



## Evaluation of the Tailored Programmes of Family Support & Children's Contact Support Service delivered by Meath Springboard



An Ghníomhaireacht um  
Leanaí agus an Teaghlach  
Child and Family Agency

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## Foreword

Navan Springboard Ltd. was established in 1998 with the aim of supporting children and their parents where there were child welfare and neglect concerns. Initially their work was focused in Navan and the immediate surrounds but the service has evolved to a county wide remit in response to need. The Company changed its name to Meath Springboard Family Support Services CLG in 2018 to better reflect their service delivery. The Company continue to have a strong focus in supporting the welfare of children. Navan Springboard was primarily funded by the state through the regional health authorities and since 2014 they have been funded by Tusla, The Child & Family Agency.

The service provision has grown organically, from supporting 15 families in 1999 to supporting 450 children and 234 families in 2021 alone. Over the years staff have been privileged to work with and support positive outcomes for thousands of children and their families. The feedback from parents and children has generally been very positive. The Board of Directors, management and staff team agreed in late 2020 to commission an independent external researcher to evaluate the core services of Tailored Programs of Family Support and the Children's Access Support Service. The questions were simple; 'are the services contributing positively to the lives of children and what can be done to improve them'?

Ms Davina Brady was awarded the tender to complete this external review and worked with an in-house Steering Group comprising of Team Manager Sé Fulham, Helena Feeney and Alacoque Clarke, both Family Support workers. This evaluation was undertaken from Sept. 2021 to Feb 2022. As part of the review there were 84 individual inputs from children, parents, foster carers and professionals who avail of or work with the services provided by Meath Springboard Family Support Services CLG.

It is very heartening as the Chairperson to read how valued and impactful the work of the service is. We have moved from anecdotal evidence of effectiveness to demonstrative 360 degree evidence. Parents, foster carers and professionals believe in the work of the service and its effectiveness in improving the lives of children, they strongly recommend families in need to engage with the services. I am particularly struck by the voices of the children consulted as part of this evaluation, they speak so clearly of the positive impact of the practical, social and emotional support provided by Meath Springboard Family Support Services.

The evaluation demonstrates the effectiveness of the services evaluated, and the key ingredients that support the service delivery. As the Chairperson I wish to thank Davina for her work on this evaluation, the children, parents, foster carers and professionals who took part. Most importantly I wish to thank the staff and management of the service, it is their ongoing commitment and hard work that lead to the positive outcomes for children and their families as highlighted in the report.

Christina Nestor

Chairperson

22/3/2022

## Executive Summary

Pinkerton et al. (2004) defines family support as

*“Both a style of work and a set of activities which re-inforce positive informal social networks through integrated programmes. These programmes combine statutory, voluntary, community and private services and are generally provided to families in their own homes and communities. The primary focus is on early intervention aiming to promote and protect the health, wellbeing and rights of all children, young people and their families, paying particular attention to those who are vulnerable or at risk.”*

In Ireland there are 10 principles of family support which influence the development of services. Along with these principles, developed by Pinkerton et al. (2004), family support services follow comprehensive national policy to guide the work they do. Some of these include, What Works in Family Support (Tusla, 2013), Better Outcomes, Brighter Futures – the National Policy Framework for Children and Young People - 2014-2020, The Participation Toolkit 2015, Tusla’s Quality Improvement Framework 2016 and the First Five Policy Paper for the First Five Years of Life 2019. The Centre of Effective Services also published a series of booklets called ‘On the right Track’ in 2016. Informed by the evaluation of over 50 programmes, effective ways of working with children and families have been identified. For Children Contact services the One Family and Barnardo’s research completed in 2013 is also a significant tool when framing how services work. These are all explored in full in Section 4 with several other relative National and International theories and approaches.

Family support services are one of the many agencies on the front-line for early intervention in Ireland. As a country Ireland has been developing prevention and early intervention infrastructures for nearly 5 decades with the first early-intervention programme in the 1970s in inner city Dublin. After years of exploring what works best when supporting families, services in Ireland now offer family support from pre-birth to youth ranging from parenting groups, community activities, brief supportive interventions and tailored programmes to support what best meets a families particular needs. This development can help prevent negative outcomes for the children and their families. Many parents now face parenthood alone without any extended family or group of trusted friends to support them during this crucial point in their life.

This ‘bread and butter source of support’ (Whittaker and Garbarino 1983) and families connectivity to the community around them is vital to the healthy functioning of a family ((Wallerstein, 2006, Kenny, 2007, Campbell, Pyett, & McCarthy, 2007, Ife, 2016). Family Support Services can help to provide this.

County Meath is the 14<sup>th</sup> largest county in Ireland with the 6<sup>th</sup> largest population. Meath has a population of 195,044 people, (CSO, 2016). Navan, Ashbourne and Laytown have the highest populations of the urban areas in the County.

In Census 2016 there were:

- 42,934 Children under the age of 12 living in Co Meath
- 33,921 Families with Parents as couples and all children in household are under 15yrs
- 16,542 Families with Parents as couples and with children under and over 15yrs
- 4,370 Children under 15yrs living in one parent families where Mother is main caregiver
- 402 Children under 15yrs living in one parent families where Father is main caregiver
- 2,760 Children live in one parent household where children are both under and over 15yrs

There are 11,141 children in Meath 'at risk of poverty' with 6, 570 children experiencing 'consistent poverty' (Meath CYPSC, 2018). According to Meath County Council (2020), 192 families presented as homeless to local authorities and in their quarterly reports for the second half of 2021, Tusla received 1288 referrals in County Meath. The Tusla operational area of County Louth & Meath had 418 children in care according to the report (Tusla, 2021).

Meath Springboard was set up as one of the first pilot family support services under the name Springboard in the late 1990s. They have been providing family support in the heart of Navan and now throughout the county for over 20 years. As an organisation they offer children and families a meaningful service which supports them to become confident to improve outcomes for their children. Meath Springboard offer families with children living in County Meath 4 key services. These include;

- Tailored Programmes of Family Support (For families with children from pre-birth to 12 years of age)
- The Children's Contact Service
- Counselling Service
- Parenting Groups

Funded by Tusla, Meath Springboard is guided by legislation and national policies. Their approach to family support is client-centred, community-based, holistic and strengths-based. They provide a safe place to work with children and families. Tusla reported nearly 70,000 families were referred to them in 2020 through other agencies and 22,356 of these families were supported through family support services (Tusla, 2021). Meath Springboard Family Support Services engaged with and supported 370 children and 177 families in 2020 and this increased substantially to 450 children and 234 families in 2021.

Meath Springboard have the capacity to engage 24 families in a Tailored Programme of Family Support at any one time and they can facilitate 30 Child Contact sessions per week.

Meath Springboard believe these services improve the outcomes for the children and their families and as part of this evaluation they wanted to consult all stakeholder groups. In total, the evaluation sought inputs from 7 stakeholder groups.

### Evaluation stakeholder groups

- Children
- Young people
- Parents
- Foster parents
- Service stakeholders
- Meath Springboard staff
- Board of Management Members

The evaluation was conducted using a mixed method approach. Participants were invited to take part in an online survey and/or an interview with the evaluator. The response to this from all stakeholder groups was very high in general. This was especially the case for service stakeholders with nearly all of those invited to participate taking part in the evaluation. The final number of inputs was 84. In total 68 surveys were completed and 16 interviews were conducted. Different question sets were designed for each research group and surveys were designed to understand better the overall satisfaction of stakeholders and the outcomes which arose as a result of their engagement with Meath Springboard.

## Number of participants

- The voices of 5 children / young people were heard through interviews.
- 18 parents who had received family support completed the survey and 2 were consulted through interview.
- 4 parents who were engaged with Access completed the survey and 2 were consulted through an interview.
- 11 foster parents completed the survey and 1 foster parent agreed to be interviewed
- 35 staff members from 18 different services (public and private) completed the survey and 2 Tusla staff were consulted through interview.
- 2 support workers from Meath Springboard were interviewed and 2 of the Board of Management members were also interviewed.

## Participating services

36 staff from 18 services and organisations completed the Online Satisfaction Survey for Service Stakeholders. Participants were given a list of roles and asked to tick the one that best suited their position. The service list is shown below. Other services and organisations who participated included Meath CYPSC, An Garda Síochána, 2 counsellors in private practice, a private play therapist and a Domestic Violence service.

ANSWER CHOICES	RESPONSES	
▼ Tusla Child Protection Service	20.00%	7
▼ Tusla Prevention Partnership and Family Support Service	14.29%	5
▼ HSE -Public Health Nurse	0.00%	0
▼ HSE - Other	5.71%	2
▼ School/ Education Service	17.14%	6
▼ Local Authority	2.86%	1
▼ Family Resource Centre	14.29%	5
▼ Community group	8.57%	3
▼ Other (please specify) <a href="#">Responses</a>	20.00%	7

## The profile of needs for families

### Parents being supported through Tailored Programme of Family Support

18 families who engaged with Meath Springboard through the Tailored Programme of Family Supports completed surveys. These families had 60 children collectively.

- 44% of these families lived in accommodation which was privately owned
- 11.11% were privately rented
- 33.33% were rented with assistance from the local authority
- 11.11% lived in local authority and or housing agency accommodation
- 27.75% of these families main income came from employment and
- 61.11% came from a social welfare payment
- 11.11% stated other but did not specify

When parents were asked what best describes the adult relationship in the house, over half of the participants described themselves as a lone parents, just over 22% as married and living together and just over 16% of parents describing themselves as married and separated.

Parents were asked to describe what was happening for their family which brought them to avail of support from Meath Springboard Family Support Services. 17 of the 18 parents who completed this survey responded to this question. The reasons parents engaged with Meath Springboard include;

- Marriage break up
- Relationship problems with father/mother of child
- Domestic Violence
- Lone parent and struggling
- Mental Health issues
- Bereavement
- Support with substance misuse
- Parent and child welfare needs
- Support with child being in the care of Tusla
- Support dealing with an alcoholic partner

When asked how they became involved with Meath Springboard, 39% were referred/made aware of the services through Tusla Social Work Department and a further 11% were through a Tusla staff member. The remaining 50% came through self-referral, school staff, Public Health Nurse, Counsellor and through attending parent groups at Meath Springboard and Mental Health Services. While all of these parents in this group received tailored support, 33.33% were also supported through Parenting Support Groups and a further 11.11% were supported through the Counselling Service.

### Parents being supported through the Children's Contact Service

There were 4 parents availing of Children's Contact Centre support who completed the survey and a further 11 foster parents also completed it. Of those birth parents who participated:

25% of these families lived in accommodation which was privately owned  
50% rented from a private landlord and  
25% lived in Local Authority and or housing agency accommodation  
50% main source of income was through employment and  
50% were in receipt of a social welfare payment.

When asked what best describes the adult relationships in the household the children live in,

25% of parents stated they were married and living together.  
50% stated they were lone parents.  
25% stated the adult relationship in the house was best described as partners raising children together.

All of the birth parents who completed the Children's Contact Service survey stated that they were engaged with family law proceedings when they first contacted Meath Springboard. When they were asked to describe what the situation was in their family that brought them to avail of Access Support from Meath Springboard, 3 out of 4 parents stated that some form of domestic abuse had occurred. One parent stated that a barring order was in place with the father of the child. Criminal activity and addiction of the other partner was also stated as a concern. All parents who completed the survey were referred to the Children Contact Service. 25% came from a solicitor, 25% from the Tusla Social Work Department and 50% of Children Contact parents were



ordered by the courts. Parents were asked to state whether they were supported by other Meath Springboard services. 1 of the 4 parents being supported through the Children's Contact Service was also supported through Meath Springboard Counselling service. The other 3 parents stated 'other to this question' with 1 parent stating their child also received play therapy support from Meath Springboard.

## Findings from the Survey

### Overall satisfactions of services

- 36 professionals from other services completed the survey and 19 of them referred clients to Meath Springboard. 100% of these referral agents were satisfied with the service their client received. 100% believed that Meath Springboard helped their client and 100% of referral agents would refer other clients to the service.
- 18 parents who received support through the Tailored Programme were asked if they were satisfied with the support they received, of the 17 who answered this question, 100% of them said they were. 100% of these parents said that they would recommend Meath Springboard to other parents.
- 4 parents who received support through the Children's Contact Service were asked if they were satisfied with the support they received and 75% said they were satisfied. 1 parent (25%) disagreed with the statement around satisfaction noting that they did not feel that their child's wishes were listened to.
- 11 foster parents completed the survey. 100% of them were satisfied with the service they received.

### Impact of services on children and families being supported through the Tailored Programme of FS

The report shows a comprehensive view of the findings for all stakeholder groups. For the purpose of the Executive Summary, a small segment has been taken from this report to show the level of impact Meath Springboard has had on families. This evaluation found that Meath Springboard supported families in three ways; practically, emotionally and socially. The findings of this evaluation show that the support offered and delivered to families has had a positive impact on the lives of the families overall. Through the survey, parents who had received family support (18 parents) were asked if they felt that their family's situation had improved as a result of their involvement with Meath Springboard and 78% *agreed* that it had, 11% *strongly agreed* that it had and 11% were *undecided*. For birth parents using the Children's Contact Service (4 parents), 50% of parents *strongly agreed* that their family's situation had improved while 25% were undecided. 25% *strongly disagreed* with the statement. For foster parents 30% strongly agreed, 20% agreed, 40% were undecided and 10% disagreed with the statement.

**Active and Healthy:** Parents who received Tailored Programmes of Family Support were asked if they believed Meath Springboard encouraged their family to actively address their physical and mental health. 17 (of 18) responded and 13 *agreed* (76%) that they had, 3 *strongly agreed* (18%) and 1 was undecided (6%). Parents were given a list of issues and asked to show which ones they received support for. Communication and coping with stress were the main areas parents got help with. Feeling unhappy (44%), low self-esteem (39%) and feeling isolated (39%) were areas that many families received support for.

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*"Springboard definitely impacted my life positively. I felt before Springboard, school was really hard and expressing my feelings was really hard and I felt like I had to keep everything in to keep my Mam happy. I feel like I had to take on a big responsibility at a very young age and I had no one to talk to. My Mam was upset and going through stuff and I didn't want to add to it so knowing Springboard was there was a great help as I could talk to them. I felt like after Springboard it took a lot of stress off me and I had*

*more time to do other things, like taking my studies seriously, taking up sports – I just felt like I was a much happier person with the help of Springboard.” -Young person*

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**Achieving:** Parents were asked if Meath Springboard encouraged them and their family to actively participate in education and learning. 7 of 18 (39%) participants *strongly agreed* with the statement and a further 7 (39%) *agreed*. 3 were undecided. Personal development (50%) and problem solving (39%) were amongst the issues which a large number of parents received support with, leading to improved outcomes in learning and development.

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*“They helped tremendously with school and getting me and my sibling’s places in secondary school, they helped us sort out the book rental scheme and even got us involved in sports camps in the summer.” - Young Person*

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*“My behaviour is definitely better in school since I done work with Springboard.”- Child*

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**Safe and secure:** Parents were asked if Springboard has helped them to ensure the safety and wellbeing of their child while at home. 50% *agreed* that they had helped them and 44% *strongly agreed* and 6% were *undecided*. The main areas that parents required support in around safety and wellbeing included family and relationships (56%), adult relationships (39%) and developing daily routines (39%). 22% of parents received support around domestic violence and 22% received support with housing.

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*“Without Springboard being involved in my journey the last 6 years, I don't think I would have gotten as far as I have. They have helped me grow and learn. We as a family are settled in our own home 3 years now, we have a good routine and everyone is a lot happier!” – Parent*

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**Connected and Respected:** Families were asked if since attending Springboard, their involvement with family, extended family and the community had improved. For 89% of parents, it had improved, 72% *agreed* and 17% *strongly agreed*. The remaining were *undecided* (11%). 67% of parents were supported with family relationships, 56% were support through a relationship breakdown, and 56% of parents were given parenting support. Relationship breakdown was one of the key reasons that families were in a position where they needed extra support from the Family Support Service (FSS). 39% of parents needed help ‘accepting support’.

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*“Through Springboard, my Mam has made friends and at one time, we could walk down the street and no one would know her. She didn’t have any friends. Now we walk down the street and Mam might recognise another parent from the Springboard groups. It is nice for me to see. Before, she had no one. It has made us, as a family, more part of the community.” - Young Person*

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*We try and get children and parents to a place where they are not reliant on any one individual but instead help them to build a circle of support network through groups here or in the community”. – Family Support Worker*

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**Economic Security and Opportunity:** Over 50% of parents who completed this survey stated that their main household income was from social welfare payments. Parents were asked if since attending Springboard, they had become more proactive in managing their families’ finances. 50% agreed that they had , 44% *strongly agreed* and 6% were *undecided*. 44% of parents required support with income/benefits and 33% with budgeting and planning. 17% of parents stated other and answered non-applicable.

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*“Our house was in fore-closure in the middle of everything else going on. The support worker engaged me with MABS and it all got worked out. We are still in our home all these years later.” - Parent*

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### **Thematic Analysis**

These themes have been informed by the 84 individual stakeholder inputs. A more comprehensive exploration is provided in the report. All themes have been supported by the literature

**Theme 1: Parents require practical, social and emotional support. Services which provide this will have the greatest impact. Meath Springboard offer families support on all three levels.** Gilligan (1991), Cutrona (2000) and Tusla (2013) have all commented on the importance of this type of support being offered to families.

**Theme 2: Meath Springboard use a strengths based approach and they use it very well.** According to Duncan and Millar, (2000), a strengths based approach concerns itself principally with the quality of the relationship that develops between those providing the service and those being supported, as well as the elements the person seeking support brings to the process. The level of trust between most parents and families who have engaged with Meath Springboard is very high and this has allowed them to build very strong lasting relationships with families. National and international research found similar results (Early and Glenmave, 2000; Green et al., 2004; Foot and Hopkins, 2010; McLean, 2011; Tusla, 2013).

**Theme 3: Meath Springboard work in partnership with children and families to explore their needs and then work together to overcome whatever barriers are in the families’ way.** Partnership working is a key theme of the policy, strategy and guidance documents in Prevention Partnership and Family Support throughout Tusla (Tusla, 2015) What parents have to say about the services they participate in will be an important part of the evidence about what is working for children, parents and families (Tusla, 2015). Strategies that do not fully engage with parents and children are less likely to be effective, according to McKeown (2001). Young people, parents and service stakeholders said Meath Springboard are a very approachable service and this made their relationships stronger. Parents said they did not feel judged in any way and this helped them to trust the support worker.

**Theme 4: Meath Springboard offer a very therapeutic support to parents based on a deep respect and understanding of the struggles faced by families.** According to Connolly (2004), a constructive

relationship involves an attitude of respect and liking for the parent, an understanding of their point of view, and the ability to establish common ground on which to base an intervention plan that accommodates the needs of the parent as well as the child. Parents and children noted feeling a very genuine and real care from Meath Springboard support workers and they noted feeling understood and listened to.

**Theme 5: The level of need for some parents is very high and requires long term support.** Findings suggest that some parents require more intensive support over a longer period of time than others. Having the flexibility to really support this process meant that parents could learn new skills to manage better but at their own pace and as they were able. For some parents they did not have the mental capacity to fully engage at first and they had to be supported to take small steps. According to Tusla (2013), for families who are at higher levels of risk and have more complex problems, generic parenting programmes appear to have little effect. The feedback from some of the parents interviewed demonstrate that Meath Springboard can and has engaged some families over extended periods of time.

**Theme 6: Meath Springboard provide children and parents with a very person centred holistic support that is tailored to their needs.** Tailored programmes designed to meet the needs of families have shown great success and because of this they are advised by the Child and Family Agency. As noted by Tusla (2013), the most effective approach to family support is strengths based and tailor made. The Daughters of Charity (2019) support this by stating that where mental health struggles occur or social/ economic problems persist, tailored programming is most beneficial.

**Theme 7: Meath Springboard have an ability to get the hardest to reach parents to trust services again and this seems to be a result of how approachable, transparent and ‘upfront’ staff are.** For some parents, previous negative experiences with services were a barrier to them receiving support but when they worked with Meath Springboard this changed. Several parents stated that they could open up to the team and this was not something they could do previously. Parents noted the openness and honesty of support worker as being a key factor to them being able to talk to them. One parent said “you always knew where you stood’. This was echoed by service stakeholders.

**Theme 8: Work carried out by Meath Springboard is guided by theories such as the Social Learning Theory, Cognitive Constructivism, the Discovery Theory, the Ecological System Theory and the Attachment theory. These theories are intertwined in how support workers work and are used as tools to explain positive parenting to parents.** Tusla (2013) & the Centre of Effective Services (2015) supports the idea the family support should be based on these types of theory. This evaluation has shown that not only is work at Meath Springboard guided by these ideas, the support worker use these theories in a very practical way by modelling them in how they work with children and parents.

**Theme 9: Meath Springboard is a community service that fosters community development principles and they provide families with a support that has helped families and children integrate more in their community.** Families who have been supported by Meath Springboard have said that because of the activities, events, day trips and weekly parenting groups that Meath Springboard provide and facilitate, they have become more integrated in the communities and as a result they have made social connections which have been long lasting. The evaluation has emphasised the importance of this connection for children and parents and importance of this is show in the literature (Wallerstein, 2006, Kenny, 2007, Campbell, Pyett, & McCarthy, 2007, Ife, 2016).

**Theme 10: Meath Springboard are a very inclusive organisation that have the capacity and ability to work with all families.** According to Coram (2010), when reviewing what best practice looks like,

Children Contact Services should be a culturally sensitive environment that would reflect and value the rich ethnic and cultural diversity of service users. Meath Springboard offer families a service in which they feel included in the work that they do but also as a person. Of the 35 respondents from service stakeholders, 85% of participant who answered the question agreed that Meath Springboard offered a culturally sensitive service to clients, with 15% of respondents stating they were 'undecided'. One service stakeholder noted that *'all staff are extremely approachable, friendly and welcoming to all families and children of every diversity and culture I have referred to the service'*. Tusla (2013) found that services that work with families from different ethnicities appear to work best when the support worker can relate to the family through ethnicity or language. This did not seem to be a challenge for staff at Meath Springboard and staff were able to work with all families regardless of their background.

**Theme 11: Families who engaged with Meath Springboard services do need access to specialist in-house services such as counselling and parenting support groups.** Barnardo's (2013) found that the effective provision of Child Contact Services needed to include 'access to a range of supports for parents not living with their children and for their children including counselling, parent mentoring and child therapy'. Meath Springboard provide counselling and parenting groups for all families if they need it and they can accommodate it at that time. 25% of families who used the Children Contact service were supported through Tailored programme of Family Support, while 25% were supported with play therapy for their children. For families receiving Tailored Family Support, 39% received tailored support and 44% of them also received other supports. These included counselling services (11%) and parenting groups (33%). The remaining stated they were supported through one to one support sessions or play therapy.

**Theme 12: Meath Springboard are an approachable service that understand and listen to families.** The importance of a service being approachable and having an understanding of a family's circumstances and regarding how the service works with families is shown in the research (Connolly, 2004; Coram, 2010; Tusla, 2013; UCC, 2014; CES, 2016). Meath Springboard provide a service which is approachable and where families and service stakeholders feel heard and responded to effectively.

**Theme 13: Meath Springboard have very strong working relationships with many different services in Meath and because of this relationship they are able to provide families with the connection to specialist services.** Meath Springboard have been working in the community for 20 years. They have a very low staff turn-over and this means that connections to other services are longstanding and direct. Having access to such a network of professionals and services ensures that Meath Springboard can connect families with other services very quickly. Meath Springboard also have a very experienced team who know how to manage and maintain these relationships. Support for a partnership approach where agencies work together to support a family is seen throughout the research (McKeown, 2001; Pinterton, 2004; Tusla, 2013; Barnardo's, 2013; CES, 2016).

**Theme 14: The attributes, skills and experience of support workers at Meath Springboard were a key factor in the positive impact they have on the children and families they support.** Several skills and attributes were noted by all stakeholders regarding Meath Springboard support workers and many of these are echoed in the research. These include support-workers being non-judgemental, approachable, dedicated, passionate about their work, open, honest, transparent, genuine, caring, kind, good listeners, patient, focused on strengths, inclusive and informative (Pinkerton, 2004; Connolly, 2004; Coram, 2010; Barnardo's, 2013; Tusla, 2013 and 2015; UCC, 2014).

**Theme 15: Meath Springboard offer families support on a very personal level and it was noted by parents and young people that they regarded their support worker as more than just a person supporting them but as a 'friend' or a 'family member'.** Where such support is non-existent, weak,

or incapable of providing the help required, a person is more likely to turn to formal support sources (Dolan et al., 2006). For several families who were consulted through this evaluation, families did not have other family close by or friends that could support them. Some families were from other countries and have no family in Ireland. Others may have lost contact with friends or family due to previous challenges. Not having these 'bread and butter' supports as Whittaker and Garbarino (1983) describe it, when they are most needed can have a negative effect on families. Meath Springboard provide emotional and social supports to families. For children and young people the impact of this was profound.

**Theme 16: Meath Springboard provided families with a 'homely', 'welcoming' and 'child friendly' facility.** Coram (2010) found that child contact spaces that were 'self-evidently child friendly and a stimulating environment' would have most impact. In the UCC (2014) study, parents experience was positive overall because of several factors. These included the space being 'welcoming and homely'. It also included the fact that the service had facilities to make tea or coffee, a secure play area and appropriate toys to engage children with. Children, young people and parents who were consulted in this evaluation stated that the centre was very welcoming, homely and child friendly. Children and young people noted the colours and the brightness of the space and parents noted facilities such as the kitchen and the garden spaces. For access parents, having access to a kitchen area was important because they could make tea or coffee or drinks for the kids. One parent said that they could even bake a cake with their kids and do regular family things and this was a great benefit for them and their children.

**Theme 17: Retaining staff is an important part of providing an impactful FSS. It positively effects how the service works with other services because the connections are built over a long period of time and are therefore very strong working relationships.** For parents and young people, knowing they can go back to the service a year or so after they received support and the support worker they worked with was still there had a major impact on families. They felt a security knowing that if they did need that support again they could always link back in with their support worker. From a managerial and human resource perspective, having the ability to retain staff is very important and Meath Springboard have done this with several staff working in the service for many years, some even from the very beginning. The relationships that can be built up over this amount of time are a significant resource in regard to how Springboard deliver FSS. Tusla (2016) in the Quality Improvement Framework stated that a high quality services has protocol in place to retain staff as this is important for relationships building and maintaining connections.

**Theme 18: It was important for families to be able to link back in with the service if they needed to.** Knowing that the line of communication could be re-opened at any time helped families feel supported even if routine support was not occurring anymore. It was noted by parents and children that this also made them feel part of the community because they knew they could call the support worker or drop into the centre if they needed to or if they just wanted to catch up or have a causal chat.

