a supportive relationship at its centre will, in this author's view, enhance the experience and heighten the impact of advocacy interventions for young people and the advocacy professionals that work with them.

7 | Conclusion

This paper provides an account of the insights gained in a research project exploring independent advocacy with care-experienced young people in Ireland. The connected themes of support and relationship arose within the research as very significant elements of advocacy, particularly from the perspectives of the young adults and advocates who participated in the study. The paper outlined and discussed the findings of

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the study, highlighting the importance of reliable, supportive, caring, and enduring relationships between young people and professionals in this sector. The paper concludes by making a case for a relationship-based model of advocacy. Advocacy with relationship at its core not only honours what young people are telling us is of prime importance to them but also provides a framework for effective, impactful advocacy which facilitates their voices and wishes being heard, contributes to their development and self-efficacy, and increased sense of agency.

It is hoped that this study and discussion will contribute to a more defined focus on relationship-based practice within this sector, placing support and relationship at the heart of independent advocacy services for care-experienced children and young people.

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Ethics Statement

Permission to conduct this research was sought and granted by both the Tusla Research Ethics Committee in Ireland and the Social Research Ethics Committee in University College Cork in Ireland.

Conflicts of Interest

The author declares no conflicts of interest.

Data Availability Statement

The data that support the findings of this study are available on request from the corresponding author. The data are not publicly available due to privacy or ethical restrictions.

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