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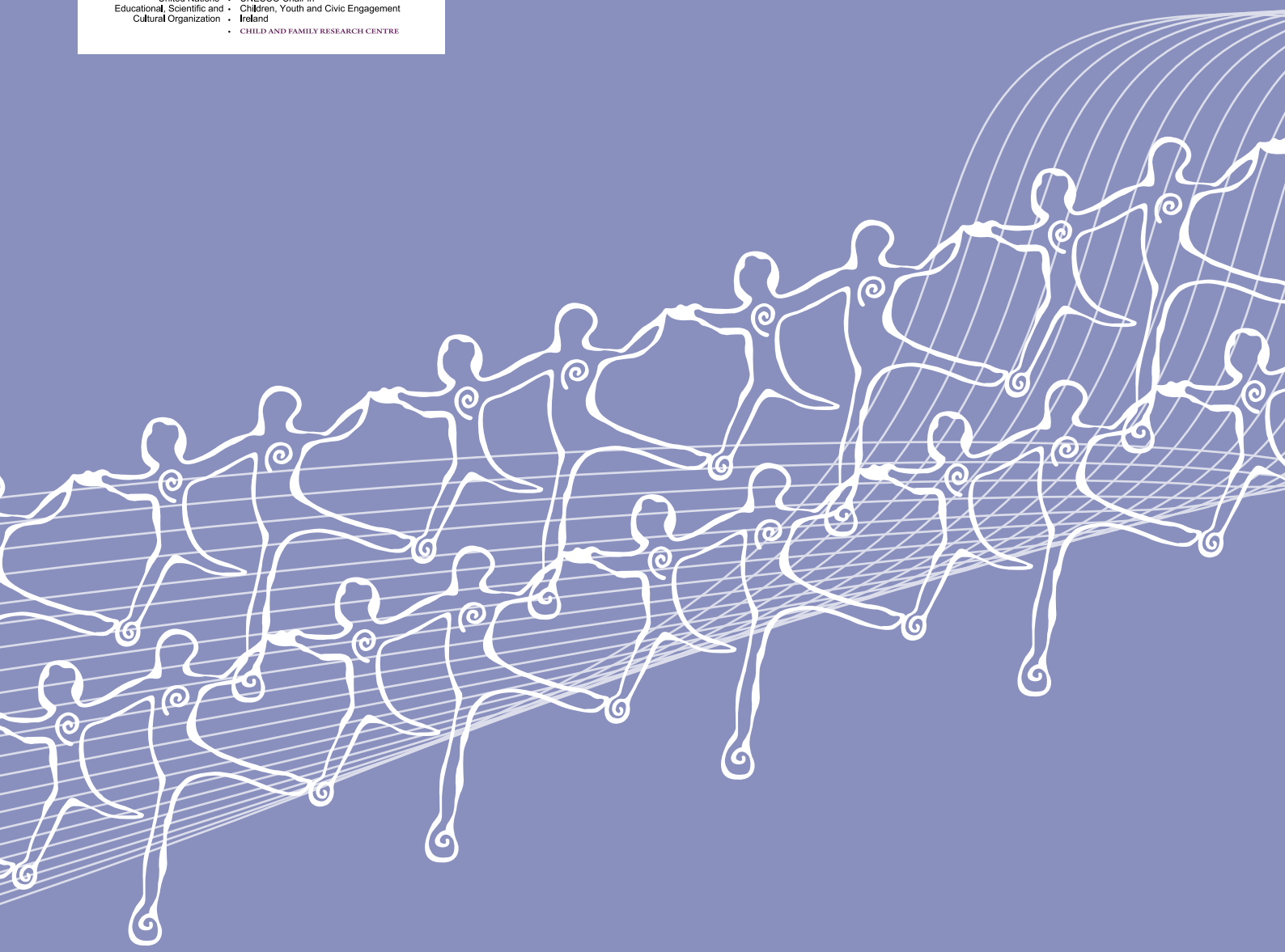

Meitheal and Child and Family Support Networks

The Child and Family Support Networks Research Study

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About the Development and Mainstreaming Programme for Prevention, Partnership and Family Support

The research and evaluation team at the UNESCO Child and Family Research Centre (UCFRC), NUI Galway provides research, evaluation and technical support to Tusla's Development and Mainstreaming Programme for Prevention, Partnership and Family Support (PPFS). This is a new programme of action being undertaken by Tulsa – Child and Family Agency as part of its National Service Delivery Framework. The programme seeks to transform child and family services in Ireland by embedding prevention and early intervention into the culture and operations of Tusla. The research and evaluation carried out by the UCFRC focuses on the implementation and the outcomes of the PPFS Programme and is underpinned by the overarching research question:

> *Is the organisational culture and practice at Tusla and its partners changing such that services are more integrated, preventative, evidence informed and inclusive of children and parents and if so, is this contributing to improved outcomes for children and their families? .*

The research and evaluation study adopts a Work Package approach. This has been adopted to deliver a comprehensive suite of research and evaluation activities involving sub-studies of the main areas within the Tusla's PPFS Programme. The Work Packages are: Meitheal and Child and Family Support Networks; Children's Participation; Parenting Support and Parental Participation; Public Awareness; and Commissioning.

This publication is part of the Meitheal and Child and Family Support Networks Work Package.

About the UNESCO Child and Family Research Centre

The UNESCO Child and Family Research Centre (UCFRC) is part of the Institute for Lifecourse and Society at the National University of Ireland Galway. It was founded in 2007, through support from The Atlantic Philanthropies, Ireland and the Health Services Executive (HSE), with a base in the School of Political Science and Sociology, the mission of the Centre is to help create the conditions for excellent policies, services and practices that improve the lives of children, youth and families through research, education and service development. The UCFRC has an extensive network of relationships and research collaborations internationally and is widely recognised for its core expertise in the areas of Family Support and Youth Development.

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Glossary of Terms

Child and Family Support Network (CFSN): These are multi-agency networks (ideally one per 30,000–50,000 inhabitants) developed within each Tusla administrative area as part of Tusla's Prevention, Partnership and Family Support strategy to improve access to support services for children and their families. These partnership-based networks are open to any services that have an input into families' lives, including Tusla staff as well as statutory organisations and community and voluntary agencies.

Children and Young People's Services Committees (CYPSC): The purpose of these committees is to bring together all relevant stakeholders in the statutory and community and voluntary sector at a managerial level across a county to jointly plan and coordinate services for children, young people and their families.

Integrated Service Area (ISA): Tusla is regionally divided up into 17 administrative areas, each with its own management structure and Child Protection and Welfare department(s).

Lead Practitioner: This is a key person in a Meitheal process. Typically, they are expected to have a previous relationship with the family participating in a Meitheal, and they are responsible for initiating a Meitheal with a family, which includes completing the required documentation. Lead Practitioners can work for Tusla, the community and voluntary sector, or other statutory services. They are expected to take a lead role in organising Meitheal Review Meetings and liaising with the family and other participants in a Meitheal process.

Meitheal: A national practice model focused on identifying, understanding, and responding to the needs and strengths of children, young people and families in a timely manner so that the help and support needed to improve outcomes are provided.

Meitheal Review Meetings: When a multi-agency Meitheal process is organised, regular meetings should take place with all the participants in the Meitheal. Their main purpose is to review progress to date and develop action plans for helping a child, young person, or family to reach their desired outcomes. They cannot be held without the presence of at least one parent.

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1

Introduction

1.1 The Child and Family Support Networks

Child and Family Support Networks (CFSNs) are multi-agency networks that are in the process of being established in each Tusla Integrated Service Area (ISA).[1] Their purpose is to support Tusla's aim of developing an 'integrated service delivery' framework (Gillen et al., 2013: 14) for working with families. A number of these networks have been created in each ISA (ideally a network should be developed per 30,000–50,000 inhabitants) with either virtual or physical hubs, such as Family Resource Centres, at their core. These partnership-based networks are open to any service that has an input into families' lives, including Tusla staff as well as other statutory organisations and community and voluntary agencies. The model's goals are to work with families to ensure that there is 'No Wrong Door'[2] and that services are available to support them as locally as possible