**Theme 19: Meath Springboard provide a high quality service by ensuring it is child-centred, well-led and safe.** When reviewing the characteristics that Tusla (2016) show to be the key factors of a high quality service, Meath Springboard are meeting them all. It is for this reason that it is fair to say that Meath Springboard provide a high quality service to the children and families they work with. It is child centred and uses a partnership approach where transparency, consistency and respect are at the core of this work. The service is well-led. Management trust the expertise of the team and how each staff member works. Staff are supported and listened to and the respect the team have for the families



they work with is the same respect they appear to have for one another too. Meath Springboard provide a service which is safe for all who engage with it and attend the centre. The expertise of the staff, the protocol in place including risk assessments and the 'homely, friendly' space all contribute to this. The service and the support received has been noted by children and young people to make them feel safe *'just knowing it was there'*. This security may be a reflection of the 'strong', 'family-like' team Meath Springboard seem to be.

The findings of this report have been informed by 84 individual inputs. This evaluation shows that Meath Springboard provide a very high quality service to the children and families that they work with and that the support received by families does in fact have a positive impact and improves outcomes for the children and families they work with. These positive outcomes are not short lived but long term and have shown to support parents to become confident and empowered enough to support their children so that they can reach their potential.

The recommendations offered have been informed by the voice of children, young people, parents, service stakeholders, Family Support Workers and Board Members. Ordinarily, and often quite naturally, if participants have not noted a gap in services or they have not noted something which could be enhanced, the data can show areas that need addressing. It is rare that this does not occur. This evaluation is unique for that reason. The evaluation has not exposed any gaps in services as such nor has it shown any items of significant concern that need to be addressed. The themes which have been drawn out of the findings show why Meath Springboard have achieved the results they have thus far and while some minor concerns were found, it appeared that they were isolated.

**The key sections of the report are presented as follows;**

1. Background to Meath Springboard
2. Background to the Tailored Programmes of Family Supports and the Children's Access Support Service provided by Meath Springboard
3. Meath in Context - Demographics at a glance
4. Literature Review
  - 4.1 Definitions, principles and forms of family support
  - 4.2 Governance and framework of family support in Ireland
  - 4.3 The level of need amongst children and young people in Ireland
  - 4.4 The importance of prevention and early intervention
  - 4.5 Theories used to frame family support
  - 4.6 What works in Family Support (Tailored Programmes of Family Support and Children's Contact Service)
5. Evaluation of Meath Springboards Tailored Programmes of Family Support and Children's Access Support Service and the impact Meath Springboard has on the children and families they work with.
  - 5.1 Survey respondent's profile and the needs of families
  - 5.2 Findings from the evaluation (survey and interview inputs)
  - 5.3 The impact on children and families
  - 5.4 Thematic analysis and analysis of findings

## Introduction

The importance of family support services working within the community has been recognised for decades. Early intervention and prevention with families was first seen in Ireland in the 1970s in inner city Dublin. The most significant change came in 1998 with the initiation of 14 Family Support Services under the name Springboard. Meath Springboard were one of the initial 14 services piloted and is still very much part of the family support infrastructure in Co. Meath today.

Family support has changed somewhat over the years with the greatest change being seen in how the voice of the child is heard, how services are being offered and delivered and how impact is measured. At one point 'a one size fits all' approach was taken and this same approach could be seen across most support services whether it was in family support, youth work, education or community work. The partnership of the Atlantic Philanthropists and the Irish government in the early 2000s informed a shift to a more measurable, targeted, outcome focused approach. The evaluation and effectiveness of programmes was under more scrutiny than ever before. Research has shown the importance of using an outcome-focused approach when supporting families (Canavan et al., 2013). Canavan (2010) found that an outcome-focused approach promotes the effectiveness of services and provides clarity and focus in a partnership approach to service delivery. Bruner (2006) found that it provides a framework for accountability, specificity in relation to achieving results.

The investment of the Atlantic Philanthropists in prevention and early intervention in Ireland was a key component to facilitating these shifts in work and practice. In 2016, the Atlantic Philanthropists withdrew its funding and the Irish government (the then Department of Children and Youth Affairs - DCYA) agreed to continue the work they had been doing in partnership. This included the continuation of the ABC model, an area level targeted approach to support, the establishment of Tusla (2014), the Child and Family Agency and the implementation and delivery of the very first Better Outcomes, Brighter Futures, Irelands Framework for Children and Young People 2014-2020. This Framework recognised the need for both targeted and universal support that is provided on an individual and group level. According to the Centre for Effective Services (2016), *'there is no one approach that will meet the needs of all parents' nor is there 'one magic bullet that will improve outcomes for children'.*

The drive to find evidence-based programmes to offer families has helped Ireland to get to where it is today. With family support now being offered to parents from pre-birth stages where early intervention is key and can make the most difference, right the way through to young adulthood. This drive is echoed throughout services in Ireland and over the past decade, the then DCYA What Works Initiative, has given services the opportunity to be innovative and try and test programmes to see what could be most effective when improving outcomes for children and young people. Better Outcomes, Brighter Futures, Irelands Framework for Children and Young People 2014-2020 has been vital to ensure that an outcome focus is continued and the enthusiasm to learn more is maintained.



The level of need for children and families in Ireland is high and as the literature shows, this appears to be growing either as a direct or indirect result of the pandemic (McDonnell et al., 2021; Social Justice Ireland, 2021; PMVT, 2021). Tusla's Annual Report for 2020 showed that nearly 70,000 referrals were made to the Child and Family Agency in that year. The report also showed that in 2020, 22,356 children and parents received support from family support services. In 2019, this figure was 24,828 and in 2018, this figure was 24,211. It may be unrealistic and slightly naive to assume that this decrease from 24,828 in 2019 to 22,356 in 2020 is because families needed less support in 2020. Services worked at a very different capacity during 2020 and 2021 as a result of the Covid 19 pandemic. It is worth noting the amount of referrals to Tusla during 2020 and 2021 and the increase in referrals as the length of time in lockdowns and under restrictions progressed. Nationally, during the second quarter of 2021, 18,060 referrals were made to Child Protection and Welfare Services. This was 8% (1,288) more than the first quarter of the year and the highest number of all quarters for 2020 and 2021. In all, in the second quarter of 2021, 34,832 referrals were made, up 1% (354) from the same period in 2020 (34,478). These figures show that referrals to Tusla have increased overall in this period and this is why one cannot assume that children and families need less support or that their needs are decreasing. For instance, 1 in 4 children live in a household which is experiencing some form of poverty (Social Justice Ireland, 2021), 2,500 children are homeless (Peter McVerry Trust, 2021), over 6,000 children are in care and child and youth mental health problems are on the rise (Jigsaw, 2022 – [www.jigsaw.com](http://www.jigsaw.com)). The Jigsaw Annual Report (2019) showed that in 2019 they supported 29,993 children and young people with mental health challenges through their physical services and 46,921 through their online service. 2020 saw a decrease in the numbers presenting to the physical service to 23,075 but a concerning and significant increase in use of their online services. 264,654 were supported through their online services which included informative support and chat support in 2020. This was 4 times higher than the previous year. All of these figures are concerning and with the fallout of the pandemic, which are currently evolving and the increasing cost of living, families will continue to need support but perhaps at an even more intensive level.

Promisingly, it appears that this high level of need has been recognised by the Department of Children, Equality, Disability, Integration and Youth and Tusla over the last few years we have seen a rise in the amount of Family Resource Centres in the country (2018 -106; 2019 – 115; 2020 – 121). However, the capacity may need to increase further if all families with greater needs are to be responded to quickly and effectively. In 2021, Meath Springboard provided support to 450 Children and their parents from 234 families (up from 370 children and 177 families in 2020) through a strengths-based community support that effectively improves outcomes for children in the long-term. The services provided are;

- Tailored programmes of family support;
- Child Contact (Access) Support Service,
- Parent support Groups
- Affordable Counselling for children and parents.

Meath Springboard have the capacity to engage with 24 -families at any one time through their Tailored Programmes of Family Support. The Child Contact Support Service normally engaged with 48 families availing of on average 30 child contact sessions per week, 25 to children in the care of Tusla and 5 sessions to children whose parents are separated.

Meath Springboard believe they make a positive contribution to the lives of the children and families they work with. This independent and objective evaluation has been commissioned to ascertain the facts. The findings of this evaluation will be used to influence the future provision of services and to assist this family

support service in delivering the best possible outcome-focused supports to the children and the families they work with, now and in the future.

## Evaluation Methodology and Participants Sample

### Methodology

The purpose of this evaluation is to explore and review the support offered by Meath Springboard Family Support Services to children and families through the Tailored Programme of Family Support and the Children's Contact Service and to identify whether this support has a lasting positive impact on the children and families who avail of the services. Meath Springboard recognise the importance of evaluation as a monitoring and quality assurance tool and the importance of hearing from children, parents and other stakeholders when understanding the type of impact they have as a service. They sought an independent objective evaluation to capture these voices and to document the impact they have upon the lives of the children and families they work with.

Using a mixed method approach, this evaluation has been informed by the voices of the relevant stakeholder groups. The evaluation uses two data sources: primary and secondary. Primary data includes stakeholder accounts which have been gathered over the past 4 months through surveys and interviews and organisational literature such as annual plans and parent impact statements which were collected by Meath Springboard throughout 2020 and 2021. The findings have been evaluated by exploring areas such as fluency, continuity and accessibility of services; the role of the Family Support and Child Contact Workers; quality assurance; multi-disciplinary / inter agent relationships; the impacts of the support upon families (children and parents) and; the impact of the support amongst the provision of services in Meath. The second type of data used to support this evaluation is national and international literature and this secondary data will be reviewed and used to confirm whether or not Meath Springboards approach to family support has contributed to a positive impact on the lives of the children and families they work with. Using a thematic analysis, themes have been drawn from the stakeholder accounts which show what approaches and practice methods have had the greatest impact. The themes will be examined using the literature from the review.

### Participant Sample:

This evaluation has been informed by 85 individual inputs. All stakeholders who are involved with Meath Springboard had an opportunity to participate in this evaluation. These included:

- The voices of 5 children / young people were heard through interviews.
- 18 parents who had received family support completed the survey with 2 of these parents consulted through interview.
- 4 parents engaged in access completed the survey and 2 were consulted through an interview.

- 11 foster parents completed the survey and 1 foster parent agreed to be interviewed.
- 36 staff members from 18 different services completed the survey and 2 Tusla staff were consulted through interview.
- 2 support workers from Meath Springboard were interviewed and 2 of the Board of Management members were also interviewed.

In total 69 surveys were completed and 16 interviews were conducted.

### Random sampling:

This evaluation sought to be an independent and objective review of the work carried out by Meath Springboard through the Tailored Programme of Family Supports and the Children's Contact Service. This review would seek to inform whether or not Meath Springboard impact the lives of children and their families positively. Where possible, random sampling applied to this evaluation. By giving all stakeholders (besides children) the opportunity to participate through survey and later through interview if they chose this option, it meant that bias could not occur. As the volume of families supported by Meath Springboard is very high year on year (e.g. 177 in 2020 and 234 in 2021), the evaluation team refined the research groups. Only parents and foster parents who had been supported by Meath Springboard since July 2021 were invited to participate in this evaluation. To avoid any risk of triggering any current or ongoing trauma, only children and young people who had previously being supported through Meath Springboard were considered. This included a high number of children so to refine this even further and to ensure that the children being consulted had both the capacity and ability, only children over the age of 9 were considered. This further reduced the number of children. From here parents and foster parents of these children were contacted to first inform them about the evaluation, to second invite them to participate and to thirdly seek assent and consent for their child to participate.

### Data Collection Tools:

For the purpose of this evaluation 4 adult stakeholder satisfaction surveys were developed. Question sets were developed for each research group and represented questions related to them. Surveys include:

- Family Support Parent Stakeholder Satisfaction Survey
- Children Contact Parent Stakeholder Satisfaction Survey
- Foster Parent Stakeholder Satisfaction Survey
- Service Stakeholder Satisfaction Survey

All stakeholders in this evaluation, besides children, had the option to participate through 2 different data collection tools. The first was an online survey which was developed using the online survey developing software 'Survey Monkey'. On each survey, stakeholders were asked if they would like to be involved in an interview and where they agreed to, they would provide their contact details. Stakeholders were made aware of the consent and confidentiality protocol around this and by providing contact details they knew that this meant they were consenting to being contacted by the evaluator. Stakeholders under the age of 18 were first informed about the evaluation through a parent who was contacted by Meath Springboard. If parents agreed to the child being involved, they would have to first consent to their details being shared with the evaluator.

The evaluator would then contact the parent or foster parent directly to brief them further on the evaluation details, consent and confidentiality. If the parent or foster parent was still happy to proceed and the child had assented to take part, the evaluator and the parent / foster parent scheduled a suitable time to call the parent when the child would also be available. In some instances, parents opted for a video call and in other instances, they opted for a telephone call. This depended on the child's age, their capacity to understand and their ability to concentrate on a task. Only children who had previously worked with Springboard were consulted as to avoid a risk to the child or young person due to recent or ongoing trauma. One young person was over the age of 18 at the point of interview and consented to be interviewed and was contacted directly by the evaluator.

### Evaluation Challenges

The main research challenge was seen when engaging children and parents using the Children's Contact Service in the evaluation. While all parents and foster parents who were using the service from July 2021 to now were given the opportunity to participate in a survey and interview, only 4 parents took part in survey and 2 of these parents took part in interview. 2 were parents engaged with the Children's Contact Service to have access to their children who were in the care of Tusla while 2 parents were parents of children who had access to their non-resident parent through the Children's Contact Support offered by Springboard. The reason the participation rate was low is in-part because of the very complex and sensitive nature of Children Contact Services. For Meath Springboard, 25 sessions weekly provide a contact space for children in care to meet birth parents, while 5 sessions provide contact space for children to meet their non-resident parent. The issues which have resulted in requiring such a service are challenging for everyone involved and this may have contributed to a low uptake from this group. However, 11 foster parents took part and this has added to the evaluation data greatly.

# 1. Background to Meath Springboard

## A brief history of Springboard

In 1998, the Department of Health and Children, now the Department of Children, Equality, Disability, Integration and Youth, launched the Springboard Programme Initiative. 14 projects were established countrywide in urban disadvantaged areas on a pilot basis with community based interventions being the key feature of the projects.

In 1998 the Department of Health and Children issued a call for project proposals which had the ability to;

- Identify the needs of parents and children in the proposed area with specific attention given to those families where child protection concerns exist, to families with ongoing health and welfare problems and/or families in once-off crisis situations.
- Target the most disadvantaged and vulnerable families in the area specifically focusing on improving parenting skills and child-parent relationships.
- Work in partnership with the other agencies, key groups and individuals in the community and with families to develop programme of family support services.
- Provide a direct service through a structured package of care, intervention, support and counselling to the targeted families and children, and to families within the wider community.

McKeown et al. (2006) evaluated the projects nationally during 2000-2001 and found that the pilot projects had had small but statistically significant effects on the psychological well-being of children and on parent-child relationships. The pilot's success led to Springboard being expanded with additional projects developed in new areas of need.

## Springboard in Meath

Navan Springboard was amongst 1 of the 14 proposals selected in 1998 and they sought to provide support to children and their families where there were concerns for the welfare of the children. The first 10 years of Springboard in Meath supported children and their families who were living in the urbanised geographical area of Navan. Since 2008, they have provided services across the whole county of Meath. This change in provision brought a change in the name to Meath Springboard Family Support Services CLG from Navan Springboard. Meath Springboard Family Support Services CLG are funded as part of the provision of services by the Prevention Partnership and Family Support (PPFS) services of Tusla, the Child and Family Agency.

Meath Springboards vision is

*“A society where all children and families are treasured and treated equally, a society where family life is a happy and nurturing experience for all.”*

Their mission statement states that

*“Meath Springboard Family Support Service offers a range of services aimed at improving the lives of children, we support adults in their parenting role and we work directly with and for children, our services are available to children and families living in county Meath.”*

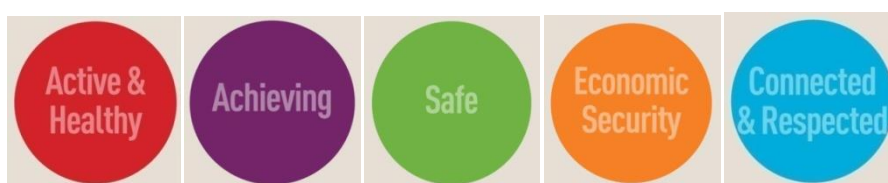
Meath Springboard has 5 core values that the staff team, Manager and Board of Directors of the service follow and adhere. These 5 values are as follows;

- Child First - Meath Springboard Family Support Services exist to improve the lives of children in the families we work with. Our primary focus is the welfare and happiness of the child.
- Family Centred - Meath Springboard Family Support Services believe that children develop to their full potential when they live in a safe, loving and enriching environment. We believe that by utilising a family centred approach our input will be efficient and effective in supporting adults in their parenting role and improving the lives of their children.
- Accountability - Everything Meath Springboard Family Support Services CLG and its staff do, is open to scrutiny by the children and parents we work with, our colleagues and funders, members of the public, and the regulatory authorities.
- Integrity and Honesty - Integrity and Honesty are the hallmarks of all conduct within Meath Springboard Family Support Services CLG, in our dealing with children and parents, colleagues (board and staff) and external individuals and agencies.
- Transparency - Meath Springboard Family Support Services CLG promote an atmosphere of openness throughout the organisation in order to safeguard children and develop confidence in the work we undertake with children and parents.

Meath Springboard are funded by Tusla, the Child and Family Agency which was established in 2014. As a statutory agency, all organisations or services connected to them must follow a set of legislations. For instance, all work carried out by Tusla and Meath Springboard as family support service funded by them, is informed first by the United Nations Convention on the Rights of the Child (1989). This UN international agreement sets out the basic human rights to which every child is entitled. The 5 National Outcomes that all work is guided by in Ireland today and which are referred to below, are based on these rights. Under section 3 of the Child Care Act (1991) family support services are provided to children and families in Ireland. The Act sees a child as any person under the age of 18 and outlines the statutory responsibility of Tusla to promote the welfare and protection of children and young people in Ireland. The Children’s Act 2001 replaced provisions of the Children Act 1908 and is the statutory response to supporting ‘at risk’ children. The Child and Family Act of 2013 was developed in line with the development of Tusla in 2014 and the Agency operates under the Child and Family Agency Act 2013. This Act has the voice of children at the centre of it and sees families as being the foundation to a healthy child and upbringing. It has a clear outline of how services working with families should deliver family support services. It notes the importance of inter- agency work, along with families and services working in partnership and collaborating together when building a positive relationship for better outcomes

for the family.. While the Act of 2013 was a significant progression in Ireland, some areas of protection and welfare lacked clarity. The Children's First Act 2015 places several professional groups and organisations in a statutory position whereby they have a 'duty of care' to the child first and always. This Act ensures that accountability and responsibility are placed on the professional adult or organisation who witnessed neglect or welfare issues. This has been a welcomed addition to Irish law. Meath Springboard deliver support to children and families in accordance with these Acts and as an organisation they seek to improve the lives of children in line with the 5 National Outcomes for children services.

All work undertaken at Meath Springboard is guided by the National Agenda for Children Services and the Five National Outcomes which have been identified in the National Framework for Children and Young People in Ireland 2014-2020. These outcomes state that all children should be/have:



- Outcome 1 – Active and Healthy
- Outcome 2 – Achieving full potential in learning and development
- Outcome 3 – Safe and Protected from harm
- Outcome 4 – Economic security and opportunity
- Outcome 5 Connected, respected and contributing to their world

In 2017, the department (DCYA) published 'An Indicator Set for Better Outcomes, Brighter Futures' which could be used to measure outcomes and the impact of the work being carried out across Ireland with Children and Young People. In 2022, these indicators were amended. The indicators can be seen in Section 4.2.

The key principles of Family Support (Pinkerton et al., 2004) underpin how Meath Springboard support children and families. In line with the ethos of Springboard, Meath Springboard FSS (Family Support Service) is a community-based service that works in partnership with children, families, professionals and communities. Community-based family supports enhance community capacity by expanding resources and establishing cultural norms that foster collective responsibility for positive child development, according to Daro and Dodge (2009). Gilligan (2010) makes the point that family support is about surrounding the child with supports that in all the contexts in which children live their lives, these supports counteract the corrosive potential of poverty and other harm that can befall children in disadvantaged communities. Community contexts provide a set of risk and protective factors that have an influence on the wellbeing of community members (Chaskin, 2008). Through community development initiatives, community members can become more empowered, such that they can increasingly recognise and challenge conditions and structures which are leading to their disempowerment or negatively impacting their wellbeing (Ife, 2016).

These forms of integrated community-based partnerships are the basis on early intervention work and with the increasing body of knowledge on the effects of Adverse Childhood Experiences (ACE), family support at this community level can ensure better outcomes for children and families. Community based services have



been shown to achieve long-term outcomes such as stronger and more cohesive communities, evidenced by changes in social capital, civic engagement, social cohesion and improved health (Campbell, Pyett, & McCarthy, 2007; Ife, 2016; Kenny, 2007; Wallerstein, 2006) and it is for this reason that early intervention is so important. To provide a community-based service, Meath Springboard foster Community Development based principles. Community development is a holistic approach grounded in principles of empowerment, human rights, inclusion, social justice, self-determination and collective action (Kenny, 2007).

Families work in partnership with Meath Springboard to develop their own Tailored Programme of Family Supports and are supported to meet their own needs, at their own pace, within their own capacity, in a non-judgemental environment. Working in partnership and in collaboration with children and parents is a key component to the work Meath Springboard do. This partnership is built using a strengths-based approach. The work is not about doing things for the families but more about providing families with the tools and information they need to be confident and empowered enough to do things for themselves. According to Duncan and Millar, (2000), it concerns itself principally with the quality of the relationship that develops between those providing and being supported, as well as the elements that the person seeking support brings to the process. This encouraging, positive approach to supporting families, ensures that the supports being delivered are guided by the service users rather than the service which creates so much more opportunity for growth. As Morgan and Ziglio (2007) states, working in a collaborative way promotes the opportunity for individuals to be co-producers of services and support rather than solely consumers of those services (Morgan and Ziglio, 2007).

All work carried out by Meath Springboard seeks to improve outcomes for children. Meath Springboard have adopted the Ecological Systems Theory of Human Development which sees a child's development as directly and indirectly dependent on the systems they have around them. This theory was developed by Bronfenbrenner, co-founder of Headstart, in the 1970s. The structures of development according to the theory are; the microsystem, the mesosystem, the exosystem, the macrosystem, and the chronosystem. The work Meath Springboard do focuses on the microsystem which directly affects the mesosystem. The microsystem encompasses the relationships and interactions a child has with their immediate surroundings e.g. with a parent (Berk, 2000). A lot of the work that Meath Springboard do is centred on reducing the risk factors and increasing the protective factors for children. This can mean supporting and empowering the parent to build upon their own capacity and to increase their understanding of what positive parenting looks like in order to improve outcomes for their child. The mesosystem provides the connection between the structures of the microsystem meaning it is the connection between the child and their teacher and their parent. Meath Springboard also foster the theory of the mesosystem by providing those links to the community for parents. This can be seen in how Meath Springboard work with other agencies to break down barriers for families. They provide the initial connection and empower the parent to maintain that connection.

The work of Meath Springboard is holistic in its nature and based on theory and well-established approaches in regard to their use in Family Support. Including the Ecological Systems Theory, Meath Springboard work is also guided by theories such as the Bowlby's Attachment Theory, Piaget's Cognitive Constructivism, Bandura's Social Learning Theory and, Bruner's Discovery Learning Theory. The 'Growing Child Theoretical Framework' and the DCYA funded report 'What Works in Family Support' (2013) support and suggest these approaches to family support and more can be learned about them in the literature review.

Meath Springboard are a 13 member team working the whole time equivalent (WTE) 8.2 full time posts.

- 1 Manager (WTE-1)



- 1 Senior Family Support Worker (WTE -0.8)
- 1 Children Contact Support Coordinator (WTE-1)
- 5 Family Support Workers (WTE -2.7)
- 2 Child Access support workers (WTE 1.2). These two staff also provide Family Support and are included in the five Family Support Workers.
- 1 Office Administrator (WTE-0.8)
- 1 Counselling Administrator (WTE-0.4)
- 1 Cleaner (WTE-0.2)

The level of expertise amongst all staff at Meath Springboard is very high. A training log was supplied to the evaluator for the purpose of this evaluation. As a team they have a varied set of qualifications and specialist training. It is clear that the importance of continuous professional development (CPD) is understood by the team as being crucial to them providing the best possible support and this can be seen in the level of resources they have as a collective. Self-care awareness and practice is also important to the team.

As a team, collectively staff hold;

- 3 Master Degrees
- 7 Honours Degrees
- 1 Diploma
- 1 member of the team has specialist training in Therapeutic Crisis Intervention.

Together, they have a further shared resource of over 60 different training programmes and information sources, several of which are evidence based. The tables below show this collective expertise which includes all academic qualifications, any evidence based programme training and training in family support relative to their work at Springboard.

