Better Outcomes for Children: Are we there yet?

Special Conference Issue
# Table of Contents

7  Capturing the Learning: Ten years of Learning from the Prevention and Early Intervention Initiative  
   Sarah Rochford, Stella Owens, Nuala Doherty and Ciaran O'Donnell

15  Supporting Perinatal Mental Health through Yoga, Infant Massage and a Parenting Programme in an Inner City Community Based Action Research Initiative  
    Lorna Kerin

23  Working in Partnership to Improve Outcomes for Children  
    Pauline Mc Clenaghan

29  The Role of the Parent Child Home Programme in Supporting Better Outcomes in Education and Learning  
    Gráinne Kent, Josephine Bleach and Beth Fagan

36  Enhancing Quality Practice to Enhance Early Learning Strengthening Foundations of Learning (SFL)  
    Noirin Hayes, Sandra O’Neill, Triona Rooney and Emma Byrne-MacNamee

43  Where are we going? Looking for a Road Map in Supporting Literacy Development for Children With Autism  
    Carol Ann O’Sioráin

49  Reflecting on the Lived Experiences of Blind/Vision Impaired People with a Focus on Improved Long-term Educational Outcomes  
    Patricia Mc Carthy

55  ‘We are all like a family here’: Qualitative insights on the role of youth cafés in supporting the health and well-being of young people  
    Bernadine Brady, Lisa Moran and Cormac Forkan

61  Children and Young People’s Participation in their Everyday Lives: Evidence Based Policy  
    Deirdre Horgan, Catherine Forde and Shirley Martin
Editorial

In this fourth issue of the Children’s Research Digest we are delighted to present a special conference edition on the theme of Better Outcomes for Children - Are we there yet? The Conference drew on the national strategies for children in Ireland - Better Outcomes, Brighter Futures (DCYA, 2014) and in Northern Ireland - Our Children and Young People – Our Pledge (OFMDFM, 2006) and posed the question of where we stood on this journey in the realisation of better outcomes for children across a range of domains. Outcomes for children were discussed in various thematic areas, and presenters were also encouraged to reflect on and further investigate the concept of ‘outcomes’ as a framework for mapping changes and improvements in children’s lives. Presenters from workshops across various thematic areas were invited to submit articles based on their presentations, culminating in this special issue.

The first article is a comprehensive overview of the outcomes of the Prevention and Early Intervention Initiative (PEII), in which Rochford, Owens, Doherty and O’Donnell highlight key findings from the Capturing the Learning Series produced by the Centre for Effective Services. The findings invite presenters to discuss their experiences and the benefits of evidence-based parenting supports for children’s outcomes in a range of areas including cognitive, socio-emotional and language development. Continuing the theme of parents as early educators who impact children’s outcomes directly, Kent, Bleach and Hagan report on evidence in support of the Parent Child Home Programme (PCHP) which is a parenting programme that has been delivered by the Early Learning Initiative in Dublin’s Docklands since 2007. The authors report on international evidence and internal and external evaluations of the PCHP which provide support for the programme’s effectiveness in promoting responsive parenting and literacy activities at home.

Moving to the pivotal role of quality formal early educational experiences in children’s outcomes, Hayes, O’Neill, Rooney and Byrne-MacNamee present initial findings from the Strengthening Foundations of Learning programme. In their article they highlight the mechanisms necessary for improving quality in early years’ settings through changing educators’ practice and enhancing reflective practice. In this way, children’s outcomes, especially those from disadvantaged areas are positively impacted. Pauline McCleneghan also highlights parents as a major protective factor in early childhood and the importance of providing parental educational supports to optimise responsive parenting in the early years. In her report of a randomised controlled trial of the Growing Child programme as delivered in the Republic of Ireland and Northern Ireland, McCleneghan highlights the benefits of evidence-based parenting supports for children’s outcomes in a range of areas including cognitive, socio-emotional and language development. Continuing the theme of parents as early educators who impact children’s outcomes directly, Kent, Bleach and Hagan report on evidence in support of the Parent Child Home Programme (PCHP) which is a parenting programme that has been delivered by the Early Learning Initiative in Dublin’s Docklands since 2007. The authors report on international evidence and internal and external evaluations of the PCHP which provide support for the programme’s effectiveness in promoting responsive parenting and literacy activities at home.

McCarthy is one of three researchers in this issue to highlight the importance of ensuring children and young people’s voices are heard in research. Brady, Moran and Forkan continue this work in relation to exploring the perspectives of adolescents and their experiences of Youth Cafés as a means of supporting health and wellbeing. Their findings support the implementation of Youth Cafés as a means of improving mental health outcomes for young people, reporting that adolescents found the cafés an important way of connecting to their community, helping them stay safe and providing them with support and opportunities for personal...
development. The final article in this issue (Horgan, Forde and Martin, 2016) presents findings from a study of children’s decision making in their own lives, commissioned to inform the development of the National Strategy on Children and Young People’s Participation in Decision-Making 2015-2020. Adopting a child participatory qualitative approach to gaining the perspectives of children and young people, the authors found that participants felt they had a voice at home but that this was much more limited in formal educational settings. This lack of consultation was also felt in community settings with the exception of young people who were highly involved in community projects. Interestingly, their research supports that of Brady et al, also in this issue with regard to the need for spaces such as Youth Cafés that provide opportunities for children and young people to engage with their communities and develop personal skills.

We would like to thank all of the authors who submitted their research for this special edition. It is especially heartening to see the range of environments which have been investigated by the authors of this issue as significant sources of influence on children’s outcomes – home environment, early educators and other formal schooling settings, and youth projects. The consideration given to ensuring the voice of children and young people are heard throughout this research also shines bright in this issue.

Special thanks are also due to all the reviewers who took the time to carefully review the articles and make suggestions for improvement. The editors would also like to thank those who assisted with proof reading and Leanne Willars for providing the graphic design and layout. We are especially grateful for the financial support from the Department of Children and Youth Affairs for the printing of this issue.

Dr. Sinead Mc Nally
(Guest Editor, National College of Ireland)

Dr. Louise Kinlen,
( Editor, Children’s Research Network for Ireland and Northern Ireland)

References


Office of the First Minister and Deputy First Minister (2006) Our Children and Young People – Our Pledge: A 10 Year Strategy for Children and Young People in Northern Ireland, Belfast: OFMDFM.
Capturing the Learning: Ten years of Learning from the Prevention and Early Intervention Initiative

Sarah Rochford, Stella Owens, Nuala Doherty and Ciaran O’Donnell

Background

For more than a decade the Atlantic Philanthropies, sometimes in conjunction with Government and other organisations, have invested over €127/£105 million in thirty partner agencies and community groups delivering fifty-two prevention and early intervention services and programmes across the island of Ireland. The Prevention and Early Intervention Initiative (PEII) invested in a range of services, in areas such as education, early years, child health and development and parenting.

There has been a strong focus on the collection of evidence in the PEII. A core condition of PEII funding was that organisations rigorously evaluated the effectiveness of their services in improving outcomes, and share their learning.

Six outcome reports were produced by CES in the areas of Organisational Learning (Sneddon, Kehoe, Harris, Owens, Sheehan, and Mac Evilly 2012), Improving Child Behaviour (Statham, 2013), Children’s Learning (Sneddon and Harris, 2013), Child Health and Development (McAvoy et al., 2013), Promoting Inclusion (McGuirk and Kehoe, 2013) and Parenting (Sneddon and Owens, 2012). The learning from these outcome reports and the summary report (Rochford, Doherty and Owens, 2014) from the past ten years of the PEII communicate valuable messages about improving outcomes for children and families and contributes to addressing the important theme of the 2015 conference of the Children’s Research Network of Ireland and Northern Ireland – Better Outcomes, are we there yet?

Summary of the Learning from the PEII

Prevention is focused on stopping a problem arising in the first place or preventing it from getting worse. Early intervention emphasises intervening at a young age or early on in a problem. Prevention and early intervention programmes and services can help address problems through timely intervention or at key points in a child or young person’s life where there is increased vulnerability, such as school transitions and adolescence.

A number of important themes and lessons that emerged from the PEII have been distilled by CES into seven key areas for change (Rochford et al., 2014). These are listed here and elaborated upon below:

1. Supporting parents
2. Focusing on the first three years of life
3. Focusing on key life transitions
4. Supporting children’s learning
5. Supporting professionals working with children, young people and families
6. Better interagency working
7. Community consultation and engagement

Supporting Parents

Learning from the PEII indicated that support programmes working directly with parents made positive improvements not just for parents, but also for children (Sneddon and Owens, 2012; Statham, 2013). The PEII showed that parenting support programmes can make significant improvements in:

- reducing parental stress
- how confident parents felt in their parenting role
- parenting skills
- reducing depression
- feelings of social support
- improving child behaviour.

Experience has shown that it can be challenging to engage parents in support programmes. A National Parenting Action Plan should be developed and implemented which identifies accessible services and supports parental outreach and engagement.

Focusing on the First Three Years of Life

International evidence indicates that prevention and early intervention investment in children from birth to three years can reap rewards, both in addressing immediate health and development needs,
and longer term capacities to thrive and develop (Allen, 2011). The learning from the PEII (Sneddon and Owens, 2012; McAvoy, Purdy, Sneddon, and Mac Evilly, 2013; Sneddon and Harris, 2013) illustrates the importance of supporting parents and children from zero to three years, with programmes in the initiative providing accessible information on child development and support in a number of areas. An infant health and wellbeing service should be delivered which integrates these supports.

**Focus on Key Life Transitions**

As children and young people grow, they experience several key transitions, from infancy to young adulthood. These transitions are important periods of change, and represent a period of risk, but also opportunity. International evidence and the PEII have shown that some children cope well with starting school but others, especially those already experiencing disadvantage, can struggle (Rochford et al., 2014). Entry to school life can be planned for and managed in advance and school policies should be in place to support this. A supported transition can be further enabled by increasing links and using complementary learning approaches between home, Early Years settings and school, and helping parents develop a positive home-learning environment (Sneddon and Harris, 2013). The PEII has also provided information on the type of supports that can be provided during some educational transitions (Brady, Canavan, Cassidy, Garrity, and O’Regan, 2012). This should include in-service and pre-service training for professionals that provides greater continuity in curricular and learning approaches for children and awareness of the need to support these transitions.

**Supporting Children’s Learning**

There are many reasons why children fail to learn to the best of their ability and it is important that there are a range of interventions to support learning that address the different environments in which children live their lives. Programmes delivered in the PEII varied across:

- who delivered the service
- which approaches to children’s learning were used – some were directly or indirectly delivered to children; while some focused on capacity building for service providers or parents.
- whether the approaches were targeted or universal – some interventions were targeted at specific populations, or offered to the population in a particular area.

Given the link between disadvantage and educational outcomes, prevention and early intervention programmes have an important role in supporting children’s learning (Sneddon and Harris, 2013). Experienced professionals should provide training and support to practitioners to implement existing early years quality standards, frameworks, curricula and programmes. Parental education programmes supporting engagement in their child’s learning, along with those supporting socio-emotional learning and promoting inclusion should be supported within wider school structures and policies, and be clear on how they will be integrated.

**Support for Professionals working with Children, Young People and Families**

The PEII highlights that aside from parents, other significant adults – particularly professionals working with children, young people and families – play a vital role in child development (Sneddon and Harris, 2013). Professionals can help support the achievement of key developmental milestones, healthy emotional well-being and identification of need. Learning from the PEII shows that training, be it formal or ongoing, is important for developing personal skills and aptitudes. Training in interagency working should also be provided.

**Better Interagency Work**

When implemented well, interagency working changes the way organisations work, share information and coordinate their services (Statham, 2011). Learning from the PEII (Sneddon et al., 2012) and international evidence (Statham, 2011) highlights benefits of an interagency approach for:

- Service users - improved access and a speedier response
- Professionals - enhanced knowledge and skills, better understanding of children’s needs, greater enjoyment of work and more opportunities for career development
- Agencies - greater efficiency and involvement of service users, and less duplication.

PEII findings also highlighted the crucial role of partnership in planning and funding services with regards to tackling the costs of unresolved childhood problems across a range of agencies. Two such partnerships are the Children and Young People Services Committees (CYPSC) in Ireland, and the Children and Young People’s
Strategic Partnership (CYPSP) in Northern Ireland. These partnerships need to be fully supported as vehicles for interagency working to support children, young people and families to meet their full potential.

Community Consultation and Engagement

Consulting and working with local communities is critical to helping organisations understand the problems service users face. A strength of the PEII was that many services conducted needs analyses before selecting and implementing an intervention, ensuring suitability for the local context and, where necessary, adaptations. This consultation also facilitated buy-in from stakeholders and the wider community, and encouraged local partnership-working. Service providers should follow this learning when considering an intervention or programme.

The Economic Case for Investing in Prevention and Early Intervention

The learning from the PEII also demonstrates clear economic benefits, along with improved life outcomes

Conclusion

With the learning from the PEII in context, attention turns now to the island-wide impact of the PEII. The figures below are estimations of those who have benefited from the initiative (Rochford et al., 2014).

- 90,000 children and young people
- 24,000 parents or caregivers
- 4,000 professionals
- 39 partner agencies
- 52 programmes.

In addition, learning from the PEII about designing, delivering, implementing and evaluating services/programmes has begun to inform policy and the commissioning of services, namely the:

- Early Intervention Transformation Programme in Northern Ireland, which aims to embed early intervention approaches (DHSSPS, 2016).
- Area Based Childhood Programme in Ireland, which is an initiative targeting investment in effective services to improve outcomes for children and families living in areas of disadvantage (CES, 2016).
- Nurture Programme for Infant Health and Wellbeing, which is a programme that works to improve health and wellbeing outcomes for infants and their families (CES, 2016).

This learning has also informed the Katharine Howard Foundation’s Parenting Support Initiative, a strategic grants programme that supports parenting across Ireland (Katherine Howard Foundation, 2016). With the commencement of the Prevention and Early Intervention Research Initiative (PEII-R) this year data collected during the PEII will be archived centrally, paving new roadways for further learning from the seminal initiative.

References


Miller, S., Connolly, P. and Maguire, L.K. (2011) A Follow-up Randomised Control Trial Evaluation of the Effects of Business in the Community’s Time to Read Mentoring Programme. Belfast: Centre for Effective Education, Queen’s University Belfast.

Miller, S., Connolly, P., Odena, O. and Styles, B. (2009) A Randomised Control Trial Evaluation of Business in the Community’s Time to Read Programme, Belfast: Centre for Effective Education, Queen’s University Belfast.


Author Information

Sarah Rochford works across a diverse range of projects in CES, particularly in the areas of prevention and early intervention, public service reform, whole of government and integrated working and education. Sarah has a strong interest in the promotion, development and implementation of evidence-informed policy and practice and research synthesis. She has a background working in special education and adolescent mental health settings. She is also a former CES Graduate Intern. Sarah holds a BA (Hons) in Psychology and MSc in Applied Psychology, both from Trinity College Dublin.

Dr Stella Owens’ work in CES is focused on implementation and practice development and she leads on a number of projects including the HSE Infant Health and Wellbeing Programme – Nurture, the Empowering Practitioners and Practice Initiative (EPPI) with Tusla and the all-island special interest group on supporting parents. Stella also supports a number of other projects focusing on implementation of area based initiatives in socially disadvantaged communities and evaluation findings synthesis from the Prevention and Early Intervention Initiative. Stella has a background in social work practice and management, and has worked in residential, child protection and therapeutic family support services. Stella’s PhD explored family involvement in family support services in Ireland.

Nuala Doherty is the Director of CES. She leads the staff team and provides project direction in areas such as prevention and early intervention; whole of government work; and projects with key statutory agencies in health, education and children. Nuala has an interest in evidence informed practice and its application in the delivery of frontline services. She previously held senior leadership roles in statutory organisations in health (HSE) and education (National Educational Welfare Board). A clinical psychologist by background, she worked as a clinician and a senior manager to bring change at an individual, organisation and systems level. She is currently the chair of the Board of the National Advocacy Service.

Ciaran O’Donnell works in CES on projects such as the Area Based Childhood Programme and the Youth Employment Initiative. Previously, Ciaran worked in the University of Limerick across multiple departments. He has volunteered and worked with children and young people across a variety of contexts including: supporting children at risk of early school leaving; co-managing summer programmes within the Limerick Regeneration project; supporting the socio-cultural integration of international students; and providing academic guidance to university students with disabilities. He holds a BA in English and History and a MA in Sociology (Youth, Community and Social Regeneration) from the University of Limerick.
Supporting Perinatal Mental Health through Yoga, Infant Massage and a Parenting Programme in an Inner City Community Based Action Research Initiative

Lorna Kerin

Introduction

Best outcomes for children’s mental health and wellbeing begin in the womb, when foetal brain structures and neural connections grow at an astonishing rate, creating the architectural foundation of human cognitive, communicative and social and emotional development (Eliot, 2001; Knickmeyer et al., 2008; Fox, Levitt and Nelson, 2010). However, poor maternal mental health is a significant risk to optimal foetal and subsequent infant development during ‘the perinatal period’, a pragmatic overarching term increasingly used to refer to maternal mental health from conception through to the end of the first postnatal year’ (SIGN, 2012; O’Hara, Wisner, Asher, and Asher, 2014; Lee, Denison, Hor and Reynolds, 2016). This perinatal period is of particular interest as it may just hold the ‘key to breaking the intergenerational transmission of mental health difficulties’ (Milgrom and Gemmill, 2015, p.1).

Certainly the evidence is that perinatal stress, anxiety and depression can result in a range of adverse foetal, infant and child developmental outcomes. Depending on the intensity, timing and nature of these maternal mood disorders, adverse developmental impacts may affect in-utero brain structures (Lupien, McEwen, Gunnar and Heim, 2009), foetal development, birth outcomes (Sandman, Davis, Buss and Glynn, 2011), the attachment process and subsequent child emotional, behavioural, cognitive and mental health (O’Connor, Heron and Glover, 2002).

An overall aim was agreed to support local, marginalised pregnant women by providing a group-based, evidence-informed programme to decrease mental health risk factors such as stress, anxiety, depression and social isolation and to increase protective factors such as emotional, peer and practical support, stress management, maternal attachment and parental self-efficacy.

Philanthropic funding was then secured for this ‘D7 Parenting Baby Initiative’ in collaboration with the local partnership company from the Parenting Support Initiative (PSI) which is a collaborative funding programme of the Katherine Howard Foundation and the Community Foundation of Ireland. The author then designed the programme intervention, planned programme logistics, secured referrals with local community partners, co-delivered and conducted a brief evaluation of the pilot programme.

Programme Structure and Evidence Base

The full ‘D7 Parenting Baby’ programme was thirty two weekly sessions, consisting of three distinct, consecutive intervention phases delivered between December 2014 and August 2015.

The first phase was twelve weekly facilitated sessions of integrated pregnancy yoga classes to reduce anxiety and depression (Newham, Wittkowski, Hurley, Aplin, and Westwood, 2014). It is important to note that it was ‘integrated yoga’, which includes physical postures, breathing practises, meditation and yogic philosophy, and not the solely...
physical exercise based yoga, that has been evidenced to significantly reduce depression (Gong, Ni, Shen, Wu and Jiang, 2015). The second phase consisted of ten weekly facilitated sessions of mama baby yoga and infant massage to reduce stress and postnatal depression and to enhance mother-baby attachment and mental health outcomes (Onozawa, Glover, Adams, Modi and Chinni Kumar, 2001). The third phase was eight weekly sessions of the ‘Incredible Years Parents and Baby’ programme (Webster-Stratton, 2011) to develop parental sensitivity efficacy and confidence (Jones, Hutchings, Erjavec and Vikator, 2014).

**Referrals and Participation**

Referrals were actively sought from a range of community and statutory organisations including local GP’s, crèches, schools, maternity hospitals and family resource centres. Persistent and repeated coordination efforts resulted in the referral, engagement and retention of participants who were experiencing significant mental health distress due to issues such as social isolation, crisis pregnancy, lone parenthood, domestic violence, poverty, homelessness, stress, anxiety, depression, and birth trauma. A total of twelve women and twelve babies participated in the programme, with an average attendance rate of nine women per session. 50% of all participants were immigrant women without extended familial or social support in Ireland.

**Research Methodology**

Community-based action research was employed to encourage ownership of the initiative by local stakeholder agencies. This involves ‘collaboration with communities in exploring and acting on locally identified concerns’ (Minkler and Wallerstein 2003, p. 1210). A pragmatic mixed methods approach was taken to monitor programme process and to document specific outcomes post-intervention. Quantitative tools included analysis of interagency referral and participant attendance data, anonymous participant online surveys at the end of phases two and three, as well as standardised weekly and end of programme evaluation materials. Qualitative tools included open ended questionnaires, facilitator observation and two participant focus groups.

**Research Ethics**

Research ethics were overseen by the interagency project steering group. Referral data was confidential and all participant data was stored securely. Informed consent was obtained by clearly explaining the aims of the action research project and by seeking written consent from each participant for the use of anonymised programme evaluation data and focus group quotations. Participants as primary caregivers also gave written consent for use of photographic image of their babies by the author in reports, presentations and journal articles. Participants gave verbal permission to transfer contact details only to the lead agency at the end of the project if they wished to avail of follow up programmes.

**Evaluation Outcomes**

**Participants received direct support from the group facilitator, the public health nurses or from peers on issues causing emotional stress**

When asked to rate whether ‘doing pregnancy yoga helped me reduce stress during pregnancy’, five out of six survey participants replied ‘a lot’ (Survey 1, q.4). Typical comments included the ‘breathing tecnnics (sic) helps me and the baby relax’. When asked to rate the statement ‘I felt more supported in my pregnancy as a result of going to the group’, all six women replied ‘a lot’ (Survey 1, q.7). The researcher observed that participants received direct support from the group facilitator, the public health nurses or from peers on issues causing emotional stress such as back pain, breech baby, pubic synthesis, relationship difficulties, breastfeeding and baby health concerns.

Participants in the focus groups reported that the emotional and peer support in the group reduced their mental health distress in different ways. For example, one woman disclosed that her struggle with prenatal depression made her...
worry that she should give her baby up for adoption but that coming each week and ‘having the opportunity to share how I was feeling with a group of people who listened and cared made a huge difference to me’. (Focus group participant 3). Another mother, struggling with depression due to social isolation, said that group had become her ‘family’ over the last year and she intends keeping in contact with the other women. (Focus group participant 5). All participants surveyed stated they would ‘highly recommend’ the integrated perinatal yoga programme to other pregnant women (Survey 1, q.10).

Increased Referrals to Support Services Where Available

Participants who disclosed issues that were causing significant stress and potential harm to their child’s wellbeing were linked to appropriate services, such as local domestic violence refuge services, the maternity hospital services, social welfare services and immigrant advocacy services. However, in several cases, referral of women with specific perinatal mental health needs was not possible due to the lack of access to appropriate perinatal mental health services.

Participant Progression onto a Structured Parenting Programme

Participants’ initial positive experience in the perinatal yoga group seemed to be their main motivation to progress onto the third phase of the structured parent training programme. Five survey participants agreed with the statement that ‘I trust this will be worth my time because I had a good experience in the previous group’ in comparison to just three participants who agreed ‘I want to learn more about how to support my baby’s development’ (Survey 1, q.33).

Increased Maternal Knowledge of Baby Development Techniques

Five of the six participants surveyed rated the overall group of baby development techniques presented in Incredible Years Parent and Baby programme as being ‘extremely useful’ to them as parents and the sixth participant rated the techniques as ‘useful’ (Survey 2, q. 32). These included providing physical, tactile and visual stimulation, promoting baby language and brain development and practising social emotional coaching.

Improved mother baby attachment

All six participants surveyed stated their bonding had either ‘greatly improved’ or ‘improved’ with their baby by the end of the programme (Survey 2, q.1). Qualitative comments also referred to an increased awareness of attachment such as: ‘The overall bonding with my baby and learning how to understand her different needs and speech was amazing’ (Survey 2, q.37, participant 6).

Increased interagency collaboration

Following the successful initial year of coordination, programme delivery and participant outcomes, the local interagency group agreed to build on collaboration efforts. Philanthropic funds were secured from the Parenting Support Initiative to deliver a subsequent second year of the programme.
The local public health nurse presents a programme graduation certificate to a proud mother and her family

Overall Findings and Implication for Policy
Interagency collaboration, persistent coordination efforts and the innovative use of pregnancy and post-natal yoga were successful in the initial engagement of hard to reach pregnant women experiencing social isolation and mild mental health difficulties. Participant self-reports indicate that maternal stress and social isolation was decreased and maternal mental health, attachment and parenting efficacy was improved.

Considering the relatively modest philanthropic investment of €15,000 in the first year of this pilot project, this small case study merits further development and research as a low cost, community-based intervention with potential to produce better outcomes for mothers and babies during the perinatal period. Given Ireland’s national transformational goals to ‘support parents’ and to engage in ‘earlier intervention and prevention’ (DCYA, 2014), further investment could be targeted at developing a standardised integrated yoga-based perinatal parenting support programme that is amenable to more rigorous research.

References
Working in Partnership to Improve Outcomes for Children

Pauline McClenaghan

Introduction

This paper describes a model of parenting support developed by the Lifestart Foundation in partnership with statutory bodies on both sides of the Irish border (the HSE, Tusla and the WHSCF) in which the Growing Child programme is offered to families referred by health and social care professionals. The paper outlines the key features of the model, the practice adaptations the implementation of the model required and the issues it raises for voluntary sector/statutory partnerships aimed at improving outcomes for children.

International research shows that the quality of parenting, the level of attachment between parent and child and the home learning environment are all critical to child development (Moran, Ghate and van der Merwe, 2004; Abbot and Langston, 2005; Evans 2006; Flett, 2007). The evidence confirms that compromised parenting is a serious child development risk factor that can be replicated from generation to generation, bringing the children of the same families into the care system. But the research also shows that parents can learn new parenting techniques, insights into how young children develop and learn can affect how people parent and good parenting can reduce the effects of factors with the potential to negatively impact on child outcomes (Desforges and Abouchaar, 2003). Developing the optimal conditions for early childhood development, therefore, involves supporting good at-home parenting and the pedagogical role of parents (Melhuish, Phan, Sylva, Sammons, Siraj-Blatchford and Taggart, 2008).

Effective intervention requires sustained one-to-one support

Short, group-based parenting interventions do work for some parents but they are often unable to engage those who need support most or the effects do not last, with the same families re-presenting with on-going issues. In these contexts, effective intervention requires sustained one-to-one support. The best way of providing that support has been shown to be home-visiting based on the delivery of systematic programme content that has been empirically proven to work, that is delivered in partnership with local health and social care professionals and which responds to the needs of statutory systems by developing referral, reporting and implementation procedures that directly meet those needs (Davis, McDonald and Axford, 2012).

Lifestart Foundation Evidence-base

The Lifestart Foundation is a charitable organisation experienced in the delivery of quality parenting education and family support. Our mission is to produce better child outcomes by making available to parents evidence-based knowledge and information on how young children develop and learn. We implement our mission by promoting and supporting the delivery of the Lifestart ‘Growing Child’ Programme - a systematic evidence-based child development programme, delivered through home-visiting to parents of children from birth up to pre-school/school entry.

The expert designed ‘Growing Child’ has been empirically tested in Ireland (NI and ROI) through a fully scientific Randomised Controlled Trial (RCT) (2008-2015) based on a rigorous experimental design (Miller and Dunne 2015). The RCT,
involving 848 parents and children, proved conclusively that the Lifestart programme works as predicted, producing statistically significant positive outcomes for parents and improved outcomes for children. Parents who received the Lifestart programme were found to be less stressed, had greater knowledge of child development, demonstrated higher levels of parenting efficacy, were more confident around child discipline and boundary setting, reported better parenting mood and increased feelings of attachment and felt less restricted in their parenting role. Effect sizes ranged from 0.21 to 0.27.

Positive effects for children were better cognitive development, better socio-emotional development, improved behaviour and fewer speech and language referrals. Effect sizes ranged from .07 to .16; the largest change occurred with respect to speech and language referrals. Improvements in parent outcomes mediated changes in child outcomes and the positive effects are expected to accumulate over the children’s life course. The research team will be following the children’s development through school.

Integral to the Lifestart programme is a child-centred strengths-based dialogical approach to parenting support that is highly participative and less stigmatising than ‘deficit’ models of family support; an approach that consistently achieves high levels of parental engagement, enabling us to reach and support the most marginalised of families.

Working in partnership

Lifestart practice has always aimed to reflect the needs of parents and children and of service commissioners. In 2011 we began working more formally and directly in collaboration with the Health Service Executive’s social work and family support staff (now TUSLA), with public health nurses, health promotion staff and other health and social care professionals to provide an integrated and effective parenting support service to vulnerable families and first-time parents. With our ROI statutory partners we worked to integrate Lifestart practice more closely with statutory child protection and family support services, while retaining the core principles and values embedded in the Lifestart approach. We refined our referral, reporting and implementation policies and procedures and outcomes measures to explicitly reflect the full range of our partners’ needs.

In Counties Donegal, Sligo, Leitrim and West Cavan the Lifestart programme is now offered by independent Lifestart franchisees, as a fully referred region-wide service targeted at families with high support needs and vulnerable first-time parents. In Carlow/Kilkenny the Lifestart programme is provided as a referred targeted service delivered by Tusla employees. In Dublin, Drogheda, Derry, Fermanagh, Ards, Limavady and Strabane the programme is delivered by Lifestart franchisees as a partially referred (targeted) and partially non-referred (universal) service.

The Lifestart Foundation is now also working in partnership with the Northern Ireland Western Health and Social Care Trust piloting the delivery of the Lifestart programme by statutory Family Support staff linked to social work teams. In this case the service is targeted at vulnerable families already known to social services and parents who are themselves care-experienced, with the specific aim of breaking the intergenerational cycle that brings the children of the same families into the care system. The pilot is the subject of an independent evaluation, funded by Atlantic Philanthropies, which is using many of the same measures used in the RCT. The results of this study will be available in 2018.

Issues in Partnership Practice

Our closer integration into state family support structures has had important implications for how we conduct our work, not least the shift from universal to targeted provision, and how we meet the expectations of parents and of our statutory partners, in the face of the increased demands an integrated
approach places on Lifestart staff. We are now operating in a more complex set of relations influenced by different discourses and meaning systems, governed by different forms of authority and legitimacy and structured by differences in perceived status and power. Raising awareness and improving understanding of how we work with parents, what we aim to achieve and the contribution we are making to the day-to-day work of our professional partners is an on-going and demanding task.

Where Lifestart service providers are offering a targeted, referred and integrated service on behalf of a statutory body, they have to work hard to retain their independent identity, to continue to practise within the Lifestart ethos and boundaries and to maintain the dialogic and strengths-based approach so central to our work. An approach which also places new demands on statutory staff delivering the Lifestart programme, who must now build and maintain longer term supporting relationships with parents, in a context where procedural imperatives and systems are designed to expedite and close cases; a circumstance leading to adaptations to statutory case administrative systems and accountability procedures. The dual roles of statutory staff delivering the Lifestart programme also adds further complexities to the parent/home visitor relationship which can, in consequence, at times be problematic.

Establishing and managing good family-centred communications between delivery staff, social workers and health visiting staff/public health nurses is key to an effective integrated approach to parenting support. Clear and concise procedures and systems to ensure that this happens need to be tested and proved workable or redesigned in the light of practice experience. Gathering, sharing, reflecting on and using practice evidence as the basis of contextualised learning is therefore very important.

Lifestart/statutory collaboration brings together different practice communities, in which action is mediated by different discipline paradigms, discourses and resources. Practice encounters are in consequence characterized by boundary crossings in which individuals from different contexts strive to address objectives which can have different meanings for them. Concepts tightly structured in use in one context often need to be interpreted more loosely at the boundaries in order to facilitate joint practices. The leadership and commitment of key people brokering relations and translating meanings has proved to be crucial, as is the work of joint advisory groups with the power to effect change within Lifestart and within the statutory systems.

References


Author Information

Dr Pauline McClennaghan has been Executive Director of the Lifestart Foundation for the last 10 years. The Foundation is an international parenting charity offering an evidence-based and proven child development programme – the ‘Growing Child’ - to parents of children from birth up to pre-school or school entry. Prior to joining Lifestart, Pauline was a university lecturer and researcher with a specialism in education and learning. She has a number of publications in her field and she has presented at international conferences throughout the world. She was educated at St Anne’s College Oxford and the University of Roskilde Denmark.
The Role of the Parent Child Home Programme in Supporting Better Outcomes in Education and Learning

Gráinne Kent, Josephine Bleach and Beth Fagan

Introduction

Parent Child Home Programme (PCHP) is one of the programmes offered by the Early Learning Initiative (ELI), National College of Ireland (NCI), which aims to address educational disadvantage and improve outcomes for children and their families. This article outlines the role PCHP plays in supporting parents’ interaction with their children and improving the home learning environment. Through presenting the rationale, methodology and outcomes of PCHP, the authors will demonstrate how PCHP is supporting better outcomes in education and learning across the Dublin Docklands.

The Early Learning Initiative

The ELI is a community-based educational initiative, which provides an integrated programme of training and supports for children, their parents and families, and educators from early years up to third level. It operates as a partnership with all relevant parties committed to improving outcomes for children and young people at home, in school and throughout the community (Bleach 2010). Action research (Senge and Scharmer, 2001; Bleach, 2013) is used to enable the local community to shape the development of ELI’s programmes. Central to this approach is the belief that early intervention and a supportive home learning environment is critical to children’s outcomes.

The first three years of life is a period of rapid brain development, when a child’s thinking and language structures are being built into the brain. Research by Hart and Risley (1995) found a gap of over thirty million words by three years of age between children from high socio-economic backgrounds and children from lower socio-economic backgrounds. They suggested that, if not addressed, this gap continues to widen with vocabulary growth at this early stage being predictive of language skills and reading comprehension at age nine. Similarly, the Growing up in Ireland (2012) study found that nine-year-olds’ from professional families were achieving higher scores in both mathematics and reading than children from lower socio-economic backgrounds.

The initial survey of need conducted for the ELI by the Dartington Social Research Unit (2006) found that while local parents had high aspirations for their children, they did not feel confident in supporting their children’s educational progression. As a result, the ELI has focused on helping parents to develop their children’s social, language and thinking skills from an early age. This area contains significant clusters of high deprivation, which are masked by the extreme influx of largely affluent professionals in the wake of the inner city’s gentrification (Haase, 2008). The level of educational disadvantage appears more acute as it co-exists with modern knowledge sectors, which attract the most highly educated people (DCC, 2013).

1 This area contains significant clusters of high deprivation, which are masked by the extreme influx of largely affluent professionals in the wake of the inner city’s gentrification (Haase, 2008). The level of educational disadvantage appears more acute as it co-exists with modern knowledge sectors, which attract the most highly educated people (DCC, 2013).
age; thereby ensuring that children enter school ready to learn, with the skills they need to be successful.

**Rationale**

Of all ELI’s programmes, PCHP has the most influence on parenting skills and the home learning environment. Originally developed in the US in 1965, PCHP is an innovative home based literacy and parenting programme which aims to strengthen families and prepare students to succeed academically (ELI, 2015). Through twice weekly home visits over a two year period, the Home Visitor models for the parents how to talk, read and play with their children. The parents are encouraged to continue these activities between visits.

**Methodology**

From 2007-15, 584 children and their families have taken part in PCHP in the Docklands. Over 20,000 home visits have taken place with an average of forty-six visits per family per year. At present there are over 100 families and twenty-five Home Visitors involved in PCHP. Central to the delivery of PCHP is Aistear (NCCA, 2009) and Síolta (CECDE, 2006), the Irish National Curriculum and Quality Frameworks. Aistear shapes the pedagogy used by the Home Visitors in their interactions with children and parents, while Síolta informs the quality of the service PCHP provides to families. A non-directive, modelling approach is used by the Home Visitors (Fagan, 2011). By following the children’s lead and using open-ended questions, the Home Visitors encourage the children to exercise choice and to become active participants in their own learning. High quality, open-ended materials, which cover the themes and learning goals in Aistear, are used. Promoting parents as their children’s first and most important teachers is the cornerstone of the PCHP model with parental involvement encouraged at each visit. This helps the parents to develop the understanding and skills needed to continue the learning activities between visits and long after they have finished the programme.

**Outcomes**

Over the past fifty years, the research on PCHP in the US has demonstrated both the programme’s significant outcomes for children and families and its effective replication in a wide variety of culturally and linguistically diverse at-risk populations (Mann, Sandoval, Garcia and Calderon, 2009; Organisational Research Services, 2010). The findings highlighted that PCHP parents developed high levels of verbal responsiveness to their children and that children involved in the PCHP were performing at levels expected for their age (Knicebein, 2005; Allen, Sethi and Astuto, 2007). Follow-up studies of PCHP graduates indicated that they graduate from high school at rates higher than non-PCHP participants (Levenstein, Levenstein, Shiminski and Stolzberg, 1998).

Evidence of the impact of the PCHP in Ireland can be seen through the external and internal evaluations, which replicate the US findings. A baseline evaluation of PCHP in the Dublin Docklands by the Children’s Research Centre, Trinity College Dublin (Share et al., 2011) evaluated the implementation and outcomes for the developmental phase (2009-2011). This evaluation, which employed the use of a longitudinal design, highlighted the positive impact of PCHP on the families involved. The children involved were developing normally for their age with PCHP benefits extending to their brothers and sisters.

Annual internal evaluations of PCHP, completed by the parents in line with our action research methodology, show that parents have a high degree of satisfaction with the programme (ELI, 2015). Veerman and van Yperen (2007) suggested that a programme can be considered successful when ninety five per cent of the clients are satisfied with the service received and ninety per cent of the goals of a programme are attained. From 2008-2015, ninety nine per cent of PCHP parents found the programme useful, while one hundred per cent felt supported by their Home Visitor. Analysis of the open
questions highlighted that parents felt that their children’s language, literacy and numeracy skills had improved, with ninety eight per cent of parents feeling confident in using strategies for reading and playing with their children.

**Internal assessments completed on the PCHP children by the Home Visitor in November and May each year** show that children are exhibiting an increase in positive verbal interaction and behaviour and that their language, literacy and numeracy skills are at levels expected of their age (ELI, 2015). This corroborates the external research (Share et al., 2011) that the children involved in PCHP are developing normally for their age.

While the research conducted in the Dublin Docklands area has not used a comparison group due to the difficulty of finding a similarly disadvantaged demographic area in Ireland not receiving any early intervention programme; a recent longitudinal study in the US (ORS Impact, 2016) used a matched comparison group to compare the long-term academic outcomes of PCHP graduates and non PCHP graduates with evidence of PCHP graduates having better outcomes.

Similarly, the pilot Irish longitudinal research (ELI, 2014) found positive indicators of the long-term impact of PCHP. Parents reported that their children were doing well in school; they were continuing to use the books and toys and in some cases the PCHP children were role playing being a Home Visitor with their younger siblings.

**Promoting parents as their children’s first and most important teachers is the cornerstone of the PCHP model**

Furthermore, standardised test scores from the local DEIS primary schools corroborates this evidence, as do the anecdotal reports from school principals who notice that “PCHP children are coming to school ready”. While the existing evidence indicates that PCHP is improving outcomes for Irish children in education and learning, more extensive long-term research is required.

**Conclusion**

The current article discusses the role PCHP plays in supporting better outcomes in education and learning for Irish children. By empowering parents to support their children’s learning, this home based early intervention programme enables children to develop the language, literacy and numeracy skills needed to successfully navigate the education system. This quote from a PCHP parent sums up the impact of the programme:

*The Home Visitor is very good with my child and I’m learning a lot from the techniques she’s been using. I’d never have known how to explain properly or encourage him in the ways I am now. My reading has come on better and I am calm. I am a lot more relaxed and my child is the same with me. I love reading to him and we enjoy playing together. The Home Visitor is great in giving me tips and looks at all the different sides. I have said it to my family, friends and the intervention team.*

**References**


Author Information

Dr Gráinne Kent is the Researcher in the Early Learning Initiative at the National College of Ireland. Having worked in the field of early intervention for children with developmental delays for a number of years, her passion lies in evidencing the importance of early intervention in increasing the outcomes of children faced with developmental disadvantage. Her special interests include but are not confined to early intervention and prevention, child development, language development, Autism Spectrum Disorder, teaching and learning, evidence based practice, and behavioural psychology.

Dr Josephine Bleach has been Director of the Early Learning Initiative at the National College of Ireland since 2008. Prior to this, Josephine worked variously as a primary school teacher and a Home School Community Liaison Co-ordinator in Darndale, Dublin 17. She was involved in the development and delivery of the Early Start Pre-School Intervention Programme, and subsequently worked as a facilitator with the School Development Planning Support Service (Primary) of the Department of Education and Skills.

Beth Fagan is the National Coordinator of the Parent Child Home Programme, in the Early Learning Initiative in the National College of Ireland. Before returning to Ireland in 2007 to take up the position with NCI, Beth had been the Coordinator for PCHP in Watertown, Massachusetts, having started in PCHP as a volunteer Home Visitor.

Enhancing Quality Practice to Enhance Early Learning Strengthening Foundations of Learning (SFL)

Noirin Hayes, Sandra O’Neill, Triona Rooney and Emma Byrne-MacNamee

Introduction

Located within a bio-ecological frame (Bronfenbrenner and Morris, 1998/2006) and informed by a rights perspective (Hayes, 2007; Hayes and Bradley, 2009) the Strengthening Foundations of Learning [SFL] project is a Continuing Professional Development (CPD) programme provided across eight early years settings located within an area of urban disadvantage. All the settings offer the Free Preschool Year (FPSY) for children aged three to five years and work within Aistear, the Early Childhood Curriculum Framework (NCCA, 2009).

Research confirms that for positive child outcomes, early childhood education and care must be of high quality, particularly for children who may be identified as coming from more disadvantaged backgrounds. Indeed, the evidence suggests that poor quality early years experiences are of little or no benefit to children (Sylva, Melhuish, Sammons, Siraj-Blatchford and Taggart, 2012). Early years settings are complex learning environments with many overlapping interactions between children, adults, materials and ideas. Children influence and are influenced by these interactions and also by the beliefs others have about how and what they should learn. Based on their beliefs adults select and provide early learning experiences they believe to be important for children’s development (Bruner, 1996; Hayes, 2013).

Evidence suggests that poor quality early years experiences are of little or no benefit to children.

Part of the Preparing for Life (Prevention and Early Intervention Project), Northside Partnership.
Improving outcomes for children is a central focus of national policy for children (DHC, 2007; Ireland, 2014; DCYA, 2015). To achieve better outcomes, it is essential to ensure that children have quality early learning opportunities (Hayes, 2015).

The SFL project was designed to support early years educators (EYEs) through enhancing their pedagogical practice to provide quality early learning opportunities. This focus recognises the key role played by adults who are attuned, ‘watchfully attentive’ and who are mindful in their day-to-day practice. They create the opportunities necessary for quality early learning and make an important and positive contribution to children’s learning and development.

International research suggests that EYEs are not confident in talking about their practice or analysing and critically evaluating the impact of their practice on young children. In a study of pedagogical effectiveness in early learning Moyles and her colleagues (2002) found that the ability to articulate and reflect on practice was related to the level of training and the ‘ethos within settings, which positively promotes self-evaluation and reflection and adopts strategies for developing these’ and thus subject to reflection, dialogue and argumentation’ (Dahlberg et al, 2007, p. ix).

The aim of the programme was to facilitate EYEs to:
- Engage with children as active, unique and competent participants in their early education
- Improve curriculum, to create enriching experiences for children, drawing on Aistear, the Early Childhood Curriculum Framework;
- Develop reflective quality practice within their teams;
- Actively promote and enhance language development among children;
- Make children’s learning visible to parents;
- Facilitate a successful transition to school, for the children in their care.

This paper presents some preliminary findings from two strands of the programme (i) the Quality support strand [Learning Environments] and (ii) the Speech and Language strand.

Findings

**SFL Learning Environments**

Learning and developing through play was regarded by the SFL team as a natural starting point for engagement with EYEs for a number of reasons.
- Play is one element that underpins early years practice and strongly connects with all other guidelines and each of Aistear’s themes.
- Changes to the learning environment are relatively simple to carry out and have an immediate and significant impact on the variety and quality of play opportunities.
- Changes to the learning environment do not directly relate to practitioners’ personal performance/skills/knowledge, but rather to external objects and processes that could be discussed, for the most part, without attaching emotions to the assessments.
- The SFL team were anxious to highlight the pedagogical framing/behind the scenes work (Siraj-Blatchford et al., 2002) that influences and impacts on children’s early learning.

The SFL project works directly with EYEs, within and across settings, to enhance the quality of early education practice and the early learning experiences of the children attending. To achieve this the SFL model provides a quality Continuing Professional Development (CPD) support programme through workshops, coaching and mentoring, on-site speech and language support for each setting and transition support for the early years settings. SFL was designed as a two-year project with a team of three and was built around the animation of Aistear (NCCA, 2009) in practice.
Settings were encouraged to include layout adjustments and source free, open-ended or recycled resources that would support children’s learning and development. SFL provided a small equipment grant to each setting.

Settings made changes to both indoor and outdoor environments. In addition to grant-aided changes most settings made additional changes to their learning environment. Changes included providing outdoor equipment and play opportunities (n=8) and quiet, relaxing areas or role-play equipment indoors (n=5).

Following the changes a cluster-group meeting was held at which each setting made a presentation explaining the changes they made, the reasons for the change and the impact of the change on their setting. An anonymised post-intervention questionnaire was developed and distributed to participating EYEs. Sixty-six per cent reported that the experience of considering and altering the learning environment had enhanced their understanding and implementation of Aistear and its themes:

I have learnt a lot about Aistear themes and aims. I feel this knowledge has really helped me with my assignments in my Fetac Level 6 and in my work (EYE)

Speech and Language Support

The programme is based on the premise that purposeful teaching and learning occurs when practitioners’ own understanding and knowledge informs their practice

I wish that I had not asked so many questions. I will now remember to let the children lead and then comment. (CF Prog. B)

I waited for the children to speak. I also thought about counting to ten (AQ Prog.B)

I waited for the children to answer. The children enjoyed the activity and they were all participating (SS Prog B)

In response to group discussions on the dominance of phatic questioning a ‘no-questions’ week was proposed and agreed. While unrealistic to expect full implementation of a ‘no questions’ week the exercise functioned as a mechanism for foregrounding attention to questioning behaviour. The intention was to move the educators beyond the dominant use of phatic questions towards self-awareness and use of new strategies to extend and elaborate young children’s oral language skills. It provided an opportunity for participants to explore the outcome of waiting and letting children take the lead and afforded a valuable context for individual reflection and, in the group session it generated rich collective discussion.

Some educators expressed how difficult it was to reduce questioning and found they asked phatic questions without thinking. Almost all participants indicated that focusing on their questioning style interrupted their practice, forcing them to reflect more actively. They also reported increased awareness of the interaction skills of others, of children and of themselves and recognised the effect of questioning style on conversations with children. They described the challenges in maintaining behavioural change while implementing strategies to support children’s language, literacy and social skills. Participants reported enjoyable interactions with children noting that quieter children were communicating more. It was empowering, as changes in the educators own interaction style was visible in children’s behaviour:

… I wish that I had not asked so many questions. I will now remember to let the children lead and then comment. (CF Prog. B)

I waited for the children to speak. I also thought about counting to ten (AQ Prog.B)

I waited for the children to answer. The children enjoyed the activity and they were all participating (SS Prog B)
Participants discussed the positive effects of child-led interactions and described how this helped them plan for children’s learning individually or with their team. Setting-based observations and video clips taken before and after this element of the programme found enhanced self-awareness and improved pedagogical practice.

**Conclusion**

These preliminary findings from the SFL project indicate that the early years educators are more reflective in their practice and that early years practice is changing. Findings also suggest that educators have a greater understanding of the impact of their practice on children’s early learning, link their practice to the themes and principles of Aistear and are gaining confidence in speaking about their practice.

**References**


Hanen Centre (nd.) *Learning Language and Loving It – The Hanen Program for Early Childhood Educators* Toronto: Hanen Centre.


**Author Information**

**Professor Nóirín Hayes** is a developmental psychologist. She is Visiting Professor at the School of Education, Trinity College Dublin and maintains her affiliation to the Dublin Institute of Technology, through the Centre for Social and Educational Research. Her specialist field is early child development and learning, with particular interest in early learning, wellbeing, pedagogy, and children’s rights. She has an active research portfolio working with postgraduate students and researchers. She is the author of a number of books, reports and research articles on practice and policy and her most recent book is *Early Years Practice: Getting It Right from the Start* (2013).

**Sandra O’Neill** is the Early Years Quality Mentor with Preparing for Life. She has worked in the Early Childhood sector since completing her undergraduate degree in Early Childhood Education in 2003 (DIT). For the past decade, she has been dedicated to supporting practitioners to understand and implement the national early years frameworks. She was the first Síolta Co-ordinator in the country and most recently worked as a project officer for the NCCA’s Aistear Síolta Practice Guide. Sandra holds an MA in Child, Family and Community Studies and a post-graduate certificate in therapeutic play.

**Triona Rooney** is a Senior Speech and Language Therapist. She has worked as a speech and language therapist in Dublin and the North East in the areas of primary care and childhood disability. She is on secondment from the HSE with Preparing for Life since 2014 working on the Early Years Programme. She supports early years educators through training and coaching to develop knowledge and interaction skills to help children build language and skills. She graduated from Trinity College Dublin in 2001 with an honours degree in Clinical Speech and Language Studies and is a member of the Irish Association of Speech and Language Therapists.

**Emma Byrne-MacNamee** is responsible for managing the Early Years programme in Preparing for Life. After obtaining a Bachelor of Arts., Emma studied Montessori Education (AMI) and later graduated with a Masters in Child, Family and Community Studies (First Class Honours). She has worked across the Early Childhood sector for over twenty years, in a variety of roles, for a diverse range of organisations. Emma is passionate about the need to provide both training and mentoring to early years’ practitioners, so that they can implement quality, reflective practice in their settings, leading to better experiences and outcomes for young children.
Where are we going?
Looking for a Road Map in Supporting Literacy Development for Children With Autism

Carol Ann O’Sioráin

Autism Provision

Ireland is actively responding to the growing identification of pupils with autism in early years and primary education. In September 2015 an additional 149 autism specific classrooms attached to mainstream schools were established. McCoy, Banks, Frawley, Watson, Shevlin and Smyth (2014) suggest that 60% of all special education class provision in Ireland is specifically allocated to autism intervention. In a review of evidenced best practice, Parsons, Guldberg, MacLeod, Jones, Prunty and Balfe (2009) identified a dearth of knowledge in the learning experiences and outcomes for pupils enrolled in these units. McCoy et al. (2014) suggest that 60% of all special education class provision in Ireland is specifically allocated to autism intervention. In a review of evidenced best practice, Parsons, Guldberg, MacLeod, Jones, Prunty and Balfe (2009) identified a dearth of knowledge in the learning experiences and outcomes for pupils enrolled in these units. McCoy et al. (2014) suggest a tokenism towards the ideology of inclusion as they raise concerns that pupils assigned to specialist classes were found to have little interaction with their non-disabled peers. In response to this growth in special education provision, Ireland has established major policy frameworks and legislation to provide direction and enhance the inclusion of children with special educational needs including autism in mainstream settings (Department of Children and Youth Affairs, 2014). Guldberg (2010) in a review of literature on ‘best autism practice’ in the early years suggests a ‘transactional approach’ to inclusion. She advocates a need for environments, personnel and curricula to be flexible and accommodating stating that learning happens for pupils with autism through a process of ‘transactions between individuals’ (Guldberg, 2010, p. 169). Lanter (2009) adds concerns that there remains a significant lack of research, internationally, on the literacy skills building of pupils with autism. This article presents some of the preliminary results of a study of the literacy skill development of children with autism in Irish mainstream, primary schools.

Policy on Literacy Skills Development

Policy has also focused on literacy skills development among Ireland’s ‘literate and non-literate’ population (DES, 2011). Assessment results from the Organisation of Economic Co-operation and Development (OECD) and national examinations has influenced and driven policy to ensure a more literate workforce. Within this policy framework is the definition of ‘literacy’: ‘the capacity to read, understand and critically appreciate various forms of communication including spoken language, printed text, broadcast media, and digital media’ (DES, 2011, p. 8). The policy draws attention to the development of literacy skills for children and young people with special educational needs. This suggests that there is a real knowledge and understanding of the standards of literacy capabilities among this population of learners. Children with autism may experience language impairment such as delayed language development, limited language ability or diminished language use; and according to Lanter, Watson, Erickson, and Freeman (2012) this presents difficulties in social communication. Chandler-Olcott and Kluth (2009) highlight that standardised assessments do not reflect what the learners with autism know or are capable of; but teachers who observe and take note, do reflect on their learners’ abilities and can relate a more knowledgeable analysis of that ability. While quantitative research is plentiful on programme efficacy and models of best practice, there is little research to provide evidence of curriculum and assessment, pedagogy, school and classroom organisation, the use of resources and assessments and how they relate to literacy practices and outcomes for pupils with autism. Concerns have been raised as to the adequacy of educational provision and the quality of teaching and learning within these autism specific classrooms (Jones and Jordan, 2008).

Method

The overall study sought to provide an insight into the literacy skill development of children with autism in Irish mainstream, primary schools. A constructionist approach was used, where conversations were held between the researcher and the participants to develop and clarify the content within the interviews and the observations. Furthermore, it recognises the intricate relationships between, interpretations, researcher experiences, the contextual situation of the classroom and ‘personalistic orientation’ (Stake, 2010, p.46). This article presents evidence of observed verbal behaviours of pupils with autism and argues that some repetitive verbal and non-verbal behaviours have communicative intent and should be given greater attention.

Semi-structured interviews provided person-to-person interactions and offered the participants with an opportunity to relate their understanding/ experiences in a narrative form.
Interview questions were set to draw on the relevant personal and professional experiences of the participants. Two ‘exhibit questions’ (Stake, 2010, p.97) were included in both sets of interviews, ‘what is autism? And ‘what is literacy?’ These questions allowed for a more focused response and were essential to the research objective.

Classroom observations were also conducted. As a participant within this research environment active discourse and reflections on structures and practice provide clarity and relative objectivity to the research findings. Observations, according to Burton, Brundrett, and Jones (2014, p. 116) are the ‘natural research tool of the educational profession’ and provide a ‘quality to the research process’. The High/Scope Educational Research Foundation and the International Association of Evaluation of Educational Achievements, Child and Adult instrument to effective observations and coding (Educational Research Foundation, 2007a, 2007b) were used and imported along with all documents, pictures and semi-structured interviews into a Computer Aided Qualitative Data Analysis (CAQDA) programme NVivo 11.

**Research Scope and Participants**

<table>
<thead>
<tr>
<th>Research Scope</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Schools</strong></td>
<td>7 primary schools</td>
</tr>
<tr>
<td><strong>Pupils</strong></td>
<td>27 boys, 7 girls</td>
</tr>
<tr>
<td><strong>Parents</strong></td>
<td>21 mothers, 3 fathers</td>
</tr>
<tr>
<td><strong>Primary Teachers</strong></td>
<td>15 female</td>
</tr>
<tr>
<td><strong>Classroom Observations</strong></td>
<td>168 hours</td>
</tr>
<tr>
<td><strong>Duration Of Material Gathering</strong></td>
<td>November 2014 to May 2015</td>
</tr>
</tbody>
</table>

This paper presents the emerging research findings from one school within the project (see table 1.2). Pseudonyms have been applied to all participants and the school name.

Scoil Hyde is a large vertical (junior infants to 6th class) primary school with an expanding autism unit attached to the mainstream school. Empirical materials presented here emerge from analysis of twenty-four hours of classroom observations, the semi-structured interviews with Bernie (the class teacher), and the parents of 3 pupils Ed, Cal and Bert (Doireann, Tara, Therese and Henry). All three pupils (Ed, Cal and Bert) in this class were aged between seven and eight years at the time of the observations and empirical material gathering.

**Emerging Research Findings**

During the interviews all four parents and the teacher suggest that literacy is about being communicative whether verbally or non-verbally. Therese, Bert’s mum suggests being literate is about being a communicative partner in a social relationship:

To be able to connect, to be able to connect with other people, to have the knowledge to be able to interact in conversation, to have an understanding of the world, to be able to sit and read a book and understand the words.

The observations from Scoil Hyde suggests a disconnect between the value parents place on all talking and the classroom staff’s response to all talking. The teacher (Bernie) initially identified all three pupils as ‘minimally verbal’. All three pupils presented throughout the observations with verbal repetitive stereotypical behaviours. Both Ed and Cal use echolalic behaviours (unsolicited repetition of previously heard words, phrases or sentences), and Bert was observed using palilalia (repetition of contextually correct self-constructed speech). Ed’s echolalic behaviours in particular also presented a means of communicating distress, he is evidenced repeating ‘sorry, sorry, sorry’ prior to opting out of an activity. Bert’s palilalia was well established and quite eloquent; in fact, he presented as a very chatty pupil with significant skills in initiating conversations. The observations when given to Bernie (the teacher) to reflect upon created a transformational learning experience for her. Bernie had always thought, from her autism training, that such behaviour had no real purpose and therefore was to be ignored. On reflection, she felt that she had misinterpreted the behaviour and that it is a form of communicative intent. Alongside this, parents expressed a value to their child’s echolalia and identified it as meaningful communication to be supported and encouraged. Cal’s mum, Tara in talking about language at home suggests:

I talk a lot so there is that chatter, chatter and (Cal) will chatter away, a lot of it is echolalia and repeating stuff that is probably read from a story, from a song, from a DVD or a video, that kind of thing. So it is important in the sense of communicating his wants, needs, all that kind of stuff.

Further teacher training is needed to support an exploration and understanding of some echolalic behaviours as a communicative intent. Prizant and Fields-Meyer (2015)
present that historically teachers have considered echolalia as ‘silly talk’ and were encouraged to ignore it or to apply adverse responses to it. They further contend that these behaviours are a ‘legitimate attempt to communicate’ (Prizant and Fields-Meyer, 2015, p. 40) and they propose that this behaviour is a verbal revisit to support metacognitive structures.

During the 24 hours of classroom observations there was no purposeful or facilitated social interaction observed with non-disabled peers. There was no observed movement of, pupils with autism out of the units, or mainstream pupils into the unit. This supports the findings of McCoy et al. (2014) and suggests a greater focus is needed on moving from the rhetoric of inclusion to a more practical approach for social and cultural progress.

Discussion

Prizant and Fields-Meyer (2015, p. 50) advocate a ‘listen, observe and ask “Why?”’ approach to encouraging communication skills development among pupils with autism. Being misunderstood for verbal behaviours can create a misinterpretation of social situations and lead to poor self-esteem (Prizant and Fields-Meyer, 2015). Autism units within mainstream schools are ideologically to provide specialised environments and methodologies to support early intervention, inclusion, teaching and learning (Parsons et al. 2009). Further research is needed to evidence the realities of these settings. While this broader research project will provide an insight into literacy skills development of pupils with autism, greater attention is needed to the professional development of the teachers and staff within these units.

References


Author Information

Carol-Ann O’Sioráín is a qualified Montessori and primary school teacher. She completed her Masters in Education-special education in Trinity College, Dublin in 2009. Currently, she is pursuing a PhD under the supervision of Professor Michael Shevlin. Carol-Ann is an adjunct researcher and lecturer in the School of Education, Trinity College, Dublin. Her research interests include special education/inclusion in early and primary settings, autism spectrum disorder, general learning disabilities, 22qDeletion syndrome, literacy, numeracy and teacher education. Carol-Ann is currently President of the Irish Association of Teachers in Special Education (IATSE).
Reflecting on the Lived Experiences of Blind/Vision Impaired People with a Focus on Improved Long-term Educational Outcomes

Patricia Mc Carthy

Introduction

There has been a history of exclusion and missed opportunities for blind/vision impaired young people within all realms of education. In the past these children were generally assigned to particular types of education, based on their impairment. This categorisation often led to unsubstantiated assumptions regarding their learning capabilities and, implied that as a result of impairment they inevitably had more apparent learning needs than their peers (Griffin and Shevlin, 2007). The current system of education in Ireland as it relates to ‘inclusion’ and ‘disability issues’ is in accordance with a range of legislation, including: the Education Act 1998; the Education for Persons with Special Educational Needs (EPSEN) Act 2004 and the Disability Act 2005. Findings included in this article are part of a study undertaken in 2009-2010 that examined in-depth the educational experiences of blind/vision impaired people, the factors that impact on these experiences and, issues impacting on transition opportunities (McCarthy, 2013).

This article concentrates on limited aspects of the overall study by focusing on the teaching and learning of Mathematics and the utilisation of technology. It is pertinent to acknowledge that while the collection of this data occurred approximately six years ago, the issues discussed in this article are still relevant for this student cohort. It has been recognised that the introduction of Project Maths, which is a revised mathematics curriculum at post-primary level, has not rectified access challenges and, may have exacerbated the difficulties for this student cohort. This is due to the increased visual dimensions which are a fundamental element of this mathematics curriculum (AHEAD, 2015). Furthermore, acquiring the necessary training and level of knowledge required to effectively use the appropriate technology is still a matter of concern for this student cohort.

Overview of pertinent literature

Watson (2004, p.108) argues that there is a risk that disabled people cease being regarded as individuals because “the commonality of their experience is all-important”. Expectations can be thwarted by societal attitudes towards disability, however research undertaken by Shah and Priestly (2011) and Peters (2010) indicated that resilience and agency are significant factors in enabling people to achieve life course opportunities.

Spungin and Ferrell (2007) argue that vision impaired students have the same curricular needs as all students, but due to vision impairment can experience difficulties when the usual methods of teaching and learning are utilised. The teaching and learning of mathematics has been identified as posing particular challenges for blind/vision impaired young people (Cahill, Linehan, McCarthy, Bormans, and Engelen, 1996; AHEAD, 2008; Twomey and O’Grady, 2012). This is significant as mathematics is a required subject for entry to the vast majority of programmes at Third Level (McCarthy, 2015). The presentation of mathematics is generally visual, two-dimensional, and nonlinear in nature (Cahill and Linehan, 1996). This can impose additional access barriers for blind/vision impaired people. Confusion with Braille notation and, the fact that the majority of Mathematics teachers do not know Braille mathematics notation (Karshmer and Bledsoe, 2002) also contribute to the challenges experienced by this student cohort.

UNESCO (2011) acknowledged the important role that technology plays in the lives of disabled people and Hesketh (1999) asserts that no group stand to gain more from advances in technology than blind/vision impaired people. Furthermore, McDonnell and Crudden (2009) state that the utilisation of assistive technology is a compensatory skill that allows blind/vision impaired people undertake tasks frequently performed by sighted persons. Assumptions exist that suggest that “when assistive technology is provided the aim of access is achieved” (Söderström and Ytterhus, 2010, p. 311). However, it has been acknowledged that assistive technology is generally “reactive in design, and by the time accommodations are made mainstream technology has moved another step forward” (ibid).

Methodology

In Ireland there has been a dearth of research conducted involving blind/vision impaired people as primary participants (AHEAD, 2008; McCarthy, 2013). This paucity has resulted in legislation that has not generally been informed by the lived experiences of this section of the population. This research was qualitative in nature with a life history approach utilised for data gathering purposes. It was hoped that this approach would ensure the voices of participants were captured by the research process in ways
that reflect their views and recognize them as active social agents” (Shah, 2006, p. 207). In-depth unstructured and semi-structured interviews were conducted with twenty three blind/vision impaired people (fourteen male nine female), ranging in age from late teens to early forties. Recruitment of participants was largely through voluntary response to research publicity. Information regarding the research was disseminated to all universities, six Institutes of technology, a number of service providers, a resourced mainstream post-primary school and to blind/vision impaired people known to the researcher.

Findings

The data presented below exemplifies some of the issues that emerged around the teaching and learning of mathematics and, the utilisation of technology by blind/vision impaired people. These are illustrative of findings that arose in the study undertaken in 2009-2010.

Expectations can be socially constructed and perceptions around disability can be significant in this regard. The following two excerpts illustrate how low expectations can impact on experience and outcome:

...she (participant’s mother) had been told by the school that...with the kind of jobs we’d be getting we wouldn’t need things like Irish and Maths (Maria, 42 years)

Well if you know that people haven’t got high expectations for you, you’re not going to have them for yourself at thirteen, fourteen (John, 31 years).

While access to the school curriculum appeared to have generally improved for blind/vision impaired people, access to the Maths curriculum was particularly challenging for the majority of participants in this study. The following excerpts indicate the challenges experienced and illustrate some of the barriers encountered by participants when accessing the Maths curriculum:

Maths I found hard...for a sighted person to try and explain graphs to you they just don’t understand that say...the letter L in print they think it should feel the exact same in Braille (Lisa 26 years).

I was advised to consider dropping Maths. I declined...on principle and because I thought I might need it...I do not think that I got a fair chance (Joe, 23 years).

The majority of those who participated in this research had access to a variety of technologies including both mainstream and assistive technologies. The availability of assistive technology can be an enabler to blind/vision impaired people as it provides greater access to the curriculum at various levels. The following excerpt illustrates this and demonstrates how appropriate provision can impact on experience:

...one of the things I found quite useful... was this device called the “Opti Verso” it’s kind of a camera thing it’s...connected by a USB and you hook it up to a laptop so on half the screen...you have your word document and the other half is a camera and you can zoom in and out on the blackboard and you can take snapshots of a point in time of what’s up there (Alan, 21 years).

However, lack of knowledge regarding technology and incompatibility issues between mainstream and assistive technologies imposed access barriers for participants. This is illustrated in the following excerpt and demonstrates how experience can impact on outcome:

I did not know of a programme which would allow me to write the proper (maths) notations on my laptop. Nor was my screen reader capable of reading these back at the time (Joe, 23).

Discussion

Expectations can be thwarted by societal attitudes towards disability. However, similar to findings by Peters (2010) and Shah and Priestly (2011) evidence of resilience and agency were demonstrated by participants in this research. This was significant in enabling participants to manage learning environments and achieve life course opportunities even when faced with considerable challenges including systemic, institutional and attitudinal barriers.

It has been argued that barriers to access are “associated with feelings of being limited or at a disadvantage” (Kim and Williams, 2012, p. 846). While access to the school curriculum has generally improved for blind/vision impaired young people, access to the mathematics curriculum continues to pose barriers. A range of factors impact on this, including the teaching and learning methodologies utilised and that the presentation of mathematics is generally visual, two-dimensional, and nonlinear in nature (Cahill and Linehan, 1996). Technologies in general and assistive technologies in particular have enhanced access to the school curriculum for blind/vision impaired young people. However, it must be recognised that assistive technologies are not the sole solution to access barriers.

Conclusion

This study has implications for policy and practice at many levels including
effective access to the school curriculum, including the mathematics curriculum and, adequate and appropriate access to technologies. While access to the curriculum has improved for this student cohort it was apparent that substantial barriers still exist. At the compulsory school level access to the mathematics curriculum presented greatest difficulties. Therefore greater emphasis needs to be placed on developing appropriate teaching and learning methodologies that facilitates access to the mathematics curriculum for this student cohort. This necessitates that teacher training programmes are cognisant of this and develop their programmes accordingly. Furthermore, it is essential that adequate supports are made available to both teachers and blind/vision impaired students to ensure access to required specialised knowledge. Awareness of accessibility at all levels of the education system should be considered a priority rather than an afterthought.

The increased utilisation of mainstream and assistive technologies has improved significantly over time for blind/vision impaired people. Having consistent policies around accessible technologies would enhance access to all aspects of technology for blind/vision impaired people. An emphasis on accessible technology as opposed to simply assistive technology would take greater cognisance of the diversity of people using mainstream technologies. In conclusion it is imperative to recognise the importance of involving blind/vision impaired people in the research process to ensure that future policy and practice is informed by their lived experiences.

References


Author Information

Dr Patricia McCarthy is an Associate Researcher within the School of Education in Trinity College Dublin where she is actively involved in the research community. Her research focus is in the area of inclusion and she has a particular interest in the educational experiences of vision impaired young people. Her ontological position as a disabled researcher has been instrumental in the development of her research. Patricia gives guest lectures in many areas including Inclusive Education, Inclusive Research Practices and Disability studies and provides CPD to the education, training and disability sectors. She is also a thesis supervisor and peer reviewer.
‘We are all like a family here’: Qualitative insights on the role of youth cafés in supporting the health and well-being of young people

Bernadine Brady, Lisa Moran and Cormac Forkan

Introduction

While there have been many positive policy developments for young people in Ireland over recent decades – including increased access to and participation in education – issues related to the well-being of young people are matters of public concern. Ireland has one of the highest rates of youth suicide in the European Union (PISA, 2015), while recent research demonstrated that one in three young people had elevated levels of emotional distress (Dooley and Fitzgerald, 2013). Research with young people shows that the social resources available to them are critical in terms of their ability to negotiate the challenges of modern life. In particular, supportive relationships with at least ‘one good adult’ remain critical to the well-being and transitions of young people (Dooley and Fitzgerald, 2013; Thomson, 2007). Community based supports and services are widely accepted as having a key role in ensuring the safe and healthy development of young people (DCYA, 2015).

The youth café model has emerged as a key form of policy provision in Ireland over the past decade with over 160 cafes now in operation (Forkan et al, 2015). A youth café is a safe, relaxed and inclusive meeting space for young people, primarily ranging in age from 12-18 years. Youth cafés are drug and alcohol free settings, designed for recreation, entertainment, information, advice and, in many cases, direct service provision. Drawing on qualitative research with young people in Ireland regarding the youth cafe model, this paper focuses specifically on the perceived outcomes of the youth cafe in terms of health and well-being for young people.

Methodology

From the 163 identified youth cafes in Ireland, a purposive sample of 10 youth cafés was selected, to ensure a range of urban / rural areas, scale, standalone or integrated, etc. The café staff and volunteers were asked to recruit a group of young people from different age groups who they felt would represent typical café users. A total of 102 (55 males, 47 females) young people took part in focus groups across the 10 cafés. Young people were asked a range of questions regarding what the youth cafe means to them and what they gain, if anything from attending. A variety of methods were used, including post-its and small group discussions. Ethical approval for the study was granted by the Research Ethics Committee of the authors’ institution. Focus group data was transcribed in full and analysed inductively using thematic analysis.

Findings

Young people see youth cafés as informal, relaxing, safe, accessible and fun spaces to ‘hang out’ with friends. In terms of the benefits derived from youth cafe attendance, themes related to health and well-being emerged strongly. For the purposes of this paper, we focus specifically on findings related to social support; belonging and connection; personal and identity development; safety and alcohol and drugs.

Feeling supported

The benefits of positive social relationships are well documented, including helping to ‘buffer’ or prevent stress (Frey and Röthlisberger, 1996) and to support people to cope with challenges and issues in their lives (Cohen and Willis, 1985). The youth café is generally seen as a supportive space and an arena in which support from staff/volunteers and peers can be accessed. Young people spoke of the youth cafés as somewhere they can relax and escape from stresses they may be experiencing in other areas of their lives. The study findings indicate that young people see this support as enabling them to cope with challenges, be they minor or major.

It makes me happy mentally as it makes me happy being here and there is always someone here if I need to talk to someone. (Café 1)

If you’re upset, they’ll try and help you. Like, everyone will. And if your friends can’t help, there are loads of volunteers who will help … The volunteers won’t like nag you or tell you what to do. They won’t tell anyone or they won’t judge you. They treat you like an adult … you’re on the same level. There’s no condescension. They will help you, but they won’t lecture you … I’d be happier to go to a volunteer than a teacher any time. (Café 10)
Belonging and connection

The importance of a sense of belonging in terms of mental health has been underlined by a recent study by Cheng et al (2014), which found that young people living in economically deprived neighbourhoods showed higher levels of depression, but that feeling a sense of connection to their neighbourhood was positively associated with levels of hope and negatively associated with depression among young people. Young people used the terms ‘belong’ and ‘belonging’ frequently when referring to the youth café. The youth café was described by some as being ‘like a community’ and as enhancing their connection to the community in which they live. Some participants were of the view that young people are often not included in communities, an issue that the youth café addresses.

We feel like we belong. It gives us friendship and we feel like we belong. (Café 4)

Personal and identity development

Developing a coherent sense of identity that is distinct from those of parents or peers is a key developmental task of adolescence (Lalor et al, 2007). Young people were of the view that youth cafés play an important role in terms of the personal and identity development of young people. Many participants spoke of having gained in confidence and become more outgoing as a result of coming to the youth café.

I used to be a very closed-off person. I wouldn’t leave the safety of my own room. (Café 10)

Safety

Young people, particularly in disadvantaged urban areas, spoke of how, on the streets, they risked getting into fights and other trouble, while bullying and peer pressure often lead to inappropriate and risky behaviour. In this context, the young people particularly valued having the youth café as a safe place to socialise:

There are loads of fights in the area. Yeah, we feel safe here. (Café 9)

The staff make me feel safe. They helped me not to get in with the wrong crowd. I listened to them. (Café 1)

In addition to avoiding danger on the streets, some young people referred to the youth café as a place of respite where they could ‘escape’ the pressures they felt at home and/ or at school.

It’s nice to have a place to call home when you have stuff going on at home and at school. (Café 2)

Young people also used the term ‘safe’ to refer to how they feel when in the youth café, due to the fact that everyone is accepted for who they are and because bullying is not accepted.

When I’m outside of here, I feel way more self-conscious about what I do and what I say and how I look. But the second I walk back in here, I feel a million feet tall. I don’t have to worry if I say something stupid or act like an idiot because I’m accepted. There are no worries, you know. (Café 10)

Alcohol and drugs

Some young people, particularly in older age groups, said that the youth café helped them to avoid or reduce alcohol and drug use. For example, one female participant described how the youth café helped her to control her own patterns of substance abuse as follows:

When I started to come here, I started to feel differently about myself … I didn’t feel under pressure to be anything other than myself and I definitely smoked and drank less because I didn’t feel that I had to do it, you know. (Café 7)

Similarly, a group of male participants also attributed positive changes to their smoking, drinking and drug-taking habits because of their involvement in the youth café:

Definitely it’s because of here … It gives us something to do and if we were outside, to be honest, we’d be drinking now and getting into trouble and I know I definitely drink and smoke less because I’m here and because it isn’t allowed. (Café 9)

Conclusion

Young people taking part in this research see the youth café model as a means of enhancing their connections with their communities, providing them with support, promoting personal development and helping them to stay safe. Youth cafés were seen to have particular significance for young people living in disadvantaged urban areas who valued the café space as a refuge from stress experienced at home, school and in the community. At a time of significant concern over youth mental health, the findings underline the importance of community based provision in promoting
and safeguarding the health and well-being of young people. While acknowledging the limitations to generalisability of the study, it can be argued that the findings appear to validate the government’s decision to invest in the youth café model. For many youth cafe stakeholders who took part in the research, however, the resourcing of youth cafes to ensure their sustainability into the future was the key issue they would like to see addressed by government.

References


Author Information

**Dr. Bernadine Brady** is a Lecturer in the School of Political Science and Sociology and has been a Researcher with the UNESCO Child and Family Research Centre, NUI Galway since 2003. She is an experienced mixed-methods researcher, with particular expertise in relation to children’s policy and services. In recent years, Bernadine was lead researcher on evaluations of the Foróige youth citizenship programme and the Big Brothers Big Sisters Programme in Ireland and has previously undertaken studies in relation to children’s participation, family welfare conferencing and young carers.

**Dr. Lisa Moran** is a post-doctoral researcher at the UNESCO Child and Family Research Centre at NUI Galway. Lisa’s research expertise is in relation to youth, children and environmental sociology. She is currently working on a study on outcomes for children in care in Ireland.

**Dr. Cormac Forkan** is the Programme Coordinator of the BA in Youth and Family Studies at NUI Galway. His primary research interests are in the areas of youth work and adolescent development, social support and evidence-based practice for community-based youth and family interventions. He has led a programme of research commissioned by the Office of the Minister for Children and Youth Affairs on Youth Cafés in Ireland.
Children and Young People’s Participation in their Everyday Lives: Evidence Based Policy

Deirdre Horgan, Catherine Forde and Shirley Martin

Introduction

Since the Irish Government ratified the United Nations Convention on the Rights of the Child (CRC) in 1992, there has been significant progress in relation to Article 12, more commonly known as the ‘participation’ Article of the CRC. In recent years the Citizens Participation Unit of the Department of Children and Youth Affairs (DCYA) has been at the forefront of participatory initiatives, mechanisms and structures for children and young people which support the implementation of Article 12. Key policy and legislative changes which support Article 12 CRC are the inclusion of Article 42(A) entitled “Children” in the Constitution and also the publication of the National Framework for Children and Young People (2014) which has as one of its outcomes that children will be respected, connected and contributing. Further affirmation of the growing recognition of the right of children and young people to participate was the publication of the first national policy on children and young people’s participation in decision-making in 2015 (DCYA, 2015).

Aims of the Research

This study focuses on children and young people’s participation in decision making in their everyday lives. It seeks to elicit children and young people’s views on what might improve their opportunities for voice and participation, as well as the level of influence they could effect within their home, school and local community. The study provides a snapshot of the nature and scope of children and young people’s experiences of decision-making at home, in schools and in their communities (Horgan et al., 2015).

Literature

Much national and international research on children and young people’s participation and decision making to date has focused on the opportunities offered by formal channels (Martin et al., 2015) and analysed the extent to which children and young people interact with formal participation and decision-making structures in schools (Smith, 2007; De Castro, 2012; Cosgrove and Gilleece, 2012) and communities (Davey et al., 2010; Vromen and Collin, 2010). However, there is limited empirical data concerning the extent to which children participate or have a voice in the everyday activities of daily life, particularly in the home (Cherney, 2010; Davey et al., 2010; Bjerke, 2011). Generally, research identifies the home as the space most conducive to children and young people’s participation (Davey et al., 2010). There is much literature on schools not providing opportunities for meaningful participation and that such denial of opportunities to influence decisions affecting them is a real cause of concern for pupils (Harris, 2009; Pople, 2009). Other research indicates that children’s involvement in decision-making in the community has remained static and based on formal initiatives (Fleming, 2013).

Methods

The study was informed by Lundy’s (2007) model of conditions for meaningful participation and Percy-Smith’s (2010) understanding of participation as the practice of citizenship in the informal and formal spaces of everyday life. It involved child participatory qualitative research with children and young people aged seven to seventeen years in three distinct geographical locations in Ireland: urban mixed-income, urban low-income and rural mixed income. In total, ninety four children and young people were involved in this study as respondents in focus group interviews and as advisory group members. Thirty four parents, teachers and community stakeholders were also interviewed. A project Steering Group was established at the outset to guide the research. It comprised the project team, members of the DCYA Participation Unit, a representative from the Department of Community, Environment
and Local Government, and a number of key stakeholders from schools and youth and community settings as well as a parent representative from a parent advisory group. Both a Children Advisory group (aged 7-12) and a Young People’s Advisory group (aged 12-17) were established to ensure that the project maintained its focus on issues that children and young people considered to be of importance to them in their everyday lives. Moreover, they assisted in the development of the data collection instruments ensuring that they were age appropriate and relevant for use in the data collection, and undertook some initial data analysis.

The study utilised child-centred participative research methods and sought to provide fun, safe spaces for the children and young people who took part in the research (Barker and Weller, 2003). The research instruments were all developed specifically for this project and included visual, verbal methods and other interactive methods that helped capture children and young people’s lived experiences of participation such as games, wall charts, floor mats, child friendly leaflets on the UNCRC and the project itself, and semi-structured focus group/ interview schedules specific to children aged seven to twelve years and young people aged twelve to seventeen years. Data was thematically analysed and initial validation and prioritisation of themes was conducted with the child and youth advisory groups.

Findings

That children and young people experience different cultures of participation as they transition between different contexts and settings in their daily lives is evidenced in our research. Children and young people who participated in this research generally felt that they had a voice and some level of influence at home. However, there was also evidence of parents engaging in tokenistic practices in terms of listening and negotiation. Consumption activities such as food, clothes, leisure, as well as friends were key areas for participation. Children and young people generally accepted that parents have greater influence over some issues, with increasing negotiation as they grew older.

Child and youth participants were largely dissatisfied with their level of input into decision making processes in school. They had very low expectations of schools being participatory sites and recognised that they had little say in anything apart from peripheral matters in school. They generally viewed schools as being hierarchical institutions where even formal participation structures, such as student councils, were not experienced positively.

Finally, in relation to their community children and young people expressed concern about a number of issues - crime, personal safety, education, facilities for young people, and the environment. They were either ambivalent or dissatisfied with their input into local decision making processes. Apart from those involved in youth clubs or projects, who were extremely positive about their experiences of ‘voice’, children and young people discussed a lack of consultation at local level.

Discussion

The Action Plan in the National Participation Strategy (DCYA, 2015), citing this research, recognises the role of the State in supporting parents’ understanding of children and young people’s right to participate in decisions that affect their lives (DCYA, 2015, p. 13). Objectives 1 and 2 of the Strategy, further, state that children and young people will have a voice in decisions made in their local communities (housing, regeneration, recreation facilities, transport plans) and in decision-making in early education, schools and the wider non-formal education systems (curriculum, behaviour and bullying policies). It sets out an implementation plan involving legal, policy, and infrastructural supports to effect such change.

The commitment to consulting with children on all policies and issues affecting their lives, as well as the recognition of the need for improvement of the effectiveness of student councils, as contained in the Strategy, is welcome. However a cultural shift in adults’ attitudes towards children and young people is evident from our study as well as a clear need for training in participation of adults living and working with children and young people.
decision-making. Finally, as evidenced in our study, there is a critical need for more everyday spaces and places such as youth cafés and youth projects where children and young people can benefit from the experience of participation and active citizenship and gradually take on more responsibilities and active roles.

References


There is a critical need for more everyday spaces and places such as youth cafés and youth projects where children and young people can benefit from the experience of participation and active citizenship.

Author Information

Dr. Deirdre Horgan is a lecturer in social policy in the School of Applied Social Studies and Deputy Director of the BA (Early Years and Childhood Studies) at University College Cork. Deirdre has research interests in children and young people’s participation, children’s rights and citizenship, child welfare and protection, childhood migration and child participatory research. She has conducted a number of funded research projects and was most recently Principal Investigator on an Irish Research Council funded project Children and young people’s experiences of decision making at home, in school and in their communities (DCYA, 2015).

Dr. Catherine Forde is a lecturer in the School of Applied Social Studies, University College Cork. She has conducted research and published on children and young people’s participation, community development and state-civil society relationships. She was a co-investigator on the ‘Young People as Social Actors’ research project (2010-2013), and the ‘Children and Young People’s Experiences of Participation in the Home, School and Community’ research project (2012-2013); both projects were funded by the Irish Research Council and sponsored by the Department of Children and Youth Affairs. She is co-author of Social Work and Community Development: A Critical Practice Perspective (2015; Palgrave Macmillan).

Dr. Shirley Martin is a social policy lecturer in School of Applied Social Studies and is the Co-Director of the BA Early Years and Childhood Studies in University College Cork. Her research interests relate to early years care and education, educational disadvantage and partnership with parents in educational settings. She has also conducted a number of funded research projects in the area of child and youth participation and has developed a number of youth-led research projects.
The Children’s Research Network for Ireland and Northern Ireland

The Children’s Research Digest is a publication of the Children’s Research Network for Ireland and Northern Ireland. The Network is a membership organisation that aims to support the research community to better understand and improve the lives of children by:

- Creating and maintaining an inclusive, independent, non-profit network
- Sharing information, knowledge, experience, learning and skills.

Since its launch in 2010, the Network has over 300 members from academia, government, voluntary and independent sectors of children’s research on the island of Ireland. The Network seeks to build bridges between researchers in the various sectors of the community and develop structures to promote the sharing of information, learning and good practice. We hope that the Children’s Research Digest will contribute towards the sharing of such learning by members both with other members and among the wider research community. Other ways in which learning is shared include an annual conference, thematic sub-groups (such as the Early Childhood Research Group), seminars throughout the island, PhD symposium and project days where links are built between practitioners and researchers.

The Network accepts new members at any time of the year. As a member you are entitled to reduced cost or free attendance at training sessions and other events, mailings on upcoming events, news and jobs in the sector, access to our LinkedIn group, membership of sub-groups and the possibility to publish in the Children’s Research Digest. We also produce a Members Directory with listings of names, organisations, contacts details and research interests of members.

12 month membership is currently:

- €25 full-time employed
- €15 part-time employed or retired
- €10 students and unwaged

You can join or renew at www.childrensresearchnetwork.org

The Network is supported by The Atlantic Philanthropies and the Department of Children and Youth Affairs.