

Children's Participation

The Perspectives of Practitioners and Service Users on Children and Young People's Participation in Decision-Making within Tusla, prior to the implementation of the Programme for Prevention, Partnership and Family Support: A Baseline Assessment

KEY FINDINGS



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Introduction

The aim of this study was to conduct a baseline assessment on the extent to which the participation of children and young people was embedded in Tusla's culture and operations, prior to the implementation of the Prevention, Partnership and Family Support (PPFS) programme of action to mainstream children's participation. All data for this study was collected prior to January 31st 2016. Aligned to Article 12 of the UN Convention on the Rights of the Child and the *National Strategy on Children and Young People's Participation in Decision-Making 2015-2020*, Tusla's understanding of participation is underpinned by the Lundy model.

The Lundy model identifies four elements which are essential to the realisation of a child's right to participate. First, 'space': children and young people must be provided with the opportunity to express a view in a space that is safe and inclusive. Second, 'voice': children and young people must be facilitated to express their view. Third, 'audience': the view must be listened to. Fourth, 'influence': the view must be acted upon as appropriate, and the reasons for the decision taken must be communicated to the child or young person.

Methodology

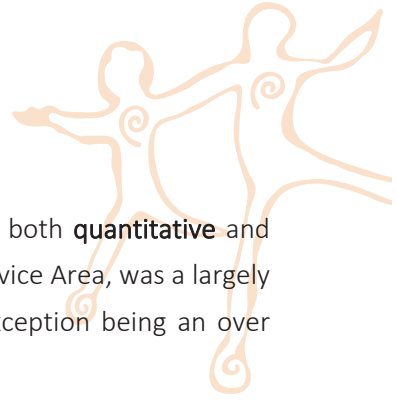
The **objectives** of the baseline assessment were threefold:

1. To establish what structures and procedures were in place to support children and young people's participation in Tusla prior to the implementation of PPFS programme;
2. To assess the extent of children and young people's participation in personal decisions regarding their welfare, protection and care.
3. To assess the extent of children and young people's participation in Tusla service planning and review.

This was achieved using the following qualitative and quantitative methods:

- a) A review of national legislation and policy as well as Tusla's standard operating procedures.
- b) Secondary analysis of the Health and Information Quality Authority (HIQA) findings on Tusla's compliance with national participation standards.

In total, 53 HIQA inspection reports were sampled for secondary analysis of their qualitative findings from a wide range of Tusla integrated and local service areas. They included all inspections of child protection and welfare services (n=13), foster care services (n=11), children's residential centres (n=25) and a sample of inspection reports from children's special care units (n=4) conducted during the period 2013-2015. The HIQA findings were informed by the views of 371 children, as well as the views of parents/carers, Tusla professionals, external professionals, observation and a review of case files and relevant documentation.



c) Distribution of a questionnaire to all Tusla staff using an online survey tool.

A total of 370 Tusla staff (10.4% of all staff) responded to the questionnaire, which included both **quantitative** and **qualitative** questions. The sample, which included representation from each Tusla Integrated Service Area, was a largely proportionate representation of Tusla staff when broken down into job category, the one exception being an over representation of management at grade VIII+.

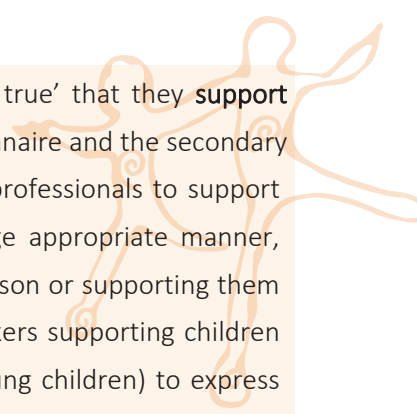
Key Findings

Structural and Procedural Context for Children's Participation

- The study found that, prior to the implementation of PPFs, protection at a legal and policy level for children and young people's right to participate in decision-making was firmly rooted in the Irish Constitution, national legislation (including Tusla's founding legislation) and in national policy documents and standards.
- Tusla's standard operating procedures and accompanying forms and guidance routinely make provision for actively seeking the views of the child. However, less emphasis was found in the standard operating procedures and accompanying forms on providing children and young people with appropriate information, on ensuring children and young people's views are taken into account and on providing feedback to children and young people explaining the reasons for the decisions taken.

Children and Young People's Participation in Decisions on their Personal Welfare, Protection and Care

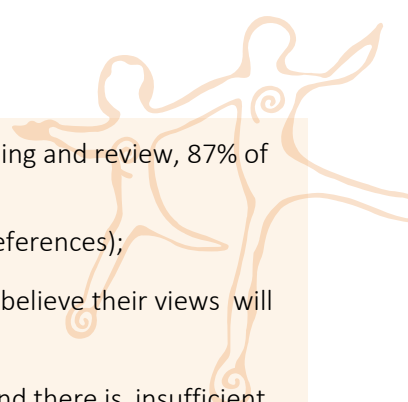
- Of the 224 questionnaire respondents who work directly with children and young people, 83% (n=186) were of the view that they support children and young people to participate in decisions on their personal welfare, protection or care in compliance with all elements of the Lundy model.
- A total of 97% of the questionnaire respondents stated that it is 'definitely true/mostly true' that they seek the views of children and young people. With few exceptions to the norm, the qualitative data, drawn from the open-ended questions in the questionnaire and the secondary analysis of the HIQA reports, found that actively seeking the views of children and young people is firmly embedded within practice.
- A total of 91% of the questionnaire respondents stated that it is 'definitely true/mostly true' that they provide children and young people with the appropriate **information** needed to form a view on decisions being taken. A distinct difference emerged in the secondary analysis of the HIQA reports between on the one hand children and young people in residential care and on the other children and young people in foster care and in receipt of child welfare and protection services. Regarding the former, it is common practice for children and young people to receive a child-friendly information booklet or leaflet at their point of admission into residential care. Regarding the latter, it was found that children and young people in foster care and in receipt of child protection and welfare services are not systematically receiving the required information to support their participation.



- A total of 98% of the questionnaire respondents stated that it is 'definitely true/mostly true' that they **support children and young people to express their views**. The open-ended questions in the questionnaire and the secondary analysis of the HIQA reports revealed that some common approaches adopted by Tusla professionals to support children and young people are: creating a safe space; engaging with the child in an age appropriate manner, including through the use of child-friendly forms; and advocating for the child or young person or supporting them to access independent advocacy services. While there is evidence of individual social workers supporting children and young people with disabilities and with communication difficulties (including very young children) to express their views, the qualitative data revealed that services were overall weak in this regard.
- A total of 98% of the questionnaire respondents stated that it is 'definitely true/mostly true' that they listen to and **take children's views seriously**. However, one fifth of the questionnaire respondents who provided an example of actively seeking the views of children and young people stated that they were 'unsure' if these views influenced the decisions taken. While an eagerness to take children and young people's views seriously is evident in the open-ended questions in the questionnaire and the secondary analysis of the HIQA reports, this data also revealed practice is very mixed and can be dependent on a number of factors, including the level of risk involved, the best interests of the child, the age and capacity of the child and the available resources.
- A total of 91% of the questionnaire respondents stated that it is 'definitely true/mostly true' that they provide children and young people with **feedback**, explaining the reasons for decisions taken. However, there are limited accounts in the open-ended questions in the questionnaire and the secondary analysis of the HIQA reports of children and young people being provided with feedback.
- A total of 75% of questionnaire respondents that work directly with children and young people suggested that they face **challenges** when involving a child or young person in decisions concerning their personal welfare, protection or care. The top three difficulties these respondents face are:
 1. Children and young people don't always want to participate in decision-making (35% of first preferences);
 2. Children and young people have difficulty communicating their views (19% of second preferences);
 3. Parents do not agree to a child or young person's participation in the decisions being taken (14% of third preferences).

Children and Young People's Participation in Service Planning and Review

- When asked if Tusla, as an agency, provides children and young people with the opportunity to participate in service planning and review in compliance with the Lundy model of participation, 22% (n=58) of 267 questionnaire respondents stated that it is 'definitely true/mostly true'.
- The qualitative data, generated from the open-ended questions in the questionnaire and the secondary analysis of the HIQA reports as set out above, found that, while there were some initiatives to facilitate children and young people to participate in service planning and review at the time of data collection, overall there were very limited examples in practice and the structures that were in existence are primarily focused on children and young people in care. There were also limited examples of children and young people's participation resulting in tangible change.



When asked if Tusla faces **challenges** when involving children and young people in service planning and review, 87% of respondents to this question said yes. The top three challenges reported were:

- 1) Adults (practitioners, managers, parents and carers) believe they know best (26% of first preferences);
- 2) Children and young people have been asked their views before and, from experience, don't believe their views will be taken seriously (20% of second preferences);
- 3) The lack of openings to channel children and young people's views to senior management and there is insufficient time to engage in dialogue with children and young people (both 15% of third preferences).

Conclusions

The findings of this baseline assessment reveal that prior to the introduction of the PPFs programme of work, there was widespread good practice in facilitating children and young people's participation in decisions concerning their personal welfare, protection and care. However, practice across all elements of the Lundy model were not fully mainstreamed or embedded in Tusla's culture and operations. There is scope for improvement in terms of, providing a safe and inclusive space for all children and young people to express their views, mainstreaming the provision of information that children and young people need to form a view, ensuring that all children and young people's views are taken into account and that they are provided with feedback explaining the reasons for the decision taken.

This baseline assessment also found that there were pockets of good practice in enabling children and young people's participation in service planning and review. In this regard, there is much scope for improvement in terms of embedding participation in service planning and review within Tusla's culture and operations.

This baseline assessment is derived from the Children's Participation work package as part of the Development and Mainstreaming programme for Prevention, Partnership & Family Support.

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