Table 1.1. Academic Qualifications of Staff

Academic Qualifications of Staff (inclusive)
<ul style="list-style-type: none"> <li>➤ FETAC Level 9 Masters in Youth, Child and Family Studies (1 staff member)</li> <li>➤ FETAC Level 9 Masters in Child, Family and Community Studies (1 staff member)</li> <li>➤ FETAC Level 9 Masters Comparative Criminology and Criminal Justice (1 staff member)</li> <li>➤ FETAC Level 8 B.A. Degree in Applied Social Studies in Social Care - (6 staff members)</li> <li>➤ FETAC Level 8 B.A. in Social Care (1 staff member)</li> <li>➤ Diploma in Applied Social Studies (1 staff member)</li> <li>➤ Trainer in Therapeutic Crisis Intervention (1 staff member)</li> </ul>

Table 1.2. Evidenced-Based Programmes, other relevant training and CPD of Staff

Evidenced-Based Programmes, other relevant training and CPD of Staff (Inclusive)	
<b>Supporting children, young People and parents</b> <ul style="list-style-type: none"> <li>➤ 'Lifestart' training (5 staff members)</li> <li>➤ 'ACE' Training (3 staff members)</li> <li>➤ 'How to argue better' (4 staff members)</li> <li>➤ Child and Youth Participation Training and Participation Training (4 staff members)</li> </ul>	<b>Physical and mental health – Wellbeing</b> <ul style="list-style-type: none"> <li>➤ 'Zoom and Gloom' (3 staff members)</li> <li>➤ 'Healthy Habits' – Parenting plus syllabus</li> <li>➤ Parent and Healthy Families training</li> <li>➤ Mindfulness training</li> <li>➤ 'Mind your Mental Health' training</li> </ul>

<ul style="list-style-type: none"> <li>➤ 'TLC Kidz' facilitation training course (3 staff members)</li> <li>➤ 'My Place to Play' training (3 staff members)</li> <li>➤ 'Childhood anxiety and building resilience' training (2 staff members)</li> <li>➤ 'Parenting Plus' children's Programme facilitator training (2 staff members)</li> <li>➤ 'Understanding and renegotiating trauma in our lives' training (2 staff members)</li> <li>➤ Dyadic Developmental Practice (DDP) training (2 staff members)</li> <li>➤ 'Unity through Relationship' Conference (3 staff members)</li> <li>➤ 'Trauma and the effects on the brain' training</li> <li>➤ 'Temper ones Anger' training</li> <li>➤ 'Raising Resilient Children'</li> <li>➤ 'Win Win' Conversations' training</li> <li>➤ Reconciliation – OCR Level 2</li> <li>➤ Response Ability Pathways (RAP)</li> <li>➤ Youth Club Leader Training</li> <li>➤ Family Learning Training</li> <li>➤ 'Move' – Facilitation Training</li> </ul> <p><b>Supporting Teen Parents</b></p> <ul style="list-style-type: none"> <li>➤ Teen Dad training</li> <li>➤ Teen Parenting Programme training – Crisis Pregnancy Agency syllabus</li> <li>➤ Teen Parent support Programme – Parents Plus syllabus</li> </ul> <p><b>Supporting Dads</b></p> <ul style="list-style-type: none"> <li>➤ 'Why Men's Health?' training</li> <li>➤ Men's Mental Health training</li> <li>➤ 'Engaging Dads, Supporting Families'</li> </ul> <p><b>Supporting Mothers</b></p> <ul style="list-style-type: none"> <li>➤ 'Mothers Heart Circle' training (2 staff members)</li> </ul> <p><b>Children Contact/Access support</b></p> <ul style="list-style-type: none"> <li>➤ Attachment and Access Support training (6 staff members)</li> <li>➤ Access Supervisor Training</li> </ul> <p><b>Supporting separated parents</b></p> <ul style="list-style-type: none"> <li>➤ 'Supporting parents to parent well after separation' training (2 staff members)</li> <li>➤ 'Soothing Transitions and Separation' training</li> </ul>	<ul style="list-style-type: none"> <li>➤ 'Empower Yourself' –children and youth online training</li> <li>➤ 'Cook It' training</li> <li>➤ 'Health and Happiness' training</li> </ul> <p><b>Suicide prevention</b></p> <ul style="list-style-type: none"> <li>➤ 'Safe-Talk' training (3 staff members)</li> <li>➤ Understanding self-harm</li> <li>➤ ASSIST training</li> </ul> <p><b>Addiction and drug awareness</b></p> <ul style="list-style-type: none"> <li>➤ Drug Awareness training</li> </ul> <p><b>Domestic Violence training</b></p> <ul style="list-style-type: none"> <li>➤ Non Violent Resistance (NVR) training</li> </ul> <p><b>Self-care</b></p> <ul style="list-style-type: none"> <li>➤ Self-care training – 'Compassion, fatigue and understanding burnout' (4 staff members)</li> </ul> <p><b>Supporting Staff</b></p> <ul style="list-style-type: none"> <li>➤ 'Common Purpose' / Leadership training (2 staff members)</li> <li>➤ 'Making the most of Supervision for Supervisors'</li> <li>➤ 'Developing and supporting effective staff supervision' training</li> <li>➤ The 'Accelerate' Programme – Management upskilling training</li> </ul> <p><b>Tusla, HSE and Legal training</b></p> <ul style="list-style-type: none"> <li>➤ Children's First E-Learning (7 staff members)</li> <li>➤ Meithal Training (6 staff members)</li> <li>➤ Irish Family Law System webinars (5 staff members)</li> <li>➤ GDPR Training (4 staff members)</li> <li>➤ National Childcare Scheme webinar (2 staff members)</li> <li>➤ 'Keeping Safe' – Child Protection Welfare Issues</li> <li>➤ Designated Liaison Person training</li> </ul> <p><b>Manual Handling, First Aid and Fire Safety</b></p> <ul style="list-style-type: none"> <li>➤ First Aid (7 staff members)</li> <li>➤ Manual handling (6 staff members)</li> <li>➤ ABLE training (2 staff members)</li> <li>➤ Fire Safety Training</li> </ul>
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➤ 'Parenting When Separated' training	
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Meath Springboards primary focus is to provide support services to parents and families with children up to 12 years of age and to support families to improve the outcomes for them, their children and their families. In 2021, Meath Springboard provided support to 450 children and their families through work with 234 individual families. Meath Springboard aim to improve outcomes for children, parents and families by providing targeted supports. These include

- Tailored Programmes of Family Support
- The Children's Contact (Access) Support Service
- Counselling service for children and parents
- Support groups for parents

This evaluation is concerned with the overall satisfaction of all stakeholders, the workings of the service, the practice of service and the impact of the Tailored Programmes of Family Support and The Children's Contact (Access) Support Service on the lives of children and families. The next chapter gives some background and further insight into the two supports offered by Meath Springboard FFS which will be at the centre of this evaluation.

## 2. Background to Meath Springboard Tailored Programmes of Family Support and the Children's Contact (Access) Support Service

The statistics show that some families are really struggling in Co. Meath. For example, 11,141 children are 'at risk of poverty' in the county and 6,570 children experience consistent poverty (Meath CYPSC, 2018). 554 households presented as homeless to the Meath County Council in 2020 with over 170 of these being families with children (Meath County Council Annual Plan 2020). The level of need in the county is expansive and it requires programmes of supports to ensure positive outcomes for children and families in the county.

### Tailored Programmes of Family Support

Meath Springboards Tailored Programmes of Family Support are based on a family's individualised need. The level of support a family receives corresponds with the need. Upon referral (self-referral or through a referral agent), each family is assigned a Family Support Worker (FSW). A strengths-based approach such as Meithal is used to determine the needs and potential required output of services to support that family. The parent and the FSW collaborate in identifying the issues to be addressed and together they develop a plan and agree to fulfil it together. The parent and the FSW meet weekly. The FSW provides practical and emotional support to the parent. This includes Psychological, Social and Educational inputs. Depending on the need, the FSW may work directly with the children also. In general, this work focuses on helping the child to understand and deal with the challenges that may have occurred in the family.

At any one time, Meath Springboard has the capacity to offer and manage the caseload of 24 'Tailored Programmes of Family Support'. In 2021, the average duration for engagement with families was 7 months. Table 2.1 shows the number of families and children whom Meath Springboard supported in 2021 through Tailored Programmes of Family Support.

Table 2.1. Families and Children who engaged in Tailor Programmes of FS with Meath Springboard

Client Description	No.
No. of families	59
No. of children	145

The level of need amongst families who engaged with the programme varies and therefore the level of support offered to them does also. The most frequent issues that lead to a family requesting support at this individualised level include;

- Marital discord
- Relationship breakdown
- Parental mental health issues
- Accommodation issues including homelessness
- Lifelong impact of adverse childhood experiences in the parents own childhood
- Poverty
- Addiction

There are 4 key criteria a family must meet to have access to this support. These are;

1. The children in the family to be between pre-birth and 12 years of age.
2. The children and primary carer need to reside in County Meath.
3. A level 3 child protection or welfare concern of the Hardicker model must be present.
4. Parents must be willing to engage and want support to improve the situation for their children.

Facilitating such a support that is tailor-made and individualised requires a great deal of both human based resources and evidence-based resources. The FSW at Meath Springboard has a wide range of expertise and tools to use when helping families at this level which can be seen in Section 1, Table 1.1.

A support such as this also requires an integrated response and Meath Springboard work with several other organisations and services in the county to ensure that families receive the support they need. This collaborative relationship also insures that families receive the help they require when they need it. In 2021, 40 of 53 referrals came from connected services. Table 2.2 shows where these referrals came from. During this same period, 8 parents from the 53 families self-referred.

Table 2.2. Referral Source for Tailored Programmes of Family Support 2021

Referral Source			
Tusla Social Workers	Tusla (Non social workers)	HSE	Other Services
32	2	6	5

### Children's Contact (Access) Support Service

Meath Springboard have been providing contact support to children for over 10 years. The service offers a safe neutral space where children can spend time with the non-resident parent(s). The Children Contact (Access) Service at Meath Springboard offers families a dedicated space that has a private kitchen/living room and garden where children can spend quality time with their non-resident parent (s). They provide trained and qualified staff and they offer a strategic support based on the family's needs. This can include supervising visits, semi-supervising visits and handover support.

The level of input from the staff at the Contact Service varies from family to family. At times, the Children Contact Support Service supports the transition from limited access or no contact between a parent and their child to regular contact with or without external support based on the needs and safety of the child. This

process can be a challenging time for both the parents and the child. The Children's Contacts Support Service staff work with the family to achieve harmony within the relationship by supporting the parent to have a positive, natural relationship with their children without the need for external support. The service is funded on a pay per use bases i.e. Tusla fund the service when it is children in foster care attend, the parents pay for the service in family separation / family law cases.

Public safety measures in place due to Covid 19 have had a significant impact on how the Children's Contact Service supported children, parents and families. This impact was mainly seen in how they delivered the service. Before the pandemic, face-to-face contact was the key engagement tool. This type of service delivery had to be adapted to 'virtual contact' for health and safety reasons during the restrictions with face-to-face work returning when permitted.

In 2021, despite the adaptations and complexities of managing a service during a pandemic, Meath Springboards Children's Contact Support Service supported 106 children from 56 families. Table 2.3 show the exact numbers supported during this period.

Table 2.3. Children, parents and foster carers supported by the Children Contact (Access) Support Service

Client group	Tusla	Welfare
Children	74	32
Families	37	19
Foster carer	56	N/A

The type of support offered to users of the service includes supervised access, semi-supervised access, handover arrangement and support as well as parenting support and guidance. Parents can also access the other services provided by Meath Springboard including the Tailored Programmes of Family Support, counselling, parenting groups and other practical, social and emotional support.

### 3. Meath in Context – Demographics at a glance

#### Key statistics: Children and families in Co. Meath

- Overall, Meath has over 51,000 families residing in it.
- 16,542 families have children in the house under and over the age 15 and where parents live together as couples raising their children
- 33, 921 families have children under the age of 15 only and where parents live together as couples raising their children.
- 4, 370 children come from a family where all children are under 15 and where the mother is the sole caregiver and 402 children live in a family where their father is the sole caregiver (CSO, 2016).
- 1288 referrals were made to Tusla in Meath in the second quarter of 2021 which was an increase of over 200 since the first quarter of 2021 (Tusla, 2021). (Is this a Louth Meath or Meath Figure??)
- 418 children in Louth Meath were in care in the third quarter of 2021 (Tusla, 2021). The exact level for Meath is unknown but it likely underrepresented due to the number of Dublin based foster children located in foster homes in Meath
- 11,141 children in Meath are ‘at risk of poverty’ (Meath CYPSC, 2018).
- 6,570 children experience ‘consistent poverty’ (Meath CYPSC, 2018).
- 192 families presented as homeless in 2020 to the Meath County Council (Meath County Council Annual Report, 2020).

County Meath is the 6<sup>th</sup> largest county in respects to population in Ireland and the 14th largest county on the island at 2,342 km<sup>2</sup>. Traditionally, Navan, Kells and Trim were considered the largest towns of the county but with the rise in the population especially around the South of the county where the county touch’s Dublin this has changed. According to the CSO (2016), Meath had a population growth of 6% to 195,044 people since the census of 2011. The population living in urban areas accounts for 58.6% (114,380), while 41.4% of people live in rural areas. The image below has been taken from Wikipedia and has been informed by the CSO (2016).

Image 3.1: Population of urban areas in Meath

Rank	Constituency	Pop.
1	Meath West	30,173
2	Meath East	12,679
3	Louth	11,872
4	Meath East	9,533
5	Meath West	9,194
6	Meath East	7,272
7	Meath West	6,135
8	Louth	5,000
9	Meath East	4,219
10	Meath East	4,035






According to the CSO, 8.1% of children in Ireland live in consistent poverty. Social Justice Ireland (2021) published stark findings in their annual report Poverty Focus showing that 26.1% of all children are in poverty in Ireland. 15.4% of people working are in poverty, 13.4% of people on home duties (parents, carers), 16.7% of school going children and student aged 16 and over are in poverty, 9.9% of those retired are in poverty and 12.3% of those unable to work due to illness or disability are in poverty in Ireland. The authors of the Meath CYPSC Children and Young People Plan used figures from the 2015 SILC survey (Survey on Income and Living Conditions), to calculate the rates of poverty amongst the County Meath population. Their calculations show that 11,141 children are 'at risk of poverty' in the county and 6,570 children experience consistent poverty (Meath CYPSC, 2018). According to the Survey on Income and Living Conditions (2020), over 61,000 families have an unmet social housing need in Ireland. In Meath, 1,703 households qualified for social housing in 2020. 742 of these households were unemployed or in the receipt of a social welfare payment and 61 of these households were one parent families. According to Meath County Council Annual Plan (2020), 554 households presented as homeless to the Meath County Council. (362 individual/couples and 192 families). According to the council (2020), 301 presented due to family circumstances (199 family breakdown, 41 domestic violence, 39 addiction, 22 mental health). Poverty, unemployment and housing all contribute to the challenging situations families find themselves in and it is for this reason that targeted individualised supports must be made available to families.

Every quarter Tusla produce a report of figures which show the number of referrals in the quarter. Figures from each quarter are presented and then compared per quarter. Data from the Third Quarterly Report (2021) shows the increase in child welfare and protection referrals to Tusla between Q1 and Q2 for the Meath/Louth LHO. Q1 saw 1080 referrals, while Q2 saw 1288 referral to the child and family agency for the area. The figure represents 13.8 children per 1000 children under the age of 17. In the first quarter 66 of these referrals were through mandated reports and in the second quarter, 121 of these referrals were through a mandated report. For Q2, 43% of these cases were closed after the screening stages while 52% of cases were progressed to the next stage of the referral process. 34% of these cases were closed with no further action and 63% were closed with an ongoing safety plan in action. In Q3 the Meath Louth LHO had 418 children in care. This is up 21 from the same time period in 2020. 35 of these children are in placements with private providers. In Q3, 353 children had an allocated social worker and 64 children were waiting to be allocated. 389 children had a care plan in place and 29 have no care plan in place (Tusla, 2021)

The Pobal HP Deprivation Index (2016), Meath is the 7th most affluent local authority in the country. Despite this 9,431 people were unemployed in Co. Meath in 2016 according to the Census. The research conducted by Pobal in 2016 found that North Meath and the Kells District showed higher levels of deprivation than other parts of the county. At the time, Kells had an unemployment rate of over 28% for males over 27% for females. Navan also showed significant levels of disadvantage. 6 of the 7 rural areas of Navan were found to be 'very disadvantaged' in the research (Pobal, 2016).



## 4. Literature Review

### 4.1 Definitions, Principles and Forms of Family Support

#### Definitions

Defining Family Support is not a simple task. It is a broad term that includes a range of approaches and interventions. In Ireland, the definition which is widely used in literature was developed by Pinkerton et al., in 2004.

Pinkerton et al. (2004) defines it as

*“Both a style of work and a set of activities which re-enforce positive informal social networks through integrated programmes. These programmes combine statutory, voluntary, community and private services and are generally provided to families in their own homes and communities. The primary focus is on early intervention aiming to promote and protect the health, wellbeing and rights of all children, young people and their families, paying particular attention to those who are vulnerable or at risk.”*

On the Tusla website, this definition is echoed but simplified defining family support as;

*“Family Support is a style of work and a wide range of activities that strengthen positive informal social networks through community-based programmes and services.”*

([www.tusla.ie](http://www.tusla.ie)).

The principles of family support which guide how support is offered and delivered in Ireland are based on a set of well-defined principles developed by Pinkerton and colleagues (2004).

#### These 10 principles of family support include;

1. Working in partnership with children, families, professionals and communities.
2. Family Support interventions are needs led, and strive for minimum intervention required.
3. Require a clear focus on wishes, feelings, safety and well-being of children.
4. Family Support reflects a strengths-based perspective which is mindful of resilience as a characteristic of many children's and family's lives.
5. Effective interventions are those which strengthen informal support networks.
6. Family Support is accessible and flexible in respect of timing, setting and changing needs, and can incorporate both child protection and out of home care.
7. Facilitates self-referral and multi-access referral paths.
8. Involves service users and front-line providers in planning, delivery and evaluation on an on-going basis.
9. Promotes social inclusion, addressing issues of ethnicity, disability and rural/urban communities.
10. Measures of success are routinely included to facilitate evaluation based on attention to outcomes for service users, and thereby facilitate quality services based on best practice.

Meath Springboard have adopted Pinkerton et al., definition of family support and the 10 key principles listed above. This definition considers how adaptable and versatile family support services need to be in order to have positive and effective outcomes for children and families. They recognise the complexities of family life and emphasise the need for a wraparound approach to supporting families to make a positive change in family life. Furthermore, the literature acknowledges the diversity of each family and shows an understanding that no two families have the same needs nor require the same type of supports.

While services offer several forms of support, a person's informal supports, such as family members, friends and their community are just as important as the formal support offered by family support services. Most work done with families is about strengthening these bonds so that when a family is ready to move on, they have the network around them that will support them in the future. According to Whittaker and Garbarino (1983), this type of family support is 'the bread and butter sources of help'. Unfortunately, informal help or support is not available for everyone or can in itself be the cause of the stress and it is perhaps one of the key reasons family support services based in a community setting are so important. Where this 'bread and butter' support is non-existent, weak, or incapable of providing the help required, a person is more likely to turn to formal support sources (Dolan et al., 2006).

While the definitions of family support have not shifted much in the past few decades, how family support services work has. The partnership approach, where a parent or a family collaborates with a service to improve outcomes is different. Nowadays, the relationship is the key component to family support as will be seen in this report. The voice of the child is another key component to how family support work differs. The shift in how family support services work with families was reflected in the DCYA commissioned report 'What Works in Family Support' and with the first Children and Young People Framework, Better Outcomes, Brighter Futures 2014-2020.

## 4.2 Governance and Framework of Family Support in Ireland.

### The role of Tusla

Tusla, the Child and Family agency is the statutory organisation governing work carried out with children and families in Ireland in response to child welfare and protection issues. Under section 8 of the Child and Family Act 2013, Tusla is required to support and promote the development, welfare and protection of children and to support and encourage the effective and positive functioning of families. Tusla provide information and guidance to the Minister for Children, Equality, Disability, Integration and Youth on areas relating to the agency's responsibility to children and families. Established in 2014 as a means to coordinate a national response to working with children and families, Tusla is responsible for a number of key services working with them including;

- Child welfare and protection services
- Educational welfare services
- Early years services
- Family and locally based community supports
- Domestic, sexual and gender-based violence services
- Services related to the psychological welfare of children
- Alternative care



## Working with children, young people and families in Ireland

Several policies and frameworks guide the work that services provided to children and families in Ireland (Slaintecare 2011; Healthy Ireland 2013; What Works in Family Support 2013; Better Outcomes, Brighter Futures – the National Policy Framework for Children and Young People - 2014-2020; The Participation Toolkit 2015; Aistear Siolta Practice Guide 2015; The National Youth Strategy 2015-2020; Tusla’s Quality Improvement Framework 2016; Children’s First 2017; the First Five Policy Paper for the First Five Years of Life 2019; Sharing the Vision: A Mental Health Policy for Everyone 2020; and, Wellbeing Policy and Framework for Practice 2018-2023).

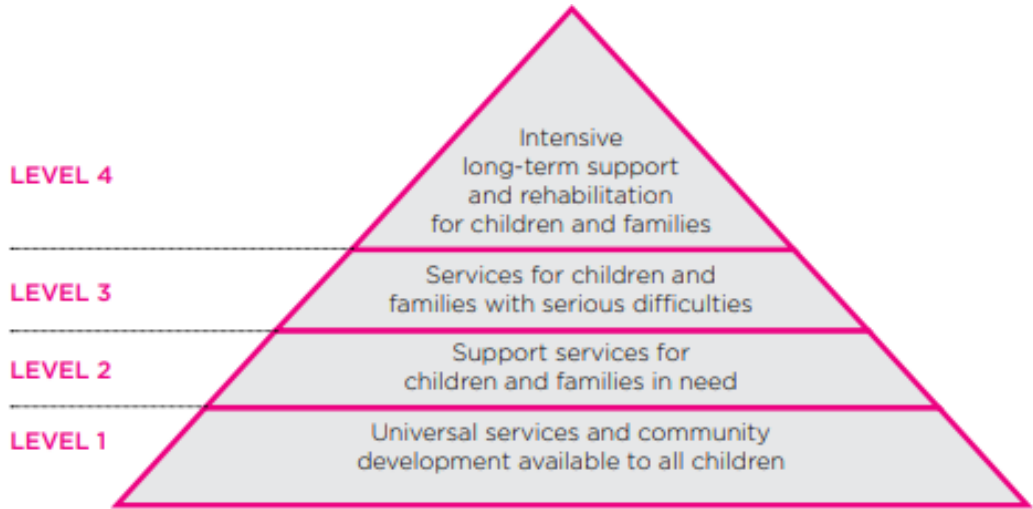
The Prevention, Partnership and Family Support (PPFS) Programme is the national programme of early intervention and preventative work promoted by Tusla. The programme aims to prevent risks to children and young people through building sustainable capacity and resources within Tusla and partner organisations to deliver early intervention work. The programme has three main work streams that seek to support the participation of children and young people in decisions that affect them directly and indirectly, support parents in developing their parenting skills and to implement an area-based approach identifying and addressing the needs of children, young people and families in a coordinated manner.

Meithal is part of this area-based approach and is the National Practice Model for work carried out with children and their families. Meithal is a case coordinated process for families with additional needs who require support from a multitude of agencies but who do not meet the threshold to be referred to the Social Work Department under Children’s First. Meithal aims to ensure that the needs of children and their families are met through identifying the strengths in the family and understanding their level of need so that they can be provided with the support they require to improve the outcomes for children and their family. The Child and Family Support Network (CFSN) ensure integrated service delivery within the area base and consist of several agencies including local statutory children and families service providers (e.g. psychology, public health nurses, social work, justice, education and welfare) and local voluntary and community children and families services (Family Support Centres, agencies currently funded through Tusla and the HSE (Health Service Executive) children and families services & organisations funded through other sources (e.g. Pobal, Department of Education). Meath Springboard is a key component in this network facilitating a large portion of family support work. They play a major role in ‘on the ground’ prevention and early intervention work with children and families in Meath. As a community-based support, this type of support offered by Meath Springboard is crucial in providing families with extra needs with both universal and targeted, individualised programmes of support.

## Provision and delivery of support

In Ireland Family Support Services are provided through a tiered system of delivery depending on the level of need that child or family has. In the mid-1980s, early 1990s Hardiker, Exton and Barker were commissioned by the Department of Health and Social Security in the UK to “take one step back and undertake an exploratory study on preventative practice to prevent family breakdown or the need to take children into care” (Hardiker et al., 1991). Hardiker et al., (1991) developed a model of practice to illustrate how services and supports can be provided at different levels depending what the family’s needs are. The image below shows the 4 levels of support offered to child and families in Ireland.

Image 4.1 Hardiker et al. Model (1991)



(Source: TUSLA)

From an Irish perspective, Gilligan (1995a; 2000) suggested a 3 tier framework for service delivery. Table 4.2 below shows this adaptation.

Table 4.2. Categories of Family Support (Gilligan 1995a; 2000)

Category of support	Developmental	Compensatory	Protective
Aim of the support	Strengthen the social supports and coping capacities.	Compensate family members for the negative or disabling effects of disadvantage or adversity.	Strengthen the coping and resilience of children and adults in relation to identified risks or threats.

(Source: Tusla)

Table 4.3. Categories of Family Support across Levels of Need

Categories of Support	Levels of Needs
Protective	Supports and rehabilitation for children and families with established difficulties and serious risk Level 4
Compensatory	Services for children and families targeting early difficulties and significant risk Level 3
Developmental	Support for children and families in need Level 2
	Universally available service Level 1

## National outcomes and outcome indicator

The five national outcomes identified in National Framework for Children and Young People in Ireland 2014-2020 as previously noted in this paper, guide all work undertaken with children and young people in Ireland. Within each outcome are a set of aims which are essentially tools to measure the impact of the work done with children and young people. The aims of each outcome are listed below.

### Outcome 1: Active and Healthy

- Aim 1: Physically healthy and making positive health choices
- Aim 1.2: Good mental health
- Aim 1.3: Positive and respectful approach to relationships and sexual health
- Aim 1.4: Enjoying play, recreation, sports, culture and nature

### Outcome 2: Achieving full potential in learning and development

- Aim 2.1: Learning and developing from birth
- Aim 2.2: Social and emotional well-being
- Aim 2.3: Engaged in learning
- Aim 2.4: Achieving in education

### Outcome 3: Safe and Protected from harm

- Aim 3.1. Secure, stable, caring home and environment
- Aim 3.2: Safe from abuse, neglect and exploitation
- Aim 3.3: Protected from bullying and discrimination
- Aim 3.4 Safe from crime and antisocial behaviour

### Outcome 4: Economic security and opportunity

- Aim 4.1: Protected from poverty and social exclusion
- Aim 4.2: Living in child/youth friendly sustainable communities
- Aim 4.3: Opportunities on ongoing education and training
- Aim 4.4: Pathways to economic participation and independent living

### Outcome 5: Connected, respected and contributing to their world

- Aim 5.1: Sense of own identity
- Aim 5.2: Part of positive networks of friends, family and community
- Aim 5.3: Civically engaged, socially and environmentally conscious
- Aim 5.4: Aware of rights, responsible and respectful of the law

The 'indicator set' is a welcomed progression in what is now a fully 'outcome focused' service infrastructure. Services can measure their impact in a very practical way using these indicators.

## 4.3 The Level of Need amongst Children and Families in Ireland

### Housing

Research from Social Justice Ireland (2021) found that 190,000 children in Ireland live in a household experiencing poverty. According to the Peter McVerry Trust (PMVT, 2021) and Social Justice Ireland (2021), 2,500 school aged children were homeless in September 2021 and 26% of children are living in poverty. Unemployment in November 2021 was at just over 5% according to the CSO, this equates to 135,000 people of working age who were unemployed (CSO, 2021). In Meath, as seen in Chapter 3, the rate of unemployment according to Pobal (2016) was just under 9,500 with areas such as Navan and Kells showing significant disadvantage. In 2020, 554 households presented as homeless according to the Meath County Council Annual plan with 192 of these being families.

### Wellbeing

The 'Health at a Glance Report' (2016) 18.5% of the Irish population recorded having a mental health illness such as anxiety, bipolar disorder, depression or alcohol/drug use problems in 2016. Research from Jigsaw shows that mental health issues were on the rise pre- 2020 (Jigsaw Annual Report, 2017, 2018). In March 2020 Ireland and the majority of the world went into a lockdown due to the onset of a pandemic. The outbreak of Covid 19 saw life across the globe change dramatically with citizens advised to stay at home to prevent the spread of the virus. In Ireland, some very interesting findings were made in regard to how the lockdown and the fear of the virus affected both children and adults. Research carried out in March and April of 2020 by academics at Maynooth College and Trinity College, found that of the 1000 participants 41% of respondents reported feeling lonely, 23% reported clinically meaningful depression, 20% reported clinically meaningful anxiety and 18% reported clinically meaningful post-traumatic stress (Hyland et al., 2020). A survey of 195 psychiatrists by the College of Psychiatrists of Ireland in May and June 2020 found that the majority reported increased referrals for generalised anxiety (79% reported an increase), health anxiety (72%), depression (57%) and panic (54%) (College of Psychiatrists of Ireland, 2020). For children and young people, mental health challenges have also seen an increase as a direct result of the pandemic. Recent research published in the Irish Medical Journal showed a rise in Emergency Department hospital admissions by over 50% during the summer of 2020 in comparison to the previous year. Researchers conclude that *'following the initial COVID-19 lockdown, Emergency Department presentations by children for acute mental health (MH) care increased significantly over prior year, with this increase sustained throughout 2020. Long-term stressors linked to the pandemic may be leading to chronic MH problems, warranting increased funding of MH services as part of the response to Covid-19'* (McDonnell et al., 2021). Findings from Jigsaw (2022) found that there was a 500% increase in the about of visits to their website between 2020 and 2021 eluding to the idea that children and young people's mental health were deeply affected by the pandemic.

### Children in care

In 2020, Tusla the Child and Family Agency received 69,712 referrals to Child Protection and Welfare Services according to their Annual Report for 2020. At the end of 2020, Tusla (2020) stated 5,882 children were in care with 91% of these children in foster care and an additional 2,943 young people receiving support from aftercare services. Currently in Ireland, more than 6,000 children are in state care. A report published by HIQA (2021), using the figures reported in the Tusla Quarterly Service Reports for 2021, found that in 4 service areas, 1 in 5 children did not a social worker. These areas included Carlow/Kilkenny/South Tipperary; Dublin

Southwest/Kildare/West Wicklow; the Mid-West and the Midlands. Nationally, during the second quarter of 2021, 18,060 referrals were made to Child Protection and Welfare Services. This was 8% (1,288) more than the first quarter of the year and the highest number of all quarters for 2020 and 2021.

### Referrals to Tusla

In the first half of 2021, 34,832 referrals were made, up 1% (354) from the same period in 2020 (34,478). It is important to understand the timing of this and what was going on across the country at the time. Schools and other services closed during these periods due to the pandemic and this may have had a direct impact upon family life. It is also important to note the issues of concern within these referrals. 50% (9,069) of referrals for the second quarter of 2021 were for welfare concerns, 34% (6,198) were for abuse/neglect. The primary report concern was not recorded for the remaining 16% (2,793) of referrals. During the first quarter of 2021, 36% (6,461) of referrals were from An Garda Síochána, which was the most prevalent source. This was followed by teachers (11%; 1,959) and social workers (10%; 1,891). The source of referrals was not recorded for 8% (1,497) of referrals. In regards to what happened after referral, 49% (8,809) of referrals were closed following screening. 46% (8,352) of referrals progressed to the next stage of the referral process which is called the preliminary enquiry stage. The remaining 5% (899) of referrals were either at the screening stage, awaiting closure following screening, or another process stage, when the data was collected for the Tusla Quarterly Report (2021).

### The needs of children and families using family support services and early year's services in Ireland

A study by the Daughters of Charity (DoC) in 2019 found several key findings about the needs of children and families using family support services in Ireland. It also shows how interventions improve overall outcomes for children and families. Between the period of 2015-2017, DoC family centres provided surveys for 968 families. Families were surveyed at 2 points. The first point saw over 900 surveys being returned and the second point post intervention saw over 500 surveys being returned. This was quite a substantial piece of research and its significant lies in the insight it has provided about the needs for children and families attending family support centres. The most concerning statistic is the number of children aged 5-12 who were experiencing physical or mental health problems. 23.8% of 906 children experienced difficulties with 83% of these diagnosed by a professional. Anxiety, ADHD, ODD, asthma, dyslexia and speech and language difficulty were reported. 60.2% of 906 parents reported divorce or separation as the key life event that they need support around. According to parents surveyed, over 54% of their children witnessed some form of conflict between parents. For children the main cause of worry was around living location (53%), death of a family member (39%), serious illness of a family member (20%), mental health of a family member (26.5%) the witnessing of substance mis-use (30%) and a further 18% faced 'other disturbing events such as homelessness, domestic violence and abusive behaviour from birth parents.

Findings from this study showed that conduct, emotionality, hyperactivity, and peer problems significantly decreased from Time 1 to Time 2 and prosocial behaviours significantly increased Daughters of Charity (2019). For parents who score particularly low on mental health measures at Time 1, the difference at Time 2 was considerable showing a 'highly statistical significant improvement' (Daughters of Charity (2019)). The parent-child relationship also improved, with participants noting their closeness increasing and conflict decreasing. Children reported more warmth and responsiveness from their parents and parents noted a greater closeness with their children. Nixon (2013) found that encouraging optimum levels of warmth and engagement between parents and children is associated with positive adjustment in children and fewer negative outcomes. One finding which needs further examination on a national front was around coping strategies and coping skills of



children and young people. For younger children no significant improvements were noted but for young people aged 13-17 did report significant reductions in the distress caused by problems they had encountered with coping strategies being used by them more over time.

### The need for family support services in Ireland

According to the Tusla Annual Report (2020), over 22,356 families received support from a Family Support Service. The complex needs experienced by children and families both locally and nationally is evident and it is for this reason family support as a preventative approach and as an early intervention is so important. Adverse Childhood Experiences (ACE) are known to contribute to less positive later life outcomes (Loukes et al., 2009; Copper and Stewart, 2013; Hair et al., 2015; Nobel et al., 2015; Plumb et al.,) and with the high level of need being seen right throughout the island of Ireland, an intense and quick response is required. The growing concern around the effects of the pandemic on children and families is an indicator that further pressure will be put on services. Currently the level of support required by a family is high and with extra need that is appearing as a result of the pandemic, the response going forward may need to be even more intense and funded accordingly with a view that the work done now will offset some of the long term negative impacts that will evolve because of the pandemic.

## 4.4 The Importance of Prevention and Early Intervention

### Adverse Childhood Experiences (ACE) Study

The Adverse Childhood Experiences Study (ACE Study) is a longitudinal research study conducted in the U.S. The study has become world-renowned because it demonstrated a connection between adverse childhood experiences and social and health problems across the lifespan. Since it began, the study has produced over 50 reports of findings. One study from the National Survey of Children's Health in the USA reported that approximately 68% of children 0–17 years old had experienced one or more ACEs (Blodgett et al., 2018).

### The effects of ACE in the development years

Adverse experiences during childhood can have a negative impact on later life physical and mental health (Gilman et al., 2002; Langenberg et al., 2006; Loukes et al., 2009; Copper and Stewart, 2013). It is also known that child poverty can have a significant effect on a child's schooling and school readiness (Waldfogel and Washbrook, 2013; Wickham et al., 2016). Research suggests that child poverty may also be associated with differences in how the brain structurally develops. Hair et al., (2015) and Noble et al., (2015) found that child poverty influences the development of the areas of the brain concerned with language, executive functioning and memory. Poverty has been shown to be connected to increased premature births (DeFranco, 2008). A premature child has an increased risk of developmental challenges and other adversities (Platt, 2014) such as depression, infectious and non-infectious respiratory problems, epilepsy, cerebral palsy, visual and cognitive impairment and developmental coordination disorder (Moore et al, 2015). Plumb et al. (2019) found that a child with 4 or more ACEs was 32 times more likely to be labelled with a behavioural or cognitive problem than a child with no ACEs.

According to WAVE Trust (2018), children are more likely to experience adverse experiences if their parents were also subject to abuse and trauma in childhood. As the number of ACE suffered by a parent increase, the likelihood of them providing the care required to ensure positive outcomes for their child decreases. Parental conflict, alcohol or substance misuse, mental health problems, and a parents own experience with trauma in

childhood all increase the risk of adverse experiences for their own child. Lovejoy et al. (2000) found a correlation between depressive symptoms in mothers and disengaged and hostile parenting. Other studies show that when infants or children interact with a disengaged or irritable caregiver, the child becomes anxious and this can increase the productivity of dangerous life altering stress hormones in that child (Dawson and Ashman, 2000; NSCDC, 2014).

### The effects of ACE in the later years

The individual implications of suffering adverse childhood experiences is not just on schooling and how a child progresses in their education. In adulthood, the history of ACE can result in complex clinical profiles with several co-occurring mental and somatic disorders such as post-traumatic stress disorder, depression, borderline personality disorder, obesity and diabetes (Herzog and Schmahl, 2018). Metzler et al., (2017) found that compared to participants with no ACEs, those with high ACE scores were more likely to report high school non-completion, unemployment, and living in a household below the federal poverty level. According to Metzler et al., (2017),

*‘...this evidence suggests that preventing early adversity may impact health and life opportunities that reverberate across generations. Current efforts to prevent early adversity might be more successful if they broaden public and professional understanding (i.e., the narrative) of the links between early adversity and poverty.’*

## 4.5 Theories used to Framework Family Support

In the, ‘What Works in Family Support’, authors concluded that;

*“In sum, theories of attachment, social support, resilience, social ecology and social capital are suggested as a theoretical basis for Family Support with the main points on each theory reviewed. Family Support is a clearly defined orientation with an accompanying set of practice principles applicable across the four levels of service provision and with a developmental, compensatory or protective focus, as required.” (Tusla, 2013)*

Meath Springboard provide a community-based, holistic service to children and families that is guided by well documented and proven theory. All work carried out with children and families seeks to identify their strengths and to harness and encourage these strengths with the aim that families can, over time, move forward and no longer need a supported formal service structure. The basis of the Ecological Systems Theory and the principles and benefits of using a community-based approach are outlined in Section 1. Other approaches and theories used to guide the work of Meath Springboard include the strengths-based approach, Bowlby’s Attachment Theory, Piaget’s Cognitive Constructivism, Bandura’s Social Learning Theory and, Bruner’s Discovery Learning Theory. This section will briefly look at how these theories can be used in family support.

### Attachment Theory

The Attachment Theory looks at the relationship between a child and caregiver that is involved with making the child safe, secure and protected (Benoit, 2004). When these positive attachments are not present, a child will have what Bowlby called an ‘insecure attachment’.

The term bonding is a key term used in the Attachment Theory. Attachment is based on an emotional bond between the parent and their baby. While this bond is biologically there from birth, an emotional bond takes time. For the child, that bond is there straight away because their survival depends on it. For parents, this

bond can take time to build, for example, if a mother experiences post-natal depression. Attachment therefore is a process and the strength of that bond will depend on how this process is managed and maintained by the parent or care giver. This bond, if healthy, ensures that the child feels nurtured and protected in the early years. The young child's identity is shaped by the interactions they have with others who are significant in their lives – parents, childcare providers, and other family members (Michigan Department of Community Health, 2003). According to Bowlby (1969),

*“A child is “attached” to someone when he or she is “strongly disposed (even ‘genetically primed’ as a survival strategy) to seek contact with a specific figure and to do so in certain situations, notably when he is frightened, tired or ill”.*

The importance of this bond is not only seen in the emotional experiences of the child but if these bonds are not present, a child development can be impacted negatively for the long term. Studies have found that infants with a secure attachment to their primary caregiver tend to be better at regulating their emotions as adults and develop emotional resilience (The Royal College of Psychiatrists in Scotland, 2015; Zeanah and Zeanah, 2009). Evidence suggests an insecure attachment is related to the development of problematic behaviour in children (Fearon, 2010) and increases the risk of a range of mental health disorders as an adult (Mikulincer and Shaver 2012). There is also evidence that a disorganised attachment is a powerful predictor of more serious psychological dysfunction and maladjustment in children (Sroufe, 2006).

### Cognitive Constructivism

Cognitive Constructivism is a term associated mostly with the theory developed by Piaget in the early 20<sup>th</sup> century. The term describes how children actively construct knowledge in reaction to what they experience. The theory sees the ‘child as the scientist’ navigating and understanding life by what they see and by what happens to them. The theory is very much based on the environment that surrounds that child and how that child understands that environment. From a family support perspective, it is important that work with parents include this theory. An understanding of it can encourage parents to create a more positive environment for their child.

According to Piaget, the first two stages (from birth -2 and 2-7year) of child's life are very important especially in regard to early development. During the first stage, Sensorimotor, children learn through their senses and movement and as they have very limited communication skills and language tools they learn through doing. The second stage, Pre Operational, is the stage where children can now represent their experiences mentally using imagery and language. Piaget noted seeing this stage present mostly during ‘imaginative play’. It is for this reason that this theory is so important. It showed how imaginative play is a key component in child development. It allows them to not only conceptualise what they witness and experience but to re-enact it and make it their own. It allows for a type of child guided discovery that is not necessarily found in any other activity. Undirected play allows children to learn how to work in groups, to share, to negotiate, to resolve conflicts, and to learn self-advocacy skills (Erikson 1985; Hurwitz, 2002).

### Social Constructivism Theory

Vygotsky's Social Constructivism Theory differed from Piaget, in that Vygotsky suggested that development and learning are a result of social interactions. Piaget believed that children construct knowledge by actively engaging with the environment. Both theories have merit and are both very useful when understanding how best to provide supports to families. They both highlight the unique roles parents play in the development and learning of their children. The key concepts within the Social Constructivism Theory were based on ‘Zone of Proximal Development’ (ZPD) and ‘Thought and Language’. ZPD refers to a functioning that is in essence

beyond a child's ability or capacity but can be attained with appropriate assistance from an adult or older peer. Vygotsky referred to this as being the distance between a child's actual development level, determined by their own independent problem solving, and the potential development possibly that can be reached if they have appropriate assistance.

The second key concept is the connection between speech (silent, inner speech and oral language) and the development of mental concepts and cognitive awareness.

*'If a child is not talked to she will not develop speech and language capacity, if she is not given opportunities to use her developing motor systems, she will not develop motor skills, and, most devastating, if she is not loved, she will struggle to love others'* (Social Exclusion Task Force, 2006).

Through the assistance of a capable adult or a parent, a child is able to learn skills and aspects of a skill that go beyond their cognitive ability but by showing them how to do it, they can imitate it and therefore carry out the activity. Play is also a great tool to teach children skills which they may not have ordinarily learned by themselves. Vygotsky also emphasised the role of family, the role of community and the role of other children in our development especially during childhood and the early years.

### Social Learning Theory

The importance of the Bandura's Social Learning Theory in respect of family support is the emphasises on observing, modelling and imitating the attitudes and emotional reactions of others. Bandura proposes five essential steps in order for the learning to take place which are observation, attention, retention, reproduction, and motivation. Social Learning Theory is based on the idea that environmental and cognitive factors influence our learning and behaviour. Bandura (1977) believed that behaviour is learned from the environment through the process of observational learning. In other words, by watching a parent, a child learns how to behave. Bandura (1977) also believed mediating processes occur between stimuli and response which means that between seeing (stimulus) and doing, there is a slight break where the person mediates before they imitate the behaviour or not (response). This is perhaps where free will comes in to it. While the parent may display a behaviour for the child to imitate, the child can choose whether or not they do respond.

The Social Learning Theory (SLT) has been well documented but still to this day the most well know study of it was carried out by Patterson and colleagues in the 1970s. Findings from this longitudinal study were very significant and in regard to the theories that surround family support, this study shows how important social learning is for children of all ages. Patterson and colleagues found that in families where parents exhibited low rates of positive reinforcement and harsh discipline, aversive behaviour was observed to be reciprocally reinforcing between parents and children. This leads to escalating levels of negative behaviour among family members over time. Young children brought up in such environments were observed to exhibit low levels of prosocial behaviour and high rates of aggression. The research concluded that if a child lived in this type of environment, the likelihood of peer rejection and academic difficulties upon school entry increased and that in adolescence, such individuals were at a greater risk of school drop-out, substance abuse, association with deviant peers, and antisocial behaviour. In adulthood, numerous concerning outcomes were observed. These included propensity for incarceration, early parenthood, unemployment, addiction and mental health difficulties. What SLT shows us is that in staff modelling the behaviour we wish parents to use with their children, we increase the likelihood of the parent copying the behaviour with their child.

## 4.6 What Works in Family Support (Focus on Tailored Programmes and Children Contact Service)

### National perspective

In Ireland, the focus of Family Support is to improve outcomes for the child. To improve those outcomes, family life and how a parent parents is taken into account and if a parent is struggling, family support service will aim to support that parent so that they can support their child. When working with families with high needs, services have to be able to provide many forms of support or at minimum be able to refer to an agency that can support parents with whatever may be happening in their life. Poverty, housing, unemployment, family structure and situation, substance misuse, mental health and physical health problems are just some of the challenge's family's face.

In 2013, the then Department of Children and Youth Affairs, published a report entitled 'What Works in Family Support'. This report was implemented by Tusla upon their establishment and has since guided family support in Ireland. From reviewing a significant number of family support services and programmes both nationally and internationally, the authors found several common themes that are likely to promote positive outcomes. In 2016 The Centre for Excellence Service evaluated 52 programmes and services that aimed to improve outcomes for children across the island of Ireland. Published in 4 booklets, the summary reports showed the learning from investing in family support over the previous decade. The 'On the Right Track' series focused on parenting, child behaviour, child health and child learning. The findings showed that 'there is no one approach that will meet the needs of all parents (CES, 2016). The researchers found that 'providers should use a range of approaches to identify parents and encourage their participation' (CES, 2016). Both will be explored here.

- Relationships between service users and providers is usually perceived as positive by participants, mainly due to the sense of trust that develops between individuals (Tusla, 2013). According to CES, effective programmes provide training and ongoing support for practitioners to develop their skills and good, trusting relationships with parents;
- While early intervention is usually best to tackle difficulties before they become too severe, those with more entrenched difficulties can still benefit from family support services (Tusla, 2013). Services need to be flexible in how they respond to the needs of children and families according to CES (2016). Offering a range of programme activities has also shown to be effective (CES, 2016).
- Most successful programmes are both strengths-based and needs-led and tailored to the individual needs of families (Tusla, 2013). A clear understanding of this need has been found to be important by CES (2016) especially when working with children with behaviour challenges. According to CES (2016), child health programmes are most effective when they are tailored to the age and development stage of that child.
- Programmes that are highly structured and manual-based need to maintain a high level of fidelity to the implementation of the programme (Tusla, 2013). CES (2016) found the most effective programmes are based on a clear theory of how they work, are consistent in their attention to programme guidelines but that are flexible enough to respond to local needs.
- Comprehensive training for all facilitators, including volunteers, is needed to ensure adequate levels of knowledge (Tusla, 2013). CES (2016) found programmes are most effective when they use well trained practitioners who have access to support such as coaching and they also found that

programmes which are effective in improving child health, provide training and ongoing support for practitioners to develop their skills.

- Services for ethnic minorities appear to work best when there is a match in language and/or culture between participants and service providers (Tusla, 2013).
- Programmes that are based on a theoretical model of change are most likely to show effective outcomes (Tusla, 2013).
- For those with more complex problems longer term interventions appear to add to positive outcomes (Tusla, 2013). CES (2016) found that parents experiencing particular difficulties with their mental health, or higher levels of stress, require longer term, multi-dimensional and co-ordinated interventions’.
- For families with child behavioural problems up to and including Level 3 needs, parenting programmes are generally an effective intervention (Tusla, 2013). The CES (2016) found 5 features of effective programming when working with children where behaviour challenges occur. These include;
  - Programmes are based on a clear theory of how they work.
  - They are consistent in their attention to programme guidelines, but are flexible in responding to local needs.
  - They address the multiple aspects of children’s lives (e.g. home, school, community).
  - They are supported by consultation with the community and interagency work
  - They use well trained practitioners, who have access to supports such as coaching and mentoring.
- A number of side benefits can also be accrued from centre based services, such as increasing friend networks and facilitating social support (Tusla, 2013). CES (2016) found that effective programmes address the multiple aspects of children’s lives (e.g. home, school, community) and they are supported by consultation with the community and interagency work.
- Most interventions show similar levels of effectiveness for both individual and group style programmes.

Tusla (2013) found several common themes concerning factors that reduce the effectiveness of family support services. These included;

- Many families require a multiagency response to meet their needs – if this is not available it is likely that the needs of families will not be met completely
- For families who are at higher levels of risk and have more complex problems, generic parenting programmes appear to have little effect.
- Single focus interventions are unlikely to affect other difficulties being experienced by families, so all potential areas of difficulty need to be addressed in interventions.
- While many family support services aim to be mainly self-referral services, there can be a perceived stigma attached to attending, which is difficult to overcome in some families.
- Services which are aimed at mothers and children and do not include fathers in their interventions. This may impact on outcomes related to family functioning.
- Location and timing of programmes can sometimes be inaccessible or restrictive for some families.
- Some time-limited interventions may not be effective for families with multiple difficulties.



## Participation and partnership approach

The use of tailored, individualised support plans for families is growing in Ireland and as a country we have recognised that using a strengths-based approach in this process has significant benefits for families. Having the parent as a key stakeholder in the development of the support-plan is at the forefront of this approach. A strengths-based approach is essentially a collaboration between the provider and the service user to work together to determine an outcome which the service user can reach using their strengths and assets. (Morgan and Ziglio, 2007).

Tusla's Parent Participation Toolkit (2015) states that;

*“Partnership working is a key theme of the policy, strategy and guidance documents in Prevention Partnership and Family Support throughout Tusla. Having an awareness of what parents’ needs are in relation to parenting supports is important so that we can collectively plan and deliver services well. What parents have to say about the services that they participate in, will be an important part of the evidence about what is working for children, parents and families. Working in a participatory way with parents can support partnership building and enable parents to be creative and reflective in their own lives. Parents that are actively invited to be part of service planning, delivery and evaluation and who have positive experiences of being involved and being listened to are more likely to use participatory practices in their own homes.*

Tusla's Child and Youth Participation Strategy 2019-2023 states that

*There is no age limit on the right of the child or young person to express her or his views freely. All children and young people, including those of pre-school age, school age and those who have left full-time education, have a right to be heard in all matters affecting them, their views being given due weight in accordance with their age and maturity.*

A positive relationship can be established by respecting and understanding the parent's point of view and the ability to establish common ground on which to base a support plan that accommodates the needs of the parent as well as the child (Connolly, 2004). In order to make positive changes in a child's life, the overall needs and context of the family have to be taken into consideration (Tusla, 2013). Strategies that do not fully engage with parents and children are less likely to be effective (McKeown, 2001). The effectiveness of family support services also depends on the partnerships with other agencies. Noted in the 'What Works' report, families with complex needs will likely require the support of other specialist services and in many cases the effectiveness of family support depends on these partnerships.

## The benefits of a strengths based approach

Practitioners believe that strengths-based practice benefits families as it increases their engagement in the programme, by enhancing family efficacy and empowerment and by enhancing their social support networks (Green, McAllister and Tarte, 2004). Early and Glenmave (2000) found that the use of the strengths perspective in families not only helped the family identify resources for coping, but also helped them use existing strengths to sustain hope and a sense of purpose by setting and achieving goals in line with their personal aspirations, capabilities, and visions of a possible life. Working to enhance an individual's awareness and understanding of their own strengths and capabilities has been shown to promote an increased sense of well-being (Park and Peterson, 2009). Smock et al., (2008) found that strengths-based approaches are shown to be effective in developing and maintaining hope in individuals. Other research suggests that the approach has shown to reduce

risk behaviour such as substance misuse and criminalisation while improving levels of social functioning (Shapiro, 1996). Exploring the use of a strengths based approach with whole communities found that by encouraging pride in achievements and a realisation of what people have to contribute, communities generate increased confidence in their ability to be producers not recipients of development (Foot and Hopkins, 2010). A longitudinal study carried out in Scotland by the Scottish Government in 2010 found that by using an 'assets approach', the participating community saw increases in social harmony and empowerment and adult employment (McLean, 2011).

## Children's Children Contact Services

### Definitions and History of Child Contact Services

According to Barnardo's (2013), a Child Contact Centre is defined as follows:

*'A Child Contact Centre is a safe, friendly and neutral place where children can spend time with the parent/s they do not live with. It is a child centred environment which allows the child to form or develop a relationship with the parent at their own pace and in their own way, usually through play and child centred activities.'*

- <http://www.barnardos.ie/what-we-do/specialist-services/child-contactcentres.html>

Barnardo's (2013) state that the Child Contact Centre is for:

- Children whose parents are separated and who are unable to agree safe and appropriate arrangements for the child /children to have contact with the parent they do not live with.
- Children who are in the care of the Health Service Executive who need support to have contact with their parent(s).

One key reason child contact centres should be an important part of the Family Support infrastructure in Ireland is the growing number of one-parent families and the increasing number of child protection and welfare cases presenting to the Child and Family Agency. According to figures taken from the One Family website, 1 in 5 people in Ireland live in a one-parent family and 1 in 4 families with children in Ireland is a one-parent family ([www.onefamily.ie](http://www.onefamily.ie)). Just under 5,500 children are in foster care ([www.tusla.ie](http://www.tusla.ie)), with most children in care under a voluntary care agreement. A voluntary care agreement places the child into the care of Tusla but the parent can still have access to the child. Child contact centres provide this safe neutral space for children to have contact with a non-resident.

According to Dunn et al., (2004), child contact centres have a historically established role in child protection work in the US for the facilitation and regulation of contact between children in care and their families. Over the past few decades there has been a shift to include concerns around children losing contact with their non-resident parent (Humphries & Harrison, 2003; Hunt & Roberts, 2004); and also for what are considered high-risk or custody disputing families who are litigating before the court (Birnbaum & Alaggia, 2006). By providing a 'neutral', safe and child-friendly meeting place where children can meet with their non-resident parent, the aim of the contact centres has traditionally been to limit the interaction and potential risk of dispute and acrimonious between parents (Dunn et al., 2004). The protective function of the centre for children and for



parents has in the past 2 decades become increasingly emphasised. Safety and neutrality are therefore two concepts that are central to the philosophy of these facilities (Barnardo's, 2013).

Child Access Services are relatively new to Ireland in comparison to other countries such as the UK, the US and Australia who began to set up Access Services during the 1980s (Dickens, 1991). Tusla have always provided access services to foster children and children in care but as a country we lack Child Access Services that also support children who have one parent not living in the family home due to separation or divorce for instance. Meath Springboard, the Togher Family Centre in Cork, the Men's Network Resource Centre of Ireland based in Ballymun and Time for Us in Galway are amongst the few services providing centre based contact support services to children with non-resident parents in the Irish Republic. One other private company called Supervised Access Ireland also offer a Child Access Service in Carlow, Tipperary and Limerick. One possible reason for the limited number of services may be because divorce was uncommon in Ireland up until the 1990s and it was not until 1995 that Ireland had its first legal divorce settlement. We also have a comparatively low divorce rate in comparison to the US and the UK. In 2017 for example, 0.6% of married people divorced in 2017 comparison to 3.2% in the US and 1.9% in the UK according to Eurostat (2017). The Court Services Annual Report (2020) has since shown the greatest increase in separation and divorce cases since divorce was first made legal in the 1990s. According to the report, there had been a 29% increase in files for separation and divorce. This emphasises the need for more child contact centres throughout the country.

Ireland has moved forward in how we offer and deliver Child Access Services is very similar to how the UK developed their services some 20 years previous. At first, staff who worked at Contact Centres were volunteers and were in many ways a community response to the rising levels of divorce and separation in the country. The UK seemed to accelerate mostly in their knowledge and understanding of Children Access Services when they established the NACCC (National Association of Child Contact Centres) in 1991. The NACCC coordinated efforts to establish the parameters for best practice and it represents the interest of the contact centre staff and volunteers, as well as those of children and parents (Aris et al., 2002). In Ireland, we do not have the same type of infrastructure surrounding and supporting the work of Contact Services but we do in most part use the same best practice and procedure framework that the NACCC have developed.

Ireland's initial focus with Children's Access Services was to support parents to manage the effects of separation and divorce. It is only in the last decade and a half or so that this focus has evolved to include 'acrimony and domestic violence' (One Family, 2013). A shift has also been seen in how we approach Access Services. At the beginning the focus was on parents and their voice but nowadays the voice of the child is at the centre. The name of such services in Ireland has now change to 'Children's Contact Services' and this better reflects the key outcomes of the supports which are centred around the child.

### What Works when Supporting Children and Families through Contact Support

In Ireland, research carried out regarding the working and the practice of Contact Services is limited and this is likely due to the fact that we are relatively new at it in comparison to our neighbouring countries. We have also been able to adopt the guidance around practice and procedure of the NACCC and this may have impacted our output in regard to research. One very significant piece of research was conducted by One Family in 2009. One Family is Ireland's national organisation for one-parent families. Their role is to;

*"effect positive change, achieve equality and social inclusion of one-parent families, through advocacy and researching issues of relevance for one-parent families."* (One Family, 2014)

The innovative research was entitled *Supporting Child Contact: the Need for Child Contact Centres in Ireland*. One Family undertook the research recognising the challenges faced by families, social services and the courts

in facilitating safe contact where there are disputes, or concerns about safety within families. According to One Family (2009), the aim of the study was to examine the need for child contact centres in Ireland and to explore how best this need can be met for parents and children experiences contact difficulties following marriage and relationship breakdown. Key themes were identified and these included;

- Contact centres provide a safe neutral environment where children can have contact with their parents
- The parents welcome the need for support and non-judgemental trained staff to assist with the contact arrangements
- There is a real emphasis, within contact centres, on listening to the wishes of the child regarding contact and the importance of providing a child centred environment (One Family, 2009).

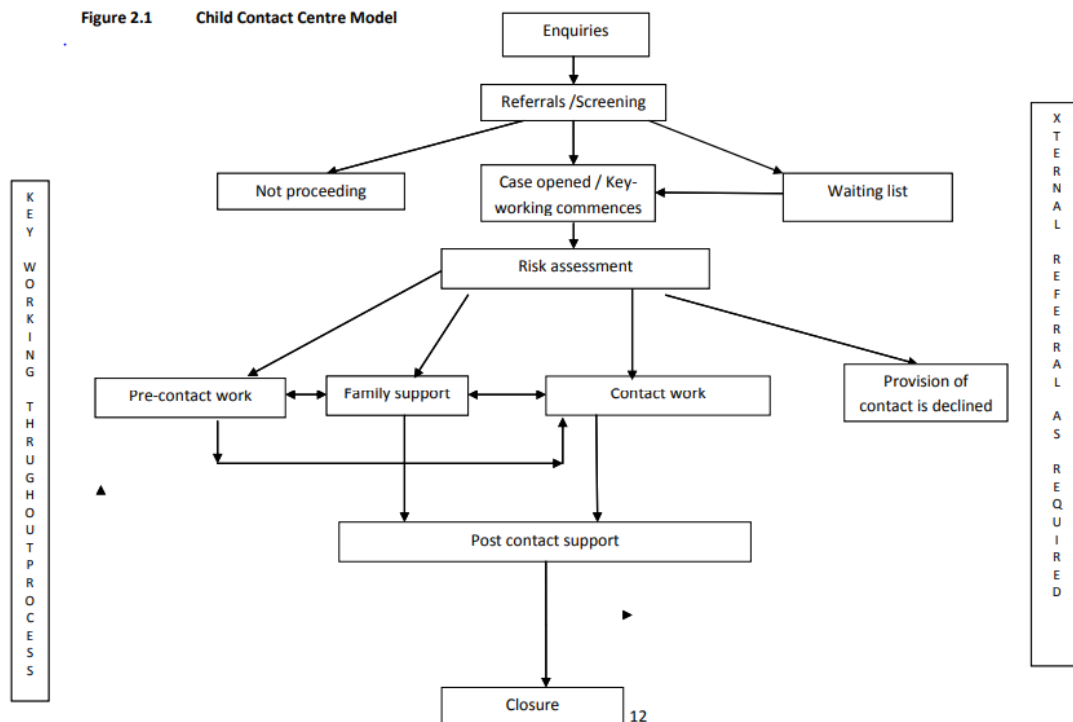
The main conclusion of this report was that there was a significant level of unmet needs in relation to children of separate parents. This conclusion led to a very active response by the government department at the time and several agencies to establish the first of its kind child contact service as part of a pilot scheme in 3 areas of County Dublin. In December 2010, the DCYA (now the Department of Children, Equality, Disability, Integration and Youth), the Health Service Executive (HSE), the Family Support Agency (now Tusla, the Child and Family Agency) and Ballymun Regeneration provided funding to One Family and Barnardo's to establish a pilot Child Contact Centre service for a two year period.

The services offered to families during this pilot did have a very positive impact upon children, family relationships and the feeling of safety overall, especially where domestic violence was a concern. Families who engaged with the pilot were provided with a number of services. According to Barnardo, these included

- Assessment to identify whether contact is in the best interests of the child and if so what supports the child and family require including risk assessment.
- Preparation for contact for the child and for both parents.
- Supervised contact, supported contact and handover contact services.
- Family supports for parents including individual parent mentoring, mediated parenting plans and counselling. Family supports for children including play therapy and art therapy.
- Regular reviews with inputs from the child and from both parents whenever possible.
- Pre and post-contact family supports as required.
- Information on and referral to other services as required.
- Court reports as appropriate.

The pilot used a comprehensive Contact Service Model as seen below. Image sourced from the Barnardo's (2013) report.

Image 4.2.: Child Contact Centre Model (Barnardo's, 2013)



The findings of this pilot were documented by Murphy and Holt on behalf of Barnardo's (2013) found and that the effective provision of child contact services required the following if it was to have the greatest impact. These requirements were;

- An information, advice and referral service regarding children and parenting issues co-located in the family law courts with referral of families to Mediation Services wherever appropriate.
- For complex family circumstances, the courts need access to professionally conducted assessments.
- Supports for children in articulating their wishes and which ensure that their voices and best interests are central to all decisions.
- Relevant Child Contact services offering supervised, supported and handover contact.
- Access to a range of family supports for parents not living together and their children including counselling, parent mentoring and child therapy.
- An agreed policy on how best to address child contact in situations of domestic violence.

➤ Barnardo's (2013)

Another significant piece of research relevant to Ireland is the UCC (2014) report. The report '*An Evaluation of the Child Contact Service at the Togher Family Centre: The Voices of the Parents and the Experiences of the Social Worker*', is significant because it appears to be one of the few pieces of research, besides the Barnardo (2013) piece which explore the stakeholders views and experiences. It is significant to this evaluation as it appears to be the only other piece of research carried out in a setting similar to that of the Meath Springboard Child Contact Service. The findings of the Togher Evaluation (2014) in brief were as follows;

Two Themes were identified in this research. Theme 1 is most relevant and it identified the contributors to families having a positive experience. These included;

### The Togher Family Staff

- Consultations with parents found that key staff were supportive, non-judgemental, facilitating, willing to listen, respectful and helpful.
- Social workers consulted noted the professionalism of staff as contributing to the positive experience.
- Social workers actively conveyed how flexible the staff were at the centre in regard to access arrangements.
- It was reported that staff were very supportive and understanding of the needs of both the child and the parent.

### Family Friendly Setting

- ‘welcoming and homely’ and ‘comfortable and familiar’ – this was a common sentiment when families spoke about the space
- The centre had a lot of activities going on at it and this meant that it was not obvious why a family was there – this was welcomed by those who used the service.
- The centre was informal with a ‘brighter atmosphere’ as one stakeholder said.
- ‘Facilities to make tea and coffee’ and ‘a secure play area’ (inside and outside) showed to be important.
- Having a variety of age appropriate toys was important for families.
- Other items in the room such as a rocking chair and bean bags were also noted as having a positive effect.
- Having a clean space to have the contact time showed importance.

### National research

One final Irish study worth noting was carried out in Ireland by researchers Keily, O Sullivan and Tobin (2019), entitled *‘Centre-based supervised child-parent contact in Ireland: The views and experiences of father, supervisors and key stakeholders’*. The purpose of the research was twofold: to ascertain the views and experiences of birth fathers on all aspects of the supervised child-parent contact they experienced in a centre; and to find out from centre supervisors their views of engaging fathers and supervising contact, and from key stakeholders and referral agents (a community project worker, a child protection social worker, Guardians ad Litem and a family law solicitor) their perceptions of the supervised contact provision in the centre (Keily et al., 2019). They noted that while the study is exploratory, they found that gender is a feature meriting consideration in the supervised child-parent contact settings; and that child values and the demands of operating the centre are held in tension so that the purpose and scope of supervised contact can be interpreted and experienced differently (Keily et al., 2019). One issue of concern for fathers was the length of time that supervised access can go on for. It was found that fathers who were interviewed in the study valued relationship-based supervision practice to a higher extent than the supervisors or other stakeholders who placed value on the skills required for supervision. According to the authors, while optimal supervised contact is short-term, there was evidence that long-term service use was occurring and this was a significant issue for fathers (Keily et al., 2019). Other concerns raised by fathers were around how the contact time and activities between them and their child were observed, interpreted and reported.

## International research

Coram, a UK Charity working with children for more than 275 years are a key charitable body in the UK providing support for families. They offer direct, practical help and emotional support to vulnerable children, young people and their families. The reason this charity is important to mention is for three key reasons. The first is, as an organisation they have such significant experience working with vulnerable people, the second is the body of research they have authored and the third is they were one of the first charities in the UK to author 'A Guide to Best Practice in Supervised Child Contact' using findings from their own funded projects. The report was written by the head of the charity, Adam Slade and published first in 2001. It was later reprinted in 2010. The report has shown some very important findings which are still very relevant despite being 20 years old. In brief, best practice involves 5 effective approaches to contact service practice. The first was around setting the scene for contact services and this was concerned with the importance of the environment that contact occurs in and the staffing of the contact centres. When initially setting up the centres in 1987, they aimed to provide an environment which was;

- Self-evidently child friendly and a stimulating environment.
- Have an element of 'homeliness' and privacy.
- Be a culturally sensitive environment that would reflect and value the rich ethnic and cultural diversity of service users.
- A service that provides maximum safety in terms of the frequent need for parents or for carers and parents not to meet and to prevent child abduction and worker isolation.
- Pleasant and technologically well provided offices for workers.

Coram (2010) suggested that the most effective and safe contact supervisors always have;

A capacity for a high level of attention to detail in assessing, observing and recording children's attachments and interactions have;

- Low impulsivity level and a great capacity for patience;
- Commitment to child protection and to children as the paramount concern of all the family members;
- Quiet confidence sufficient for person centred empathy and authoritative intervention
- Ability and willingness to work the unsocial hours that regular child contact visits require.

Coram (2010) outline several values that a supervisor should have. These included a commitment to the welfare of the child as a priority in work and decision making; a commitment to the organisations equal opportunity policy and anti-discrimination policy; a commitment to promoting and enabling individuals wherever appropriate to resume control of their lives and the private care of their children and; a commitment to providing users with a high quality environment in which they may meet their child (Coram, 2010). The report also suggests the importance of supervision of staff and stated that Iwaniec (2006) 4 chief functions of social work supervision are relevant for contact service supervision also.

This paper is worth reviewing in full as it provides a very unique set of objectives for children contact services. It also reviews the management, assessment and planning of referrals which when knowing the importance of inter-agency work, could be very beneficial to any child contact service. It emphasises the importance of supervising contact sessions and outlines a very specific set of practices which have shown benefit. The report also offer suggestions on how to monitor and evaluate supervised contact service delivery.

## Assuring Quality in Family Support Services

The Tusla Quality Improvement Framework: A Tusla Approach to improving the Quality and Safety of Services (2016) identified 3 key principles which help to characterise what a high quality service looks like. These principles state that high quality services are child centred, well-led and safe.

**Child-Centred** – The rights and views of children and families are respected and taken into consideration when planning, delivering and improving services.

- Children and families are listened to and supported to participate in decisions made about them
- A system to ensure high standards of customer service, including managing complaints and feedback
- Children, families and communities are engaged with to inform improvements in practice and policy and to support participation in service design and delivery
- Services are responsive, coordinated and proportionate to the needs of children and families to ensure children receive a seamless service, including effective interagency working
- Child and Families are treated with dignity and respect and children are advised of their rights and services

**Well-Led** - There are governance, leadership and management systems in place that support staff to deliver consistent and accountable services for children and families.

- Defined organisational structures and clarity in relation to roles and accountability for all staff are in place, and staff are made aware of them
- Leadership promotes and supports a culture of quality at all levels
- Effective service and business planning to meet the needs of children and families
- Decision making is underpinned by available evidence and information
- Human and financial resources are well managed and deployed based on analysis of need
- Services comply with legislation, regulations, national policies and standards
- There is a process in place for effective and efficient staff recruitment, selection and induction
- Regular supervision and support is provided for staff at all levels focusing on staff development and retention

**Safe** - Services are designed and developed to achieve the best and safest outcomes for children and families in a timely and proportionate manner.

- Services are delivered using agreed practice models that are based on best available evidence and research
- Children are prioritised and responded to without delay to meet their identified needs in a proportionate manner
- Systems for assuring and improving the performance and quality of services are in place, including the monitoring of outcomes for children and families
- Risks and incidents are identified, managed and used to improve services
- Inter-agency and inter-professional co-operation, best practice and service innovation is in place.

## Conclusions

The national and international view of what family support is and how it is defined is very similar. Over time, how work is carried out with families has also synced with Ireland, while delayed in our approach to intervention in comparison to the UK, Australian and the US, as a country, we now have the policy and guidance to provide a coordinated response to how we work with families and how we measure outcomes. Some of the greatest changes in Ireland have been seen around how we develop our approaches, how we view the voice of children and families, how we now involve the children and parents in matters that concern them and how we now place huge significance on the relationship between the service user and the Support Worker. Family support guided by psychological and social theory is emphasised. Hearing the voice of the child at the front of the discussion around matters that concern them is seen as paramount with protective factors being at the base of this. Having a set of national outcomes that can be measured has improved service implementation and delivery. The focus of evaluation and monitoring have become even more emphasised in recent years. The importance of using evidence based programming is recognised right throughout services and the use of programmes which are tailored to the needs of the family is advised. These shifts show that as a country we seek to meet the needs of families individually and recognise that the 'one size fits all' approach just simply does not work.

Meath Springboard work with families on level 3 of the Hardiker Model and the needs of the children and families they work with are complex and require intensive support. This level of need is seen right throughout Ireland and while as a country, Ireland has been very proactive developing frameworks, developing indicator sets, re-directing policy to include the voice of the child more and in creating networks of coordinated and integrate services, there is a need for more funding and resource flexibility for services working with children and families. To implement all of these measures so that services can facilitate the type of change required to improve outcomes in line with the 5 national outcomes, Government Departments need to provide the financial means to meet the needs of every child or family at their point of crisis. Services need to be able to respond in a timely manner to ensure that these needs do not increase to a point where a child or parent cannot manage. For early intervention to have a real lasting impact, timing really is everything!

## 5. Evaluation of Meath Springboards Tailored Programmes of Family Support and the Children's Contact Service and their impact on the children and families they work with

### 5.1 Survey Respondents Profile

#### Profile and needs of parents and families who participated - Tailored Programme of Family Supports Parents

18 parents who have been supported by Meath Springboard through the Tailored Programme of Family Support since July 2021 have completed the Family Support Online Satisfaction Survey. Parents were asked to give some detail to their circumstance. All children of the parents were under the age of 18. 18 families took part in this survey and these families have 60 children in all. 1 family in this group has 2 children in total under the age of 18 with 1 child not living with them.

Table 5.1.: Children in Families supported by Meath Springboard

No of children.	No of families
1 child	3 families
2 children	2 families
3 children	5 families
4 children	5 families
5 children	2 families
6 children	1 family

Parents who participated were asked which of the following best described their housing situation. There answers are shown in Table 5.2.

Table 5.2.: Housing situation of Families supported by Meath Springboard Tailored Programme of FS

ANSWER CHOICES	RESPONSES
▼ Privately owned	44.44% 8
▼ Private rented	11.11% 2
▼ Rented with assistance of Local Authority	33.33% 6
▼ Local Authority and or housing agency accommodation	11.11% 2
▼ Other (please specify) <a href="#">Responses</a>	0.00% 0
<b>TOTAL</b>	<b>18</b>

Social Welfare payments were the main source of income for over 60% of households. The table below shows the breakdown. 1 parent was self – employed and another parent stated that they were working and also received some form of social welfare payment.



Table 5.3.: Income source of parents supported by Meath Springboard Tailored Programme of FS

ANSWER CHOICES	RESPONSES	
Employed	27.78%	5
Social welfare payment	61.11%	11
Other (please specify)	11.11%	2
TOTAL		18

When parents were asked what best describes the adult relationship in the house, over half of the participants described themselves as lone parents, just over 22% as married and living together and just over 16% of parents describing themselves as married and separated. The table below shows the full breakdown.

Table 5.4.: Relationship Status of parents supported by Meath Springboard Tailored Programme of FS

ANSWER CHOICES	RESPONSES	
Married and living together	22.22%	4
Lone parent	55.56%	10
Married and separated	16.67%	3
Parents living and raising children together	5.56%	1
TOTAL		18

Parents were asked to describe what was happening for their family that brought them to avail of support from Meath Springboard Family Support Services. 17 of the 18 parents who completed this survey responded to this question. The reasons parents engaged with Meath Springboard include;

- Marriage break up
- Relationship problems with father/mother of child
- Domestic Violence
- Lone parent and struggling
- Mental Health issues
- Bereavement
- Support with substance misuse
- Parent and child welfare needs
- Support with child being in the care of Tusla
- Support dealing with an alcoholic partner

When asked how they became involved with Meath Springboard, 39% were referred/made aware of the services through Tusla Social Work Department and a further 11% were through a Tusla staff member. The remaining 50% came through self-referral, school staff, Public Health Nurse, counsellor, through attending parent groups at Meath Springboard and Mental Health Services.

Parents who participated were supported through a number of Meath Springboard services. The table below shows these supports.

Table 5.5.: Support received by families through Meath Springboard Tailored Programme of FS

ANSWER CHOICES	RESPONSES	
▼ Tailor Program of Family Support	38.89%	7
▼ Parent Support Group	33.33%	6
▼ Counselling Services	11.11%	2
▼ Access Support	0.00%	0
▼ Other (please specify) <a href="#">Responses</a>	16.67%	3
TOTAL		18

Of the parents who selected other, 2 wrote that they were supported through one to one sessions with staff and another stated they received a combination of the supports shown in the suggested answers.

50% of Children Contact Service parents who completed the survey availed other supports provided by Meath Springboard. 25% were provided with a Tailored Programme of Family Support. 75% stated *other* with 25% of this group reporting that their child had received play therapy.

Table 5.6.: Support received by families through Meath Springboard Children's Contact Service

ANSWER CHOICES	RESPONSES	
▼ Tailored Programme of Family Support	25.00%	1
▼ Parent Support Group	0.00%	0
▼ Counselling Services	0.00%	0
▼ Other (please specify) <a href="#">Responses</a>	75.00%	3

### Profile and needs of parents and families who participated – Children Contact Service

5 4 parents who used the Children Contact Service completed the Online Satisfaction Survey. However, one survey was returned blank. 3 out of 4 or 75% of parents who completed the survey stated that the children lived with them. For 75% of parents, only 1 child attended the Child Contact Service. For 25% 2 children attended. 50% of families who were supported through the Children Contact Service were also supported by other services offered by Meath Springboard. This included the Tailored Programme of Family Support. When asked what best described there housing situation the following was stated;

**Table 5.7 Housing Situation for parents being supported through the Children’s Contact Service**

ANSWER CHOICES		RESPONSES	
▼ Privately owned		25.00%	1
▼ Privately rented		50.00%	2
▼ Rented with assistance of Local Authority		0.00%	0
▼ Local Authority and or housing agency accommodation		25.00%	1
▼ Other (please specify)	Responses	0.00%	0
<b>TOTAL</b>			<b>4</b>

When asked to describe the household income, parents answer the following;

**Table 5.8.: Employment Status for Parents being supported through the Children’s Contact Service**

ANSWER CHOICES		RESPONSES	
▼ Employed		50.00%	2
▼ In receipt of social welfare payment		50.00%	2
▼ Other (please specify)	Responses	0.00%	0
<b>TOTAL</b>			<b>4</b>

When asked to best describe the adult relationship in the house that the children live in 25% were ‘married and living together’, 50% were lone parent and 25% were partners living together and raising children.

**Table 5.9.: Relationship Status for Parents being supported through the Children’s Contact Service**

ANSWER CHOICES		RESPONSES	
▼ Married and living together		25.00%	1
▼ Lone parent		50.00%	2
▼ Married and separated		0.00%	0
▼ Partners living and raising children together		25.00%	1
▼ Other (please specify)	Responses	0.00%	0
<b>TOTAL</b>			<b>4</b>

All of the parents who completed the Children’s Contact Service survey stated that they were engaged with family law proceedings when they first contacted Meath Springboard. When parents were ask to describe what the situation was in their family that brought them to avail of Access Support from Meath Springboard, domestic abuse may have been the cause for relationship breakdown. 3 out of 4 parents stated that some

form of domestic abuse had occurred. One parent stated that a barring order was in place against the father of the child. Criminal activity and addiction of the other partner was also stated as a concern.

For the parents who completed the survey and availed of the Children Contact Service, 25% came from a solicitor, 25% from the Tusla Social Work Department and 50% of Children Contact parents were ordered by the courts.

### Profile of services and organisations who completed the Online Satisfaction Survey

35 staff from 18 services and organisations completed the Online Satisfaction Survey for Service Stakeholders. 13 of these service are shown in the list below;

Table 5.10.: Services who participated in the Evaluation

ANSWER CHOICES	RESPONSES	
▼ Tusla Child Protection Service	20.00%	7
▼ Tusla Prevention Partnership and Family Support Service	14.29%	5
▼ HSE -Public Health Nurse	0.00%	0
▼ HSE - Other	5.71%	2
▼ School/ Education Service	17.14%	6
▼ Local Authority	2.86%	1
▼ Family Resource Centre	14.29%	5
▼ Community group	8.57%	3
▼ Other (please specify) <a href="#">Responses</a>	20.00%	7

Other services and organisations included Meath CYPSC, an Garda Siochana, 2 counsellors in private practice, a private play therapist and a Domestic Violence services.

Of the 35 staff members from these services and organisations who completed a survey, 19 referred clients to Springboard through the work that they do with children and families. Of the 19 referral agents, just over 66% of staff referred clients to Springboard to be supported with a Tailored Programme of Family Supports and 66% referred for Child Affordable Counselling.

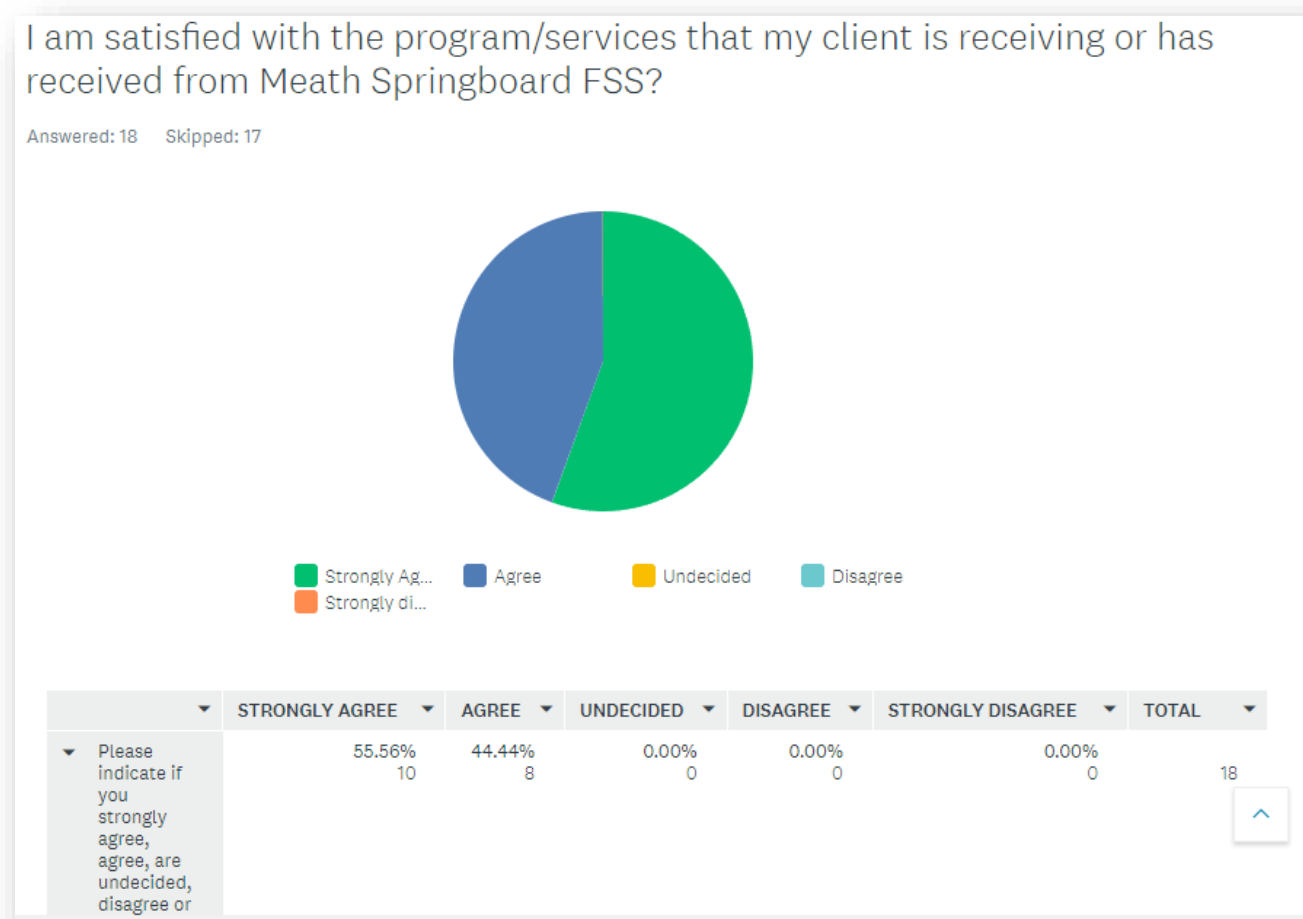
## 5.2 Findings from the evaluation (survey and interview inputs)

### Stakeholder Satisfaction with the services provided by Meath Spring FFS

Altogether, 85 stakeholder accounts informed this evaluation. Inputs were given by stakeholders through 68 completed survey and 16 interviews. Of the surveys returned, 36 were from service stakeholders, 18 from parents who have received or who were receiving family support from Meath Springboard, 4 from parents who are using or have used the Children Access Service and 11 from foster parents who are engaged with Meath Springboard through the Access Service.

36 professionals from varying services throughout the county participated. Of these 35 participants, 19 of them were referral agents. The graph below shows that 55.55% of service stakeholders who referred and completed this question, *strongly agreed* and 44.44% *agreed* with the following statement 'I am satisfied with the program/services my client is receiving or has received from Meath Springboard FSS'.

Chart 5.1.: Satisfaction of Service Respondents




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*"Springboard are very good at building the connections with parents. They have very skilled and experienced staff."*

*"Springboard are a very professional organisation."*

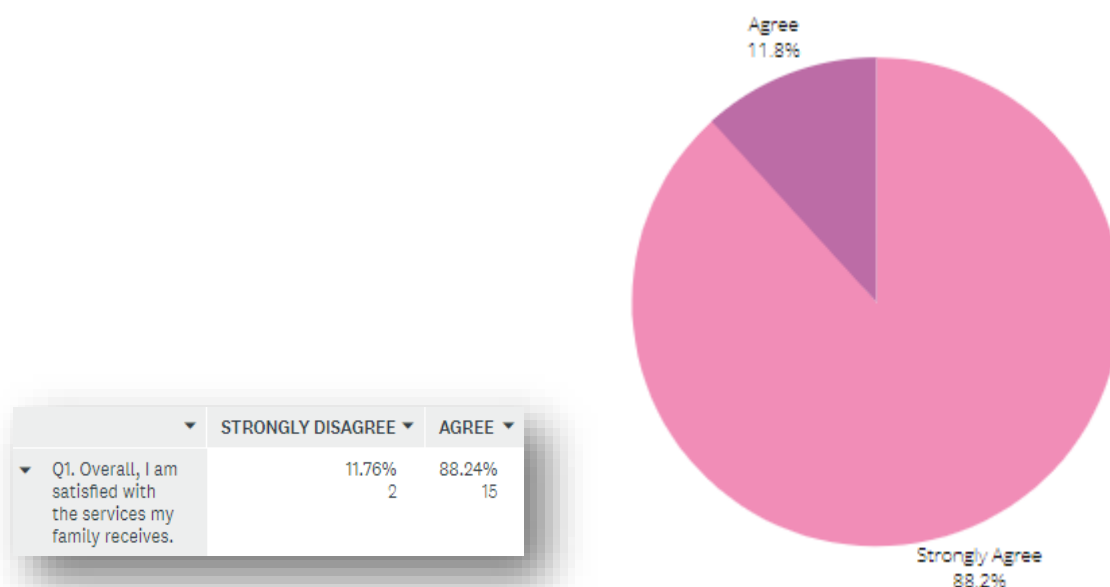
*"The service is a very proactive one and continues in meeting the changing needs of families and the community."*

Service Stakeholders Statements (Referral agents and non-referral agents)

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18 parents who completed the survey have received or are receiving support from Meath Springboards through the Tailored Programme of Family Support. Over 88% of parents who answered this question (17 or 18 participants) *strongly agreed* that they were satisfied with the services their family received.

Chart 5.2.: Satisfaction of Parents being supported through the Tailored Programme of FS




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*“The support reduced my stress. You know that you are safe and you have someone there you can ring and I know I am not alone anymore, like I use to be. They are a great group of people at Springboard who really help people, who help parents.”*

*“I am really happy with their service.”*

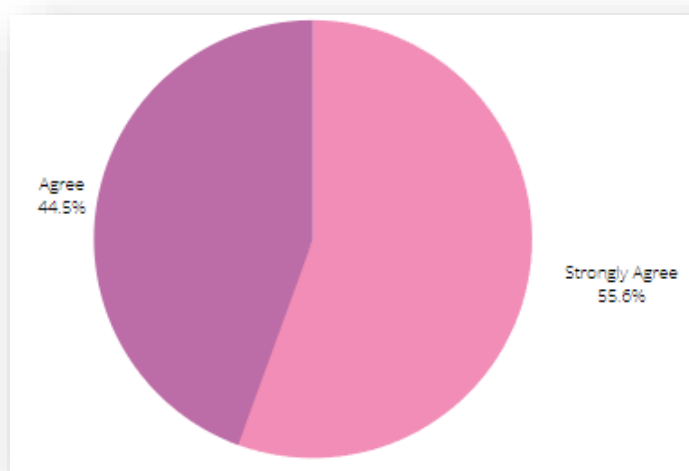
*“They are there to support you and yours kids and help you”.*

*Parents - Family Support*

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11 foster parents completed the survey and over 54% of foster parents *strongly agreed* with the statement that they were satisfied with the services Meath Springboard provided their family and a further 45.55 % of *agreed* with the statement.

Chart 4.3: Satisfaction of Foster Parents being supported through the Children's Access Service



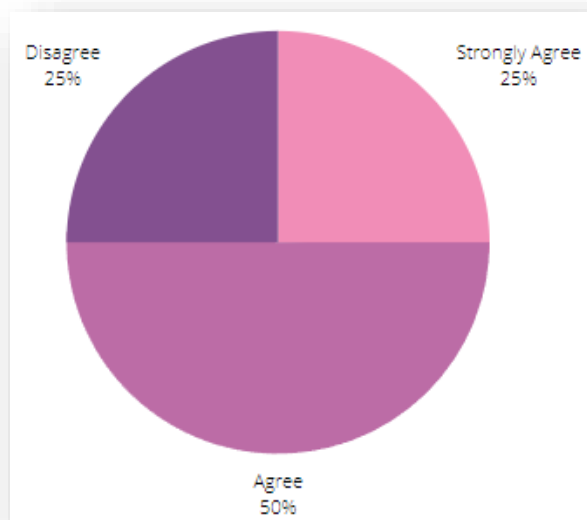
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*“The team are fantastic. They really did do all they could to maintain a great working relationship between us and the birth parents but most importantly between our foster son and their Mum and Dad.” - Foster Parent*

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5 surveys were returned from parents who are supported by the Children Contact Service but only 4 parents had completed the survey in full with 1 survey being nulled as a result. 25% *strongly agreed* with the statement, 50% of parents *agreed* with the statement of satisfaction, and 25% disagreed.

Chart 5.4.: Satisfaction of Parents being supported through the Children's Access Service



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*"The staff were friendly and professional."*

*"This is a lovely service."*

*"You can be yourself around staff and they make you feel comfortable."*

#### Parent stakeholder – Child Contact Service

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Overall parents who were surveyed were satisfied with the service. One mother did have concerns around the speed that unsupervised access could happen as they felt their child was not ready for unsupervised access. This parent stated that their child had told them and Springboard that they did not want unsupervised access. The parent felt that their child was not heard by staff and that this has now added pressure on her child. This parent also took part in an interview and stated that while there were some challenges around this, her child liked the team at Meath Springboard and now liked attending the sessions because she felt safe with the team. She stated that they made her daughter feel safe during the access sessions as she did not want to be alone with her Dad.

All parents (Parents supported by the Tailored Programme of Family Support and the Child Contact Service) and foster parents were shown a series of statements which were the same and then further statements relating to the service they were supported through. One of these was whether they felt the staff as Meath Springboard treated them with respect. Of the parent and foster parent group (33 parents), 94% of parents agreed that they had been treated with respect. One parent was undecided and another disagreed with the statement. This parent was a parent being supported by the Children's Contact Service. When asked if parents (all groups) felt that the support worker spoke to them in a way that they understood, 97% of participants said that they did with 1 parent marking undecided. One other question that all parent and foster parent groups were asked was whether they could talk or their child could talk openly with the Springboard team. 91% agreed that they could, 6% were undecided and 3% disagreed, not giving any reason why.



## Referral and Recommendation

57.89% of the services stakeholders who completed the survey *strongly agreed* that Meath Springboard FSS helped the client they referred and 42.11% *agreed*.

Table 5.11.: Survey Question – ‘I believe Meath Springboard helped my client’

I believe Meath Springboard FSS's program/services helped my client.

	STRONGLY AGREE	AGREE	UNDECIDED	DISAGREE	STRONGLY DISAGREE	TOTAL
Please indicate if you strongly agree, agree, are undecided, disagree or strongly disagree.	57.89% 11	42.11% 8	0.00% 0	0.00% 0	0.00% 0	19

During surveying, service stakeholders were asked ‘*what they expected Meath Springboard FSS to achieve with the family they referred to them and to their knowledge did Springboard FSS deliver?*’ Overall, the majority of the 18 service stakeholders who responded stated that Meath Springboard delivered. Responses around expectations included;

*‘The family would learn new parenting skills and receive support in a non-judgemental way. That the children could grow in confidence and stay in school. Yes this was provided.’*

*‘Parents support to parent. Therapeutic support to children. Yes – I am satisfied all families I have referred to Springboard have been offered the appropriate services.’*

*‘To support the family and provide counselling. Yes they did provide this.’*

*‘Supervised access with FSS – have delivered.’*

**Service Stakeholders – Referral agents and non-referral agents**

The primary expectation of Meath Springboard FSS referral agents was that they provide their clients with parenting support and education and support for children. This support ranged from counselling support to support with housing, medical cards and social welfare payments/entitlements. In relation to the Children’s

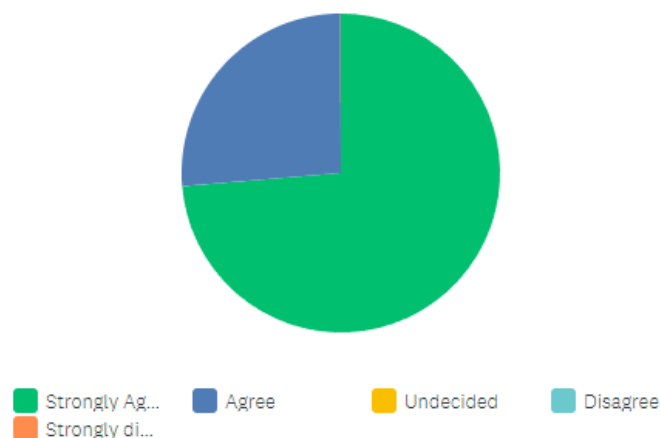
Contact service, one service stakeholder did state that they felt that there was an over emphasis on supervised visits rather than supported visits stating that *'families feel caught in an enclosed space with access closely supervised'*. On the contrary, one other service stakeholder noted that they have a concern around how two families they worked with said the supervisors spent the contact time on their laptop doing other work. This stakeholder's key concern was if the parent needed support or was stuck with something, was the supervisor able to observe and intervene or may they miss it because they are doing a different task.

In all, 35 professionals completed the survey but only 19 of them had referred to Meath Springboard. Of the referral agents, 18 of the 19 service stakeholders completed the following question. All of those who answered this question said that they would refer their clients to Meath Springboard FSS again.

Chart 5.5.: Survey Question – 'I would refer other to Meath Springboard FSS

I would refer other clients and/or recommend Meath Springboard FSS to others?

Answered: 19 Skipped: 16



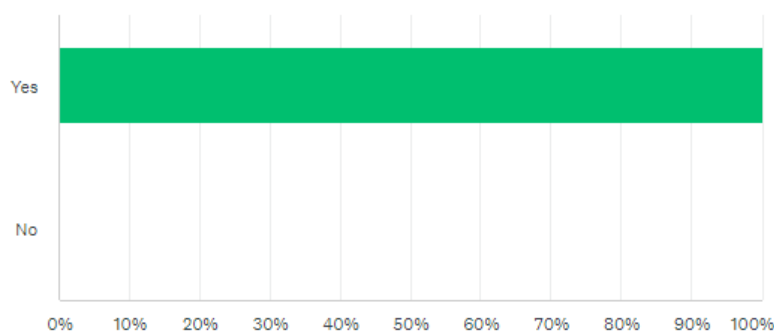
	STRONGLY AGREE	AGREE	UNDECIDED	DISAGREE	STRONGLY DISAGREE	TOTAL
Please indicate if you strongly agree, agree, are undecided, disagree or strongly disagree.	73.68% 14	26.32% 5	0.00% 0	0.00% 0	0.00% 0	19

100% of Foster parents who used service provided by Meath Springboard FSS said that they would highly recommend Meath Springboard.

Chart 5.6.: Survey Question – ‘I would highly recommend Meath Springboard FSS to other parents’

## 14. I would highly recommend Springboard to other parents.

Answered: 11 Skipped: 0



ANSWER CHOICES	RESPONSES
Yes	100.00% 11
No	0.00% 0
TOTAL	11

100% of the parents who were supported through the Tailored Programme of Family Support said they would also highly recommend the services to other parents. 75% (3 parents) of parents who were engaged with Access Services said they would recommend the service, while 25% or 1 parent stated that they would not recommend the service. This parent stated during surveying that they would not recommend because they did not think their child was been listened to.

### Fluency, continuity and accessibility of services

When evaluating the services provided by Meath Springboard, the evaluator explored stakeholder satisfaction around fluency, continuity and accessibility of these services for these stakeholder groups.

- By fluency, this analysis will explore whether or not Meath Springboard provided these services with ease, in a timely manner and using their full expertise and experience.
- Continuity is a key component to ensuring families and children receive the same level of care. This evaluation will examine if the services provided are offered and delivered in a consistent way.
- The accessibility of the services and the service provider to both the children and families that use them and to the services that refer and work in partnership with them is paramount to all stakeholders benefiting most from Meath Springboard. The evaluation will explore whether or not Meath Springboard is accessible to stakeholders.

As a community based service, Meath Springboard have been providing services to the children and families since 1999. Members of its staff body have been working in the service since it began while other members

have been there for a significant length of time. This gives Meath Springboard a very unique position in the county as a key family support service. Besides the fact they have provided the county with family support for over 20 years, the staff body have created long standing and strong, robust relationships with direct connections to a large number of the other services and government agencies in the county.

This evaluation has shown that these connections are paramount to the services they provide and are a significant factor in providing a fluent service where access to relevant services and government agencies is made easier for struggling parents. From consulting parents, the fact that staff can pick up the phone and make a phone call on their behalf has shown to be of great benefit. Housing is a concern for a number of the parents who are supported through a Tailor Programme of Family Support at Meath Springboard. 22.22% of parents who completed the survey received support around housing from Meath Springboard. Examples given include phone calls and communication on their behalf and support in locating or improving the family living situation or home.

One mother who engaged with Meath Springboard in various service provisions and over a long period of time stated;

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*“Without Springboard being involved in my journey the last 6 years I don't think I would have gotten as far as I have. They have helped me grow and learn. We as a family are settled in our own home 3 years now, we have a good routine and everyone is a lot happier! I have been lucky enough to get counselling and therapies through Springboard that have helped immensely with my past. The staff are friendly and caring. I've never felt judged or anything while being at courses or meetings with Springboard.” -Parent receiving family support*

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Along with Meath Springboards connections in the county, they can provide children and families with a substantial amount of both practical expertise, educational expertise and a variety of positive parenting and strengths based programmes.

One father who was being supported by one of the Support Workers stated that;

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*“It was really beneficial for me to be able to call \_\_\_\_\_ and know they had the expertise I needed – this was a massive help.” –*

- Parent receiving family support

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Q.5 of the Services Satisfaction Survey asked stakeholders to state whether they agree/disagree with the following statement;

*“Meath Springboard Family Support Service staff responded to enquiries, referrals, information requests etc. in a timely manner”*

STRONGLY AGREE ▼	AGREE ▼	UNDECIDED ▼	DISAGREE ▼	STRONGLY DISAGREE ▼	TOTAL ▼
45.71% 16	45.71% 16	5.71% 2	2.86% 1	0.00% 0	35

Over 91% of service stakeholders *agreed* or *strongly agreed* that Meath Springboard responded to enquiries, referrals, information requests etc. in a timely manner. One service stakeholder disagreed with that statement, saying that the team did not respond to their enquires in a timely manner. One other concern raised by a parent whose child was being supported through the Children Contact Service was that they had been told they would receive update emails after each contact session but this had not occurred.

Consistency in how the team work and the ease of access to expertise and support was noted by parents who were supported through the Tailored Programme of Family Support. This was also noted by service stakeholders with stakeholders stating that *“Springboard is a very consistent service”* and *“Springboard are a very effective service”*. If parents had a challenge or a problem, support workers were able to respond in a quick and efficient way. One parent said that *“if any problems arose they were able to be resolved it in the best way which really helped”*. One foster mother who partook in this evaluation whose foster child now lived quite a distance from their birth parents and siblings was concerned that Access Support may be more difficult if it had to be online because of this distance. The foster child, the birth parent and the foster parents were all supported by the Contact Support Workers to facilitate this contact in a way which would be beneficial to the child. The foster mother stated *‘it worked really well.’* The continuity in how the team work ensures that services and families receive a very fluid service. Guided by theory and with a clear set of values on how to work with families, the team *“work from the same hymn sheet”* as one stakeholder noted. Parents noted that Meath Springboard always reached out even when you were not been supported by them anymore and this consistent call, even though it may be a few months in between each one, was a massive support to parents as they *‘knew they were always there’*. For children and young people growing up with the support, the consistency was noted with how every year Meath Springboard would reach out to them about Summer Camps or Christmas Outings. This provided a support for children and a way for Springboard to link back in with the family to ensure everything was still going well for the family. This *‘consistent, well planned care’* as one parent stated was *‘like a lifeline’*.

In regard to accessibility, as a service in the community, Meath Springboard is regarded as a *‘homely’* and *‘child and family friendly environment’*. Parents in particular noted how *‘welcoming’* the centre is and how they *‘feel at home in it’*. 77% of parents *agreed* that the centre was child friendly with 23% stating *undecided*. One of these parents stated that they had not been to the centre yet.

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*“It is colourful and bright and just a nice place to be.” – Young Person*

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As a space, the majority of stakeholders (all groups) found it to be clean and organised and that the space had facilities that were adequate for children and families. The kitchen spaces and the outdoor garden spaces were seen as important by parents using the Children Contact space. One parent noted being able to make a birthday cake for their child was really important activity to do with their children. All parents surveyed that

used the Children Contact Service agreed that the space they were provided with was suitable for them and their children. For foster parents 70% *agreed* that the space was suitable with 30% *undecided* as they had not been to the centre (due to lockdowns or location). In regard to the Children's Contact service, two suggestions were made. The first was to upgrade the toys available for children. This parent stated that the same toys were in the room three years previously. A service stakeholder reported that families have told them that there is not enough items to support their interactions with their children. One other suggestion was to have a baby-changing table in the access area.

From an inclusivity standpoint, it provides adequate access and facilities for people with extra needs and is accessible to people with disabilities. 71% of service stakeholders either *agreed* or *strongly agreed* to the statement that Meath Springboard are accessible for those with disabilities, 26% said they were undecided with some responding '*I have not been at the premises*'. One service stakeholder did disagree but did not give any further input on this in the survey. One important finding around access to the centre involved the resources need to provide the Children Contact service. The Children's Contact service requires 'a huge amount of resources' according to one support worker and while it was not stated it prevented family support work being carried out in the centre, it was said that 'space was limited' due to the resources needed for it.

The Meath Springboard Family Support centre is in Navan town. The service covers the entire county. When parents using the Family Support Service were asked if the premises was in a location convenient to them, 83% *strongly agreed* or *agreed* that it was. 12% were *undecided* and 6% *disagreed* with the statement. For foster parents, 27% disagreed with the statement that the premises was convenient to them. One foster parent did note that they were over 150km from Navan and that their foster child had contact with their birth parents through Zoom. 55% of foster parents either *strongly agreed* or *agreed* and 18% were *undecided*.

### The role of the support worker

Through consultation with parents, children and young people, it is very clear that the strength of the relationship with their support worker was a key component in achieving better outcomes for families. The support provided to both parents and children by Support Workers are seen as one of the key reasons they learn to manage better and function better this in turn improves outcomes for their children. By helping the parent, it is believed that this will inevitably help the child.

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*"I find families need a lot of emotional support and parenting support. What we have learned is that if parents are not ok, the children are not going to be doing well. If we can get a parent to a space where they are functioning then it will automatically have a positive effect on the children I have found that if you can support a parent so that they are able to cope or to manage, then the children's lives will be effected positively."* –

Meath Springboard Staff

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Several key skills and attributes of the support workers were noted by stakeholders which likely helped them to build strong trusting relationships. These were;

1. Support workers were non-judgemental. As one parent stated;

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*“They are not there to judge you, they are there to help you to understand you are doing well. If you are not doing well, they would help you to see this too and support you to figure it out”*

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2. Support workers were approachable,
3. Support workers are dedicated and passionate,
4. Support workers were open, honest and transparent,
5. Support workers genuinely cared and were not just doing their job. As one young person stated;

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*“I feel that even as a child you can tell if someone really cares. It is like an ethics and morals thing. You can genuinely feel when someone wants to help you and wants to listen to you rather than have to help you or have to listen. I feel like going into Springboard, it is something that they passionately want to help people rather than they are just doing it for their jobs.”*

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6. Support workers were very caring and kind,
7. Support workers listened to you,
8. Support workers allowed you to work at your own pace,
9. Support workers were patient,
10. Support workers ‘made you feel good about yourself and helped you see what you were doing well rather than focus on what you were doing badly’,
11. Support workers were inclusive,
12. Support workers were very informative,
13. Support workers were more than just a worker but regarded as ‘family’ or ‘friends’.

What is interesting about this final point is that this appeared to be more of view for younger service users than parents. One particular family received a lot of support from Meath Springboard over the years and as the support worker had literally seen the children grow up, this made them feel like the worker was part of their family or at least as close as a family member.

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*“From my experience, Springboard are, not like a counsellor, but more personal than a counsellor. I feel the way they help your family or help your situation, it feels like you are talking to a friend or a family member.”*

*“I would consider \_\_\_\_\_ part of our family.” - Young person*

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The Support Workers ability to use a strengths based approach with parents who were really struggling is very strong and impactful. This positive strategy of support was found to have significant positive effects on parents, especially parents who may have had challenges with other services. One parent who had been referred to Tusla due to welfare and protection concerns stated;

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*“She made me feel very good about myself and not stressed like other services. I was also working with a social worker and I felt that she kept putting me down and this was causing me to have panic attacks. I thought I was doing a terrible job. The worker at Springboard would say ‘no \_\_\_\_\_, you are doing great and help me see this. Before I never had support. I never had anyone telling me I was doing great”*

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According to one service stakeholder who was interviewed, ‘Springboard are very good at building the connections with parents. They have a very skilled and experienced staff which are well able to do this and that is to be commended’. This ability to build bonds with families so they buy into the process has also been noted as significant especially where parents may be reluctant to participate. Support workers have a high level of empathy and are able to build these relationships because of this empathy. Parents noted feeling ‘heard’ and ‘understood’ and they felt part of the process and very much included in it. Support workers were approachable and if a parent did not like an approach to work they could say so and together they would change it.

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*“I was told that if I did not like the approach we were taken to just say it and we could change the approach.”*

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This inclusivity was echoed by other parents who were interviewed and it showed to be important for parents. Support workers worked alongside families and listened to their needs and parents noted that they were patient with them. One other element of the support which benefited families was the support worker leaving the line of communication open even after their case was closed. Having access to the support worker, even if they did not need it again, helped the family feel more secure knowing they had that support there.

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*“When a family has moved on, knowing they can still link back in with the service makes them feel more able to continue on their own.” - Meath Springboard Staff*

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It was also noted by parents and young people that the support worker would still link in with them every now and then to make sure all was still going well. This was important for most families who participated in this evaluation.

One concern raised by a staff member was that the service level agreement that services have with families is 6 months. This was found to be not enough time for some families who had very high needs. Findings from this evaluation suggest that some families need support for longer periods of time. Findings from children and young people suggest this has great benefit to them meeting their outcomes.

### **Multi-disciplinary / inter agent relationships**

35 individuals working in 18 services completed the survey. 19 of these were referral agents and they all said they would refer other clients to Meath Springboard. The input from services in the county is an indicator that Meath Springboard have very strong working relationships with other services and agencies in the county. This has meant that they have been able to provide families with a very robust ‘wrap around’ service. Service



stakeholders have noted that Meath Springboard are a very professional service who have a strong standing in the county. As one service stakeholder stated;

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*‘Springboard achieve great outcomes with families and this is because of their consistent work with families.’*

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Service stakeholders have noted that Meath Springboard are a very committed, proactive, approachable, welcoming and effective service. They are active within the community and very much at the centre of family support in County Meath. As one service stakeholders stated;

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*“I have worked with Springboard for a number of years and have always found them to be an approachable and effective service that I would highly recommend to clients and other services.”*

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Parents benefited from Meath Springboards strong working relationships in many ways. The first was the practical element of it. Some parents needed support with housing, school places, applying for medical cards, social welfare entitlements and with getting children involved in the community or with sports. The connections Meath Springboard have mean that what was a long drawn out task for a parent could be solved in an instant by a quick phone call from a staff member. As one parent stated;

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*“It was often difficult to get through to a service and the support worker would ring on my behalf. This helped me to build my confidence as I was not being faced with a wall every time I tried contacting someone. I had now made contact through Springboard and this helped massively.”*

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Inclusivity was noted by service stakeholders as something Meath Springboard do well. When service stakeholders were asked if the centre was accessible to persons with disabilities, of the 35 participants who answered, 12 *strongly agreed* that they were, 13 *agreed*, 9 were *undecided* with some participants stating they had not been to the centre and 1 *disagreed* with the statement not adding why in the survey. When asked if the thought Meath Springboard provided culturally sensitive services to its clients, 12 out of 34 respondents *strongly agreed*, 17 *agreed* and 5 were *undecided*. A service stakeholder said that;

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*‘All staff are extremely approachable, friendly and welcoming to all families and children of every diversity and culture I have ever refer to them’*

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Through surveying, service stakeholders were asked if they had encountered any barriers to accessing agency services. There were 4 barriers were noted by service stakeholders:

The first was around not being able to get a ‘Children’s Contact Service’ time slot for one of their clients. One other stakeholder said that they had a child who needed counselling but they lived in Laytown/Bettystown

and this was a huge barrier. Difficulty filling out the referral form was stated as difficult by one stakeholder but said the assistance from Meath Springboard helped. One final barrier noted by a stakeholder was that they felt that Meath Springboard could work more collaboratively with other services. They suggested that Meath Springboard could promote other services more. This final barrier may be an isolated case as many other service stakeholders have not stated this as a problem for them but instead the opposite. As one service stakeholder stated;

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*“Meath Springboard FSS has been a key partner in the CYPSC initiative for over 10 years and their commitment, support and work towards improving outcomes for children, young people and their families is greatly valued. They have led various CYPSC initiatives over the years that have had a lasting and meaningful impact for children and young people in the community”*

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A further service stakeholder added;

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*‘I feel if Springboard FSS used the National Practice model Meithal more, it would further enhance the great service it provides.’*

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### The role of home visits

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*Home visits are a valuable part of family support. Calling out to the house gives great insight on what is happening, see the family home, get a sense of where the parent is at, where the house it at. – Family Support Worker*

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Home visits were regarded as a very important part of the support families received according to parents and young people. It was found that if a parent was not able to provide the ‘nurturing’ care that the child needed to feel secure, the support worker could model the behaviour show the parents how to engage, how to bond and how to relate to their children. This was particularly important for young people who were consulted.

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*We had the support worker come to our house weekly. It was just me and my brothers and my Mam. My Mam was going through things. We were all very young at the time and \_\_\_\_\_ would come down and help my family be closer, play games with us, just be someone for us to talk to as our Mam was not really emotionally available at the time. She would come to us and we would tell her about our school days, we would do normal things you do with a family. We just could not have those normal family thing because of what my Mam was going through. Me and my brothers would be looking forward to our visit on Wednesday. On Tuesday nights we would be really excited waiting for Wednesday to come. - -Young person*

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The practicality of being able to visit a parent was found to be important. Some parents have several appointments each week and knowing that the support worker is coming to them can cause them less stress.

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*For some parents it is just not practical to come to us. For others, especially at the beginning, the parent may not have the mental capacity to attend a meeting or an appointment and sometimes they need that extra and for you to come to them.*

*– Meath Springboard Staff*

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Covid restrictions did change how home visits were facilitated and they also stopped support workers bringing parents and families into the centre. Support workers could only stay inside the home for 15 minutes and this was seen as a barrier to support for both parents and support workers.

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*The challenge now is support workers can only be in the house for 15 minutes and then they have to go outside. This needs to be extended for them meeting parents in their homes – Parent*

*Before Covid, we had the flexibility to give families the option of either going out to them or them coming out to us. – Family Support Worker*

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Recognising the potential risk that could arise from lockdowns particularly with regard to isolation, Meath Springboard contacted active and recently closed cases and delivered 'care packs/ activity packs' which included games and art supplies for children. Lockdown in a way gave them the opportunity to reconnect with closed cases and see if people needed support but in a very therapeutic non-invasive way, and in some cases they found that they did and were able to support the family.

Through consultation with a member of the Board of Management, a challenge was noted about how outreach is delivered. This statement was not in regard to the quality or the need for the work but in regard to the resources required to facilitate outreach. The concern related to the amount of time that support workers have to spend on the road driving to parents when Meath is such a big county stating that this time could be spent supporting more families. From an outreach perspective, the Board Member stated that to offset some of this travel and to ensure the whole county is serviced, Meath Springboard could have an office in other urban areas that operated even on a part-time basis. They noted;

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*While Meath Springboard is countywide, resources have not been provided to meet that growth in service delivery. The resources are not what you would consider for a county wide support.*

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## Monitoring, supervision and quality assurance

The Tusla Quality Improvement Framework: A Tusla Approach to improving the Quality and Safety of Services (2016) identified 3 key principles which help to characterise what a high quality service looks like. These principles state that high quality services are child centred, well-led and safe. The factors which can result in these principles being met can be found in Section 4. This evaluation has found that Meath Springboard provide a high quality service that is child-centred, well-led and safe and this is evident throughout the findings shown here in Section 5.

The data gathered in this evaluation shows Meath Springboard provide and deliver a child-centred service with the aim to improve outcomes for children and their families. The rights and views of children and families are respected and taken into consideration when planning, delivering and improving services. Meath Springboard have systems in place to assure and improve the performance and quality of services and this includes the monitoring of outcomes for children and families. Child and parent Satisfaction Surveys which are completed by children and parents at the end of their time at Meath Springboard play a major role in how Meath Springboard improve and develop their services. The work plan which is developed with parents is a key element of this partnership and also a way Meath Springboard can monitor the work they do with families and the outcomes which result from the support. When families are receiving support through the Tailored Programme of Family Support, support workers are in weekly contact with parents and this has been found to be a great tool when *'checking in'* on families and seeing *'if they are managing'*. As seen previously, one support worker said that house visits in particular are a good way to see where the parent is at, where the house is at and where the children are at. This is an invaluable *'monitoring'* tool and one which has shown to enhance the support worker and the family's relationship.

Children, young people and parents have stated how they felt *'heard'* and that they were listened to. It was also noted how their requests and needs were met very quickly and in a timely manner. This can be seen especially through how the support workers worked with families with both children and parents stating that they felt genuinely cared for and that the support worker was there to help. One young person who was supported by Meath Springboard said they always felt informed about what was going on and stated that even though they were young at the time, they were helped to understand the situation better. The practical support given cannot be underestimated, this evaluation has found that parents need this type of support and when given it, it not only helped them to sort out a major stressor for them but it also ensured them and their children's security. For example, one parent spoke about the family home being in *'fore-closure'* with the banks and that Meath Springboard helped the family to engage with MABS so they would not lose the family home. That family are still in their home today. This is over 5 years later.

As a service, Meath Springboard is well-led. There are governance, leadership and management systems in place that support staff to deliver consistent and accountable services for children and families. Meath Springboard has a defined organisational structure, staff roles are clear and known, all staff are accountable for their work, and staff are kept informed about what is going on overall. The staff and the Board of Management have a strong relationship and this ensures effective service and business planning to meet the needs of children and families. The team itself is also a very strong working team. They are provided with supervision every 6 weeks with support available on a continuous basis or as and when required. Staff are encouraged to personally and professionally development. A focus is also put on self-care for staff with several staff attending courses to learn more about how to avoid burn-out. The flexibility for staff to retrain and professionally development can be seen in Section 2 with staff having obtained dozens of training courses through the organisation. As a service, retention levels are very high with staff turn-over very low. Some staff

members have been there since the initiation of the service in 1999. One board member has also been on the board from the beginning.

Tusla's (2016) final characteristic of a quality service is that they are safe. Meath Springboard services are designed and developed to achieve the best and safest outcomes for children and families in a timely and proportionate manner. Services are delivered using agreed practice models that are based on the best available evidence and research as can be seen in Section 2 and later in Section 4. Children are prioritised and responded to without delay to meet their identified needs in a proportionate manner. Prior to any contact being made with a parent, a risk assessment is also carried out to ensure that the child will be safe and that contact is in their best interest. For child protection cases, Meath Springboard have quarterly meetings with Tusla Social Work Department and this is an opportunity to discuss the contact cases (new and current). One service stakeholder said that the team are very approachable and when an issue does occur around contact, the concern is heard and responded to in a professional manner.

One parent did state that they felt their child was not listened to at the beginning as they said they did not want to see their father as they did not feel safe with them. From speaking with children for this evaluation who have had contact with a parent through the Contact Service, a common concern for them at the beginning was being alone with their parent and this was usually because it was in a new place and a new environment. Children using the Access Service noted feelings of nervousness and slight concern when they began visiting their parent at the service but that the team helped them to overcome this. Meath Springboard have a vast amount of experience with children and children have said that while they were afraid initially the team helped them overcome this. The parent who felt that their child was not listened to later stated that their daughter was going now without this worry and that she felt it was the team and the space that made her feel safe.

### 5.3 The impact of the support upon families (children, young people and parents)

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*"The support I received from Springboard literally saved my life." - Parent*

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Meath Springboard support families in three ways; practically, emotionally and socially. The findings of this evaluation show that the support they have offered and delivered to families has had a positive impact on the lives of the families. Through the survey, parents who received family support were asked if they felt that their families situations has improved as a result of being involved with Springboard and 78% *agreed* that it had, 11% *strongly agreed* that it had and 11% were *undecided*. For parents using the children's contact service (4 parents), 50% of parents *strongly agreed* that their family's situation has improved while 25% were *undecided*. 25% *strongly disagreed* with the statement. For foster parents 30% strongly agreed, 20% agreed, 40% were *undecided* and 10% *disagreed* with the statement.

The following statement was provided to Meath Springboard by a parent using the Children's Contact Service;

8<sup>th</sup> May 2021

Why I would recommend Springboard as a mother with children in Tusla care. Springboard has allowed me to have a safe space for me and my children to have access regularly and also while the pandemic has been going on Springboard has facilitated access calls on a weekly basis and has recorded each access to protect me and my children and the fostering family from any miss information which I found very beneficial and safe. Springboard is also a support for me and my children as an independent organization they have followed up on things at my request and they have supported me through meetings child in care review 'etc'. They have also giving me support with councilors and any other organization that might be required at the time also for my children support services they make available if needs be. They also have activities on occasions for family outings, like a day trip to the zoo 'etc'. Overall Springboard has been fantastic and I would be lost without them. They have been there for me and my children in all areas were we have needed their support and I will be forever grateful to them.

Kind regards

The following statement was made by a mother during interview who was supported through the Tailored Programme of Family Support;

*"I was finding it really hard to cope. My son would not take his insulin and was literally waking in the middle of the night to raid the kitchen presses and it was causing constant fighting. He had even robbed money from my purse to get sugary foods. It was a horrendous time. I was called into the hospital in Drogheda nearly every week and sometimes everyday about this and as a single parent this was a massive financial strain. I felt that, actually, they said it to me, they thought I was neglecting my son and not doing enough to make my son take his medication and stay away from bad food. I was finding it very hard to cope. Years ago I had suffered depression and this put me right back to then. I couldn't get out of the bed and I wasn't sending my children to school. How I came into contact with Springboard was I went to my daughters school and a vice principle referred me to them. Within a few weeks I had a case worker. They supported me to manage the situation and cope better. They supported my son to get CBT and my daughter got counselling. This was a few years ago now and everyone is doing very well".*

The following statement was made by a father during interview who was supported through the Tailored Programme of Family Support;

*"It was really good having \_\_\_\_\_ there as the person to talk to because of the experience and having seen this before. My wife was an alcoholic and had not been living with us. At this transitional point, where my wife was coming back home, I could have come out of this and just accepted my wife's challenges without any conditions. \_\_\_\_\_ helped me see the wood from trees as they say and I now feel more confident in the relationship we are going in to. I am a lot more confident in the family unit going forward and I am a lot confident with what my role is in that family unit. I feel that if I had have been tunnelling through this on my own, I am not sure if I would have come out of it with such a good outcome. I think it may not have ended up as being the best out for the family but now I definitely feel the outcome is the best for the family."*

The following statement is from a young person who was supported by Meath Springboard;

*\_\_\_\_\_ (support workers name) would take me out of the house for a break because there was a lot of fighting always between my Mam and my brother. We would go for walks or for food. We would talk*

*and I was able to be open about what was going on for me and my family. Myself and my brother didn't really get on either, we always fought too. At first there was a lot of fighting but \_\_\_\_\_ helped us to talk to each other and the fighting stopped after a while. Myself and my brother get on really well now and we are all doing well.*

### The measurable impact on families being support through a Tailor Programmes of Family Support

In regard to the five national outcomes, parents were supported in a way which would improve these outcomes for their children.

**Active and Healthy:** Parents who received Tailored Programmes of Family Support were asked if they believed Meath Springboard encouraged there family to actively address their physical and mental health, of the 17 (of 18) respondents 13 *agreed* (76%) that they had, 3 *strongly agreed* (18%) and 1 was *undecided* (6%). Parents were given a list of supports and asked to show which ones they received support for. Communication support and coping with stress was the main area of support parents got help with over 60% of all participants receiving support with them. Feeling unhappy (44%), low self-esteem (39%) and feeling isolated (39%) were also areas that many families received support for. The table below shows the full list of support provided by Meath Springboard.

Table 5.12.: Support received by families - Active and Healthy

ANSWER CHOICES	RESPONSES	
Healthy Diet	5.56%	1
Activity	16.67%	3
Bonding with children	27.78%	5
Communications	61.11%	11
Self esteem	38.89%	7
Psychological difficulties	27.78%	5
Self harming	22.22%	4
Coping with stress	61.11%	11
Phobias	5.56%	1
Risk taking behaviour	5.56%	1
Feeling unhappy	44.44%	8
Being independent	33.33%	6
Anger	22.22%	4
Impulsivness	5.56%	1
Feeling isolated	38.89%	7
Self control	11.11%	2
Motivation	27.78%	5
Structure and routine	22.22%	4
Ambition	0.00%	0
Attention and concentration	0.00%	0
Gross and fine motor skills	0.00%	0
Speech and language	5.56%	1
Total Respondents: 18		

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*“Springboard definitely impacted my life positively. I felt before Springboard, school was really hard and expressing my feelings was really hard and I felt like I had to keep everything in to keep my Mam happy. I feel like I had to take on a big responsibility at a very young age and I had no one to talk to. My Mam was upset and going through stuff and I didn’t want to add to it so knowing Springboard was there was a great help as I could talk to them. I felt like after Springboard it took a lot of stress off me and I had more time to do other things, like taking my studies seriously, taking up sports – I just felt like I was a much happier person with the help of Springboard.” - Young person*

*“Meath springboard got me involved in sports camps in the summer and I still do the camps.” - Child*

– Child

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**Achieving:** Parents were asked if Meath Springboard encouraged them and their family to actively participate in education and learning. 7 of 18 (39%) participants *strongly agreed* with the statement and a further 7 (39%) *agreed*. 3 were *undecided*. In regard to outcomes for learning and development parents received support with personal development (50%) and problem solving (39%). Families were also provided with support with the following;

Table 5.13.: Support received by families – Achieving

ANSWER CHOICES	RESPONSES	
▼ Personal development	50.00%	9
▼ Problem Solving	38.89%	7
▼ Organisation	5.56%	1
▼ Special Needs	11.11%	2
▼ Being creative	11.11%	2
▼ Play and interaction	11.11%	2
▼ Participation in education	16.67%	3
▼ Progress and achievement in learning	16.67%	3
▼ Other (please specify)	Responses 16.67%	3
Total Respondents: 18		

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*“Springboard helped my family when they really needed it. This help make my family have a stronger relationship..... They helped tremendously with school and getting me and my sibling’s places in secondary school, they helped us sort out the book rental scheme and even got us involved in sports camps in the summer. They would take us on day trips as a family and this was the only time we went out as a family. \_\_\_\_\_, the support worker also had contact with my guidance counsellor in school and she*



*made sure I was doing OK. Even now, if I need support I know that anytime I need to ring her I can, that trust is there". - Young person*

*"My behaviour is definitely better in school since I done work with Springboard. "*  
- Child

**Safe and secure:** Parents were asked if Springboard has helped them to ensure the safety and wellbeing of their child while at home. 50% *agreed* that they had helped them, 44% *strongly agreed* and 6% were *undecided*. The main areas that parents required support in was around the safety and wellbeing included family relationships (56%), adult relationships (39%) and developing daily routines (39%). 22% of parents received support around domestic violence and 22% received support with housing. To improve outcomes around safety, families were also provided support with the following;

Table 5.14.: Support received by families – Safe and Secure

ANSWER CHOICES	RESPONSES	
▼ Child Adequate Supervision	11.11%	2
▼ Relationships with family	55.56%	10
▼ Adult Relationships	38.89%	7
▼ Children, brothers or sisters in care	11.11%	2
▼ Domestic Violence	22.22%	4
▼ Child Abuse	11.11%	2
▼ Substance Abuse	5.56%	1
▼ Develop daily routines	38.89%	7
▼ Adequate sleeping arrangements	0.00%	0
▼ Homelessness	0.00%	0
▼ Water, heating, sanitation facilities	0.00%	0
▼ Difficulties with neighbourhood	5.56%	1
▼ Paly area/materials	5.56%	1
▼ Housing	22.22%	4
▼ Other (please specify)	Responses 5.56%	1
Total Respondents: 18		

*"I was involved with Tusla. Springboard arranged accesses and have been a big support in my life since." - Parents (Children's Contact Service)*

*"Without Springboard being involved in my journey the last 6 years I don't think I would have gotten as far as I have. They have helped me grow and learn. We as a family are settled in our own home 3 years now, we have a good routine and everyone is a lot happier!" - Parents (Tailored Programme)*

**Connected and Respected:** Families were asked if since attending Springboard, if their involvement with family, extended family and the community had improved. For 89% of parents, it had improved, 72% *agreed* and 17% *strongly agreed*. The remaining were *undecided* (11%). 67% of parents were supported with family relationships, 56% were support through a relationship breakdown, and 56% of parents were given parenting support. Relationship breakdown was one of the key reasons that families were in a position where they need extra support from the FSS. 39% of parents needed help receiving support from services as they had either had previous negative experiences or they had not been engaged with services in the past. The amount of families being supported through a bereavement was 22%. Other areas of support included;

Table 5.15.: Support received by families – Connected and Respected

ANSWER CHOICES ▼	RESPONSES ▼	
▼ Family relationships	66.67%	12
▼ Absent parent	11.11%	2
▼ Relationship breakdown	55.56%	10
▼ Family size	11.11%	2
▼ Criminality	0.00%	0
▼ Parenting	55.56%	10
▼ Antisocial behaviour	0.00%	0
▼ Bereavement	22.22%	4
▼ Friendship	5.56%	1
▼ Peer groups	5.56%	1
▼ Culture	0.00%	0
▼ Place of work	0.00%	0
▼ Accepting support	38.89%	7
▼ Hazards at home	0.00%	0
▼ Other (please specify) Responses	0.00%	0
Total Respondents: 18		

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*“Through Springboard, my Mam has made friends and at one time, we could walk down the street and no one would know her. She didn’t have any friends. Now we walk down the street and Mam might recognise another parent from the Springboard groups. It is nice for me to see. Before, she had no one. It made us as a family more part of the community.” - Young Person*

*We try and get children parents to a place where they are not reliant on any one individual but instead help them to build a circle of support network through groups here or in the community”. – Family Support Worker*

*“Since going to the camps with Meath Springboard and on outings and daytrips, I can make friends much easier with people”. Child*

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**Economic Security and Opportunity:** Over half of the parents who completed this survey, stated that their main household income was a social welfare payment. Parents were asked if since attending Springboard, if they had become more proactive in managing their families' finances. 50% agreed that they have become more proactive with their families' finances, 44% *strongly agreed* and 6% were *undecided*. 44% of parents required support with income/benefits and 33% with budgeting and planning. 17% of parents stated other and answered non-applicable.

Table 5.16.: Support received by families – Economic Security and Opportunity

ANSWER CHOICES	RESPONSES	
Income/benefits	44.44%	8
Employment roles and responsibilities	11.11%	2
Effects of hardship	5.56%	1
Contact financial support services	11.11%	2
Budget planning	33.33%	6
Pocket Money	5.56%	1
Other (please specify)	Responses 16.67%	3
Total Respondents: 18		

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*“They helped my family with all the financial stuff and I think that helped my Mam emotionally. When she knew she had that extra support, we definitely seen a change in her. She was anxious and depressed before Springboard, but then she had more time for us as well and was more involved in our lives. The support kept me and my siblings close. \_\_\_\_\_ made sure we knew we always had each other. Before we were all down and upset and keeping to ourselves, but this definitely brought us closer together and made us more open with each other.” - Young person*

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### The impact on families being supported through the Children's Contact Service

4 parents being supported through the Children Contact Service completed the survey and 2 parents were interviewed. 50% of these parents also received other support through Meath Springboard. This included a tailored programme of support and play therapy. For 25% of families, the relationship between the parent and child did improve. For 25% of parents the relationship between themselves and the other parent improved. 25% also reported an improvement between their child and their other parent. 50% reported being less worried about family law proceedings.

Table 5.16.: Improvements seen by parents – Access Service

	STRONGLY AGREE	AGREE	UNDECIDE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
Q9. The relationship between my child and myself has improved.	25.00% 1	0.00% 0	25.00% 1	25.00% 1	0.00% 0	25.00% 1	4	2.67
Q10. The relationship between my child's other parent and myself has improved.	0.00% 0	25.00% 1	25.00% 1	0.00% 0	50.00% 2	0.00% 0	4	3.75
Q11. The relationship between my child and their other parent has improved.	0.00% 0	25.00% 1	0.00% 0	50.00% 2	0.00% 0	25.00% 1	4	3.33
Q12. The relationship between my child's social worker and myself has improved.	0.00% 0	0.00% 0	25.00% 1	0.00% 0	0.00% 0	75.00% 3	4	3.00
Q13. The relationship between my child's foster carers and myself has improved.	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0.00% 0	100.00% 4	4	0.00
Q14. I am less worried about family law court proceedings since attending the access support service.	0.00% 0	50.00% 2	25.00% 1	0.00% 0	25.00% 1	0.00% 0	4	3.00

### The impact on foster families

For foster parents, improvements were seen in the relationships and in their understanding relating to family law proceedings. 11 foster parents completed the survey, with 1 foster parent agreeing to do an interview. The table below shows a list of questions parents were asked through the survey. Just over 60% of foster parents saw improvements with themselves and their foster child while 1 foster parent *disagreed* with the statement. Over 50% of foster parents saw improvements in the relationship between them and the child's

birth parents. For 60% of foster parents, relationships with the social worker improved while for 18% of foster parents it did not. Over 40% of foster parents saw improvements around there concern for law proceedings while 18% *disagreed* with this statement. The remaining were *undecided*. The table below shows the types of improvements seen and the number of families improvements were seen for.

Table 5.17.: Improvements seen by foster parents – Access Service

	STRONGLY AGREE	AGREE	UNDECIDE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
9. The relationship between my foster child and myself has improved.	45.45% 5	18.18% 2		27.27% 3	9.09% 1		0.00% 0	11
10. The relationship between my foster child's parent/ parents and myself has improved.	27.27% 3	18.18% 2		54.55% 6	0.00% 0		0.00% 0	11
11. The relationship between my foster child and their parent/ parents has improved.	36.36% 4	18.18% 2		36.36% 4	9.09% 1		0.00% 0	11
12. The relationship between my foster child's social worker and myself has improved.	18.18% 2	45.45% 5		18.18% 2	18.18% 2		0.00% 0	11
13. I am less worried about court proceedings since attending the access support service.	18.18% 2	27.27% 3		36.36% 4	9.09% 1		9.09% 1	11

Impact statements for the families who used the service shown throughout the findings section of this report put in to context the level and significance of this support for the children and parents that Meath Springboard supported. These alone show that as a service they have improved outcomes for children and this has been done mainly through supporting the parents to support their children. Voices of children and young people in particular, show this impact best.

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*“My Mam is so much better, going to the gym, for walks, she is active. She once never left her room. I feel if you told me when I was younger that my Mam would be how she is now, I just would not have believed you.”*

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## 5.4 Thematic analysis and analysis of findings

19 themes have been identified that show why Meath Springboard have been so impactful. These themes are factors which have contributed to Meath Springboard providing children and families with services that have impacted their lives positively. The themes have been found through analysing 84 stakeholder accounts. They will be analysed below using the finding of this evaluation and the national and international evidence as cited in this report.

### Forms of support:

**Theme 1: Parents require practical, social and emotional support and services which provide this will have the greatest impact. Meath Springboard offered families support on all three levels.**

- Practical support included applying for medical cards, social welfare benefits, support with housing, school/childcare places, support with sports and other community activities for children. Cutrona (2000) calls this concrete support and refers to a type of support that is a tangible support and can typically be measured in physical acts of helping people with “an offer to do or provide”. The importance of this type of support is echoed by Gilligan (1991), *“Sometimes it is all too easy to lose sight of the fact that often what a family needs is immediate and tangible practical help”*.
- Social support was offered through the weekly parent or family sessions. Social support was also offered through groups and other centre activities like coffee mornings or Christmas outings, parents and families were encouraged to socialise and to integrate themselves into the community. The authors of *‘What Works in Family Support’* (2013) found that a number of side benefits were shown to occur due to centre based services such as increasing friend networks and facilitating social support.
  - Some parents do not have family or social support and this can be very challenging for them. Having a service that recognises the importance of these connections while also providing a social outlet for parents and their children is important. Parents noted that the groups and the outings that Meath Springboard organise have helped them make friends. Children of these parents noted that it made them feel good knowing their parent had somewhere to go to talk and meet people and this effected them positively. They said by their parent being part of the community more, it made them feel more part of the community.
  - Social support cannot be underestimated. Some families who participated had no extended families around them or friends that they can depend on and this was often because they were from other countries. Social isolation was a challenge for them. Through support at

Meath Springboard they were made aware and encouraged to take part in parenting groups, social outings, day trips and other activities such as coffee mornings. This was a great benefits for parents and their children. The authors of *'What Works in Family Support'* (2013) found that if a family were from a particular ethnic background that programmes worked best if they were being delivered by someone from the same background or who spoke the language. For Meath Springboard, this did not seem to be an issue for families who participated but who were from other ethnic backgrounds to that of their support worker.

- Emotional support was offered through the weekly sessions as well as through knowing that the Support Worker was there for them if they were needed. Mumford and Saunders (2003) state that this type of support involves close relationships if it is to be effective. One parent stated that they never had anyone in their life who had said they were doing great until Meath Springboard. One young person stated that their parent once had no social relationships and they were so down that they did not leave their room until Meath Springboard supported them. She continued to state her parent is now very active and very much part of the community. It was also found that just by knowing they had an emotional support there if they needed it, both parents and children felt more confident, secure and able to manage.
  - Some parents and young people stated that the emotional support they received helped them to be a much more open person who could express their feeling and emotions. They believed it was because of the genuine emotional support they have received through Meath Springboard and the level of trust they had built up. The findings from *'What Works in Family Support'* (2013), shows that trust is a key component to the relationship between the service user and the service provider.

### Approaches to support:

#### Theme 2: Meath Springboard use a strengths based approach and they use it very well.

Parents stated that staff helped them to see what they were doing well or right and this helped them to build their confidence greatly. Some parents who may have been referred to the service because of child welfare or protection concerns said that other services had made them feel like they were not *'doing enough'* or that they were *'not managing anything well'*. One parent who was interviewed stated that they thought they were doing a bad job and it was giving them panic attacks because they thought they would lose their children. This parent said that Meath Springboard helped them to see what they were doing good and then helped them to learn new ways of managing. According to Duncan and Millar, (2000), a strengths based approach concerns itself principally with the quality of the relationship that develops between those providing and being supported, as well as the elements that the person seeking support brings to the process. The level of trust between most parents and families who have engaged with Meath Springboard is very high and this has allowed them to build very strong lasting relationships with families. It was found that the use of the strengths based approach increased the level of engagement for families, increased their social and emotional wellbeing, increased motivation, enhanced their feeling of hope for the future and increased feelings of connectivity amongst other benefits. National and international research found similar results (Early and Glenmayer., 2000; Green et al., 2004; Foot and Hopkins, 2010; McLean, 2011; Tusla, 2013).

### **Theme 3: Meath Springboard work in partnership with children and families to explore their needs and then work together to break down barriers that are in the families' way.**

Partnership working is a key theme of the policy, strategy and guidance documents in Prevention Partnership and Family Support throughout Tusla (Tusla, 2015) and it is a key component to facilitating change in a family's life. The partnership approach that Meath Springboard have fostered has impacted families in positive ways. Parents noted feeling included and that they could change the approach of support if they felt it was not working for them. What parents have to say about the services they participate in, will be an important part of the evidence about what is working for children, parents and families (Tusla, 2015). Strategies that do not fully engage with parents and children are less likely to be effective, according to McKeown (2001). Young people, parents and service stakeholders said Meath Springboard were a very approachable service and this made the relationships that were built stronger. Parents did not feel judged in any way and this helped them to trust the support worker, which helps build a working relationship to improve the outcomes for the child/family.

### **Theme 4: Meath Springboard offer a very therapeutic support to parents based on a deep respect and understanding of the struggles faced by families.**

According to Connolly (2004), a constructive relationship involves an attitude of respect and liking for the parent, an understanding of their point of view, and the ability to establish common ground on which to base an intervention plan that accommodates the needs of the parent as well as the child. Parents and children noted feeling a very genuine and real care from Meath Springboard support workers and they noted feeling understood and listened to. Young people, parents and service stakeholders said Meath Springboard were a very approachable service and this made the relationships that were built stronger.

### **Theme 5: The level of need for some parents is very high and requires more long term support.**

Findings suggest that some parents require more intensive support over a longer period of time than others. Having the flexibility to really support this process meant that parents could learn new skills to manage better but at their own pace and as they were able to. For some parents they did not have the mental capacity to fully engage at first and they had to be supported at the parent's pace. Programmes of support had to be tailored and have capacity to engage families for significant duration or they will not be effective. According to Tusla (2013), for families who are at higher levels of risk and have more complex problems, generic parenting programmes appear to have little effect.

### **Theme 6: Meath Springboard provide children and parents with a very person centred holistic support that is tailored to their needs.**

Tailored Programmes of Family Support are designed to meet the needs of families and have shown great success because of this they are advised by the Child and Family Agency. As noted by Tusla (2013), the most effective approach to family support is strengths based and tailor made. The Daughters of Charity research (2019) support this by stating that where mental health struggles occur or social/ economic problems persist, tailored programming is most beneficial.

### **Theme 7: Meath Springboard have an ability to get hard to reach parents to trust services again and this seems to be a result of how approachable, transparent and 'upfront' staff are.**

For some parents, previous negative experiences with services were a barrier to them receiving support but when they worked with Meath Springboard this changed. Several parents stated that they could open up to the team and this was not something they could do previously. Parents noted the openness and honesty of



support worker as being a key factor to them being able to talk to them. As one parent said *“you always knew where you stood”*. This was echoed by service stakeholders.

**Theme 8: Work carried out by Meath Springboard is guided by relevant theories and intertwined in how support workers work as well as being tools to explain positive parenting to parents.**

Tusla (2013) supports the idea the family support should be based on Attachment, Ecological, Social Learning, Cognitive Constructivism, and Discovery theories. The Centre of Excellence Services (2015) concur. This evaluation has shown that not only is work at Meath Springboard guided by these theories, the Support Worker uses these theories in a very practical way in their work. Support workers encouraged parents to model their behaviours and to observe what they were doing. They were then encouraged to interpret it in their own way and apply it. Support workers mirrored positive parenting behaviours like asking children about school and making enquiries about sports clubs or school activities for them. Children felt they had a bond with ‘that one good adult’ when their parent may not have had the capacity at that time, and this was crucial for them feeling stability. Parents would see this behaviour benefitting the child and observe the support worker doing it and then later imitate her.

**Theme 9: Meath Springboard is a community service that fosters community development principle’s and provides families with a support that has helped families and children integrate more in their community.**

Community development is a holistic approach grounded in principles of empowerment, human rights, inclusion, social justice, self-determination and collective action (Kenny, 2007). Community based services have been shown to achieve long-term outcomes such as stronger and more cohesive communities, evidenced by changes in social capital, civic engagement, social cohesion and improved health (Campbell, Pyett, & McCarthy, 2007; Ife, 2016; Kenny, 2007; Wallerstein, 2006) and it is for this reason that early intervention is so important. Families who have been supported by Meath Springboard have said that because of the activities, events, day trips and weekly parenting groups that Meath Springboard provide and facilitate, they have become more integrated in the communities and as a result they made social connections which have been lasting. Children have said that supports such as the family day trips and sports camps that they were involved with Meath Springboard has helped them to make friends easier. Young people have said that the effect these supports have had on their parent has made them feel more part of the community. One young person said that they had never seen their parent greet people on the street and now they are greeted very often. One parent noted being able to change their whole friend group through Meath Springboard groups and activities. This parent said that before they were acquainted with people who had a negative impact on them. For another parent being able to drop into the centre for a cup of tea showed to have a positive impact on her life because she felt she had somewhere to go.

**Theme 10: Meath Springboard are a very inclusive organisation that have the capacity and ability to work with all families.**

With the changing fabric of our societies, services need to be able to work with all families regardless of their background, their ethnic origin, their religion or their physical and mental ability. According to Coram (2010), when reviewing what best practice looks like, Children Contact Services should be a culturally sensitive environment that would reflect and value the rich ethnic and cultural diversity of service users (Coram, 2010). Meath Springboard offer families that service in which they feel included in the work that they do but also as a person. Of the 35 respondents from service stakeholders, 85% of participant who answered the question *agreed* that Meath Springboard offered a culturally sensitive service to clients, with 15% of respondents stating they were *‘undecided’*. One service stakeholder noted that *‘all staff are extremely approachable, friendly and welcoming to all families and children of every diversity and culture I have referred to the service’*. Tusla (2013) found that services that work with families from different ethnicities appear to work best when

the support worker can relate to the family through ethnicity or language. However, Meath Springboard have demonstrated the ability to work with all families regardless of their background.

**Theme 11: Families who engaged with Meath Springboard services do need access to specialist in-house services such as counselling and parenting support groups.**

Barnardo's (2013) found that the effective provision of child contact services needed to include '*access to a range of supports for parents not living with their children and for their children including counselling, parent mentoring and child therapy*'. Meath Springboard provide counselling and parenting groups for all families if they need it and they can accommodate it at that time. They also provide play therapy for children which has shown benefits for the children and the parents who were provided it and who participated in this evaluation. 25% of families who used the Children Contact service were supported through Tailored Programme of Family Support, while 25% were supported with play therapy for their child. 44% of parents who completed the parents receiving family support survey the counselling service (11%) or attended parenting groups (33%). A further 39% of those who completed the service were supported through a tailored programme. The remaining said they were supported through one to one support sessions or play therapy. One other benefit of providing specialist in-house support is that it is a way for staff to check in with parents and families to make sure they are still managing. By parents and families coming into the centre for groups or meeting up for outings, staff can get a good sense of where they are at and whether or not they need additional support.

**Theme 12: Meath Springboard are an approachable service that understand and listen to families.**

The importance of a service being approachable and understanding of a families circumstances and needs in regard to how family support services work with families is shown in the research (Connolly, 2004; Coram, 2010; Tusla, 2013; UCC, 2014; CES, 2016). Meath Springboard provide a service which is approachable and where both families and service stakeholders feel heard and responded to effectively. Their vast amount of experience and expertise as well as their high levels of empathy as a team along with what has been found to be a genuine respect and care for people, has shown to be what makes them a service that is approachable. Meath Springboard as a team appear to have a high level of empathy and this has ensured that each family is 'heard and understood' and supported from a perspective of 'where the parent is at'. This is both reflective of the staff who work there and their years of collective experience supporting families.

**Strong working relationships**

**Theme 13: Meath Springboard have very strong working relationships with many different services in Meath and because of these relationships they are able to provide families with the connection to specialist services.**

Meath Springboard have been working in the community for 22 years. They have a very low staff turn-over and this means that connections to other services are longstanding and direct. Having access to such a network of professionals and services ensures that Meath Springboard can connect families with other services very quickly. Meath Springboard also have a very experienced team who know how to manage and maintain these relationships. Support for a partnership approach where agencies work together to support a family is seen throughout the research (McKeown, 2001; Pinterton, 2004; Tusla, 2013; Barnardo's, 2013; CES, 2016). Meath Springboard's connections which are based on very strong robust relationships with other services means they can provide a programme of supports that 'wraps around' a family and meets the needs they may present with. Where this was found to be of great benefit for families in particular was through the practical support that Meath Springboard offered them. Meath Springboard have very strong connections and they were able to support families with welfare enquires, medical enquires, school place enquires and so on in a very smooth and fluid way. By opening up these connections, the parent was then able to contact the service directly themselves.

## The role of the support worker:

**Theme 14: The attributes, skills and experience of support workers at Meath Springboard were a key factor in the positive impact they have on the children and families they support.**

Several skills and attributes were noted by all stakeholders in regards to support workers and many of these are echoed in the research. These includes support-workers being non-judgemental, approachable, dedicated, passionate about their work, open, honest, transparent, genuine, caring, kind, good listeners, patient, focused on strengths, inclusive and informative (Pinkerton, 2004; Connolly, 2004; Coram, 2010; Barnardo's, 2013; Tusla, 2013 and 2015; UCC, 2014).

**Theme 15: Meath Springboard offer families support on a very personal level and it was noted by parents and young people that they regarded their support worker as more than just a person supporting them but as a 'friend' or a 'family member'.**

Where such support is non-existent, weak, or incapable of providing the help required, a person is more likely to turn to formal support sources (Dolan et al., 2006). For several families who were consulted through this evaluation, families did not have other family close by or friends that could support them. Some families were from other countries and have no family in the country. Others may have lost contact with friends or family due to previous challenges. Not having these 'bread and butter' support as stated by Whittaker and Garbarino (1983) when they most need it can have a negative effect on families in need. For some families working with Meath Springboard, they had no emotional or social support around them and for the time the families were with them, Meath Springboard were able to provide this support when ensuring that families build up these supports around themselves too. For children and young people the impact of this was profound. Having a support worker that could provide the children with the support a parent would ordinarily give if they well was a huge benefit to children and young people being supported by the service. Whether this was simply asking the children how school went or organising a day trip for them as a family, this type of support allowed families to rebuild bonds with each other and helped the children feel a sense of stability even if their life was unstable in other aspects. The level of this support that families received made younger people feel that they had 'a family or friend' support close by. This feeling was lasting with one young person saying that '*because of the support Springboard offered us, I could never forget them and not have them in my mind*'. Young people who were consulted stated that the support always felt very natural and real and that the care they received felt genuine rather than just someone doing a job. This had a very positive impact on them both when they received the support and afterwards as a sincere bond was created.

## Child and family friendly environment

**Theme 16: Meath Springboard provided families with a 'homely', 'welcoming' and 'child friendly' facility.**

Coram (2010) found that child contact spaces that were '*self-evidently child friendly and a stimulating environment*' would have most impact. In the UCC (2014) study, parent's experiences were positive overall because of several factors. These included the space being '*welcoming and homely*'. It also included the fact that the service had facilities to make tea or coffee, a secure play area and appropriate toys to engage with children. Children, young people and parents who were consulted in this evaluation stated that the Meath Springboard centre was very '*welcoming*', '*homely*' and '*child friendly*'. Children and young people noted the colours and the brightness of the space and parents noted facilities such as the kitchen and the garden spaces. For parents being supported by the Child Contact Service, having access to a kitchen area was important because they could make tea or coffee or drinks for the kids. One parent said that they could bring dinner for the children and heat it up onsite so the family could have a meal together.

## Staff retention

**Theme 17: Retaining staff is an important part of providing an impactful FSS. It positively effects how the service works with other services because the connections are built over a long period of time and are therefore very strong working relationships.**

For parents and young people, knowing they can go back to the service a year or so after they received support and the support worker they worked with was still there had a major impact on families because they felt a security knowing that if they did need that support again they could always link back in with their support worker.

- For families receiving family support, it is important that parents and families have a connection to other staff and also the centre itself in some way. For the parents and young people who were consulted, they also knew other staff at the centre so even if their original support worker was not available they also felt very safe talking to other staff members.

From a managerial and human resource perspective, having the ability to retain staff is very important and Meath Springboard have done this with several staff working in the service for many years, some even from the very beginning. The relationships that can be built up over this amount of time are a significant resource in regard to how Springboard deliver FSS.

## Keeping the line of communication open

**Theme 18: It was important for families to be able to link back in with the service if they needed to.**

Knowing that the line of communication could be re-opened at any time helped families feel supported even if routine support was not occurring anymore. It was noted by parents and children that this also made them feel part of the community because they knew they could call the support worker or drop into the centre if they needed to or if they just wanted to catch up or have a causal chat.

## Monitoring, Supervision and quality assurance

**Theme 19: Meath Springboard provide a high quality service by ensuring it is child-centred, well-led and safe.**

When reviewing the characteristics that Tusla (2016) show to be the key factors of a high quality service, Meath Springboard have found to meet them all. It is for this reason that it is fair to say that Meath Springboard provide a high quality service to the children and families they work with. It is child centred and uses a partnership approach where transparency, consistency and respect are at the core of this work. The service is well-led. Management trust the expertise of the team and how each staff member works. Staff are supported and listened to and the respect the team have for the families they work with is the same respect they appear to have for one another too. This is likely key to the service being seamless and consistent. It is also likely to make the service more approachable for families as they can see and feel the 'care' and 'respect' staff have for one another. This trust may also have an effect on staff retention rates. Meath Springboard provide a service which is safe for all who engage with it and attend the centre. The expertise of the staff, the protocols in place including risk assessments and the 'homely, friendly' space all contribute to this. The service and the support received has been noted by children and young people as something that makes them feel safe *'just knowing it was there'*. This security may be a reflection of the 'strong', 'family-like' team Meath Springboard seem to be.

## Conclusions

Family support is complex because the struggles that families face are complex. It is for this reason when working with family's flexibility to meet the individual needs of each and every one is a must. Meath Springboard as a Family Support Service overall provide and deliver a service which truly meets the needs of the families they work with. As this evaluation has shown, the lasting impact that this support has had on the participants who took part has not only improved the outcomes for the children, the young people and the parents they have worked with but for the community as a whole. At one point some of these families who have so much to offer were not connected to the community they lived in in any way, and now they are active members.

The importance of monitoring and evaluation of the services provided to families ensures that services remain child-led, well-managed and safe. Meath Springboard have provided families with a service that is all three of and as an organisation they recognise why monitoring and evaluating the services they provide and deliver is important. They also understand that in-house monitoring and evaluating can be biased and that in some instances stakeholders may not be as open or as honest with them as they would be with an independent evaluator. This independent evaluation is evidence of this recognition. Meath Springboard believe they provide a services which has a positive impact on the families they work with and that this work improves outcomes for children. This independent objective evaluation sought to ascertain these facts and that is what it has shown. Meath Springboard do provide a service that impacts children and families positively and this support has shown to improve outcomes significantly.

Overall 84 stakeholder accounts were gathered. 68 through online surveys and 16 through interview. Children, young people, parents, foster parents, service stakeholders and Meath Springboard Staff all took part. The needs of parents in many cases was very high and required intensive supports including support with a variety of other services. In all, 33 parents (including foster parents) gave an account either through a survey or an interview and 32 of them said that they would recommend the Meath Springboard. Of the 19 service staff who referred to Meath Springboard prior to the evaluation, 100% of them stated that they would refer other clients. This is a showing sign that Meath Springboard meet the expectations of all stakeholders and they deliver the service that they said they would. The child, young person and parent impact statements are probably the richest form of evidence that Meath Springboard have a positive impact on the children and families the work with and this support does help them to improve outcomes greatly.

The themes which have evolved out of the rich resource is the voice of children, young people, parents and other services are all supported by the national and international literature. What is most unique about the service is the staff and as a service it has managed to retain many of them all these years. This level of expertise and the connections gathered through time are two of the major assets of this team and key factors in them providing the service they do. Other unique elements of this team is their high level of empathy and understanding of the struggles that families face. They have been doing this a long time and this is shown in how they interact and respond to families and the other services they work with. The findings have shown that families need this genuine care that feels real and not just someone doing their job. In some instances families do not have support or encouragement. For some parents by the time they had engaged with Meath Springboard they were in very low places and in some instances this was associated with how other services negatively affected them. Meath Springboard were able to help these parent to rebuild their confidence and self-esteem and this was a life line for some parents as they really did not know where else to turn. Having this support came at just the right time for some of these parents, with one parent stating that Meath Springboard were a 'life saver'.

50% of parents who were supported through the tailored programme were lone parents and 17% were separated while 75% of parents support through the Child Contact Service were lone parents/separated. The literature shows the difficulty of this and so formal supports like Meath Springboard are crucial to the outcomes for some families. However, while Meath Springboard provided this formal support, it is likely that they would not have achieved what they did if the support was not delivered in an informal, holistic, gentle and professional way. The trust built up between the support workers and the families was definitely the key to the profound impact they have had on the families they work with. This evaluation has also shown that given the right support families will flourish. It has shown that families want support with 50% of parents being supported through a tailored programme referring themselves. These parents, when given the encouragement and helped to see their strengths, would do anything to acquire whatever the skills they needed to, to ensure the best possible outcomes for their children.

The themes which have evolved show 19 ways to approach family support and to best reach parents and particularly those harder to reach parents. Meath Springboard have been noted as being very good at engaging those who are disengaged or who may have had issues with other services which resulted in them disengaging. The findings from this evaluation showed that many families had some very high needs and they required additional support. The level of connection that Meath Springboard have with services throughout the county means that they have been able to provide a 'wrap-around' service for families that provided them with the support they need a very timely and efficient manner. National guidance advises the use of a Meithal where families have extra needs and it can be a very beneficial process for some families. Meath Springboard have the capacity to meet the needs of families because of their expertise as a team and because of the long standing trusted connections they have with other services and agencies. This ability to provide a 'wraparound' service to families has meant that families are supported in a timely manner and that sometimes the use of Meithal could actually slow down the process for families.

The findings of this evaluation are comprehensive and the reason for this is because Meath Springboard have had such an impact. The learnings from the consultations all deserve to be noted. From a national perspective, the themes have shown us as a country ways to engage those hardest to reach families and what attributes a support worker needs to have to build the strong trusting relationships that the literature points to often. Specifically around contact centres, where there is not a large body of national research, this evaluation can be used as a tool or a guide or inform practice. For families who participated, the impact has been lasting and they have continued to improve their outcomes. These learnings could be adopted by other services working with families across Ireland.

Research shows that as a country our rate of providing Family Resource Centres may not keep up with the growing need of families in particular in the years after the pandemic. One final finding from the content of the literature review is that there is not enough Children Contact Centres to meet the demand nationally. The rise in separation in Ireland has increased significantly and while the rate of children in care is not significantly increasing, more contact centres will need to be provided if we are to continue to meet outcomes for children in the way that we need to. Both are very much dependent upon the budget allocation over the coming years but as a nation, they are services we should lobby to increase for the children, young people, families and communities of Ireland in the near and distant future. The impact they can have could be generational.

## Recommendations

The pointers and recommendations offered here have been informed by the voice of children, young people, parents, service stakeholders, Family Support Workers and Board Members. Ordinarily, and often quite naturally, if participants have not noted a gap in services or they have not noted something which could be enhanced, the data can show areas that need addressing. It is rare that this does not occur. This evaluation is unique for that reason. The evaluation has not exposed any gaps in services nor has it shown any items of deep concern that need to be addressed. The themes which have been drawn out of the findings show why Meath Springboard have achieved the results they have thus far and while some minor concerns were found, it appeared that they were isolated. They are noted below with other recommendations which have been shared by evaluation participants.

### Hearing the voice of parents:

1. Overall, children, young people, parents and foster parents felt listened to by staff at Meath Springboard. One parent did express a concern around them feeling that their child was not listened to. They said when they were told by the child that they did not want unsupervised access with their other parent at that point they felt that their child was not heard. This parent felt their child was put under pressure and that this had an effect on their child at home and in school. This same parent noted concerns around not receiving updates after every session. The findings of this evaluation have found that children and young people worry when they are going to the Contact Centre at first and it could be beneficial to use the findings of this research to inform both children and parents about this very normal worry or 'nervousness' to ease whatever may be troubling them. All children consulted noted this and it is something which some kind of protocol could be designed around that would address these concerns. One other way to offset the concerns of children and young people would be to have a group for children and young people who are using the Children Access Service. Hearing from other children may benefit them.
2. Supervised access is not an easy time for anyone but supervisors are aware of this and they are also aware that families need space to form their own bonds without constant observation from the supervisor. One service stakeholder noted that a parent they worked with had a concern around how the Children's Access Service supervisor used their time during their sessions. The parent said that the supervisor was on their laptop and the service stakeholder worried that the supervisor may not have been able to hear and see what was occurring. While it is likely that the supervisor was giving the family the space to build bonds, the reasons for the supervisor doing this perhaps need to be explained to parents further on the onset.
3. One parent who was supported by the service said that while being able to get the expertise from the support worker, they would have liked to have heard from others going through what they were going through. This parent had a partner who was an alcoholic and they received support from Springboard to manage how they dealt with this to ensure the best outcomes for their family. The parent suggested that Meath Springboard facilitate a group for partners of alcoholics where there expertise can be shared but where partners can hear and learn from one another too.

### Hearing from the children and young people:

4. Children and young people who had visited the service thought it was homely and child-friendly. One young person said that the Access space needed a new football and noted that while he is ok using the space with the swings it is harder to play football with his Dad in that garden space. This same child said that the ball goes into the other garden and out into the field behind the building sometimes.



One other child also stressed this concern and said that a net around the fence in the garden with the goal-post would stop this.

### Hearing from the stakeholders:

5. Meath Springboard offer families a very high quality services that improve outcomes and this evaluation validates that tenfold. One service stakeholder did note however that Meath Springboard could use Meithal more as an approach. Meath Springboard already offer families a 'wraparound' service and this is likely due to two things, their experience and their expertise. As a team they have built up very strong relationships and this adds greatly to the service they can provide. As a service, they also monitor outcomes through the work-plan and other methods as seen in Section 5. Meithal, while a significant process, Meath Springboard provide parents with a meaningful service that improves outcomes for the long term. However, if a family's case would benefit from the process, it is worth considering using it.

### Hearing from Family Support Workers and Board of Management Members

6. The Children's Contact service requires 'a huge amount of resources' according to one Family Support Worker and while it was not been stated to prevent family support work being carried out in the building, it was said that 'space was limited' due to the resources needed for it. This statement was echoed by a Board Member stating that;

*'We could do more if we had more space. We need bigger premises and it is not because we have outgrown the premises. We all feel we can facilitate more.'*

7. Through consultation with a member of the Board of Management, a concern was raised about how outreach is delivered, not in regard to the quality or the need for the work but in regard to the resources required to facilitate it. The concern related to the amount of time that support workers have to spend on the road driving to parents when Meath is such a big county stating that this time could be spent supporting more families. From an outreach perspective, the Board Member stated that to offset some of this travel and to ensure the whole county is serviced, Meath Springboard could have an office in other urban areas that operated even on a part-time basis. This would have to be represented in the funding however as it would require a large investment in a dedicated space. To minimise the cost of the premises for this, and to see if it could benefit the county and increase the amount of families Meath Springboard can support, Meath Springboard could come to an agreement with the local development partnership or the County Council to use a space in their buildings for a pilot 'outreach' space. Where this space would be would have to be discussed by the Board but this recommendation could enhance the service Meath Springboard can provide even further and support families' right throughout the county.
8. The expectation of Tusla is that Tailored Programmes of Family Support are time limited to a maximum of 6 months. This was found to be not enough time for some families who had higher needs. Findings from this evaluation suggest that some families need support for longer periods of time. Findings from children and young people suggest that longer term support really benefits them not only at home but in school and in the community. While Meath Springboard can offer families other supports after this 6 month period such as parenting groups, and other events, summer camps for children and young people and the option to call them if they are in need, some families need the first 6 months just to build a rapport with the support worker so that real change can occur. Having the flexibility to do this is key. This evaluation found that children, young people and parents have a very positive view of Meath Springboard and knowing that they can link back in at any time is something which helps them to feel secure. While Meath Springboard adhere to the service level agreement, perhaps there is a



learning in this that could be considered on a national level, by Tusla. Some families require greater support, some children do and FSS need to be able to offer this support to families if they are to ensure lasting positive impacts and outcomes for that family. In a way, having a time limit on how long a support is offered for is a barrier for some families, especially those who may have had previous negative experiences with other services.

## Acronyms

ACE - Adverse Childhood Experiences

CBT – Cognitive Behaviour Therapy

CES – Centre for Effective Services

CFSN - The Child and Family Support Network

CSO – Central Statistics Office

CYPSC – Children and Young People Service Committee

DCEDIY – Department of Children, Equality, Disability, Integration and Youth

DCYA – Department of Children and Youth Affairs

DoC – Daughters of Charity

FSS – Family Support Service

FSW – Family Support Worker

GDPR – General Data Protection Regulations

HIQA - Health Information and Quality Authority

HSE – Health Service Executive

*MH – Mental Health*

NACCC – National Association for Child Contact Centres

NVR – Non-Violent Resistance

PMVT – Peter McVerry Trust

PPFS - The Prevention, Partnership and Family Support

RAP – Response Ability Platforms

SLT – Social Learning Theory

UCC – University College Cork

WTE – Whole Time Equivalent

ZPD - Zone of Proximal Development (ZPD)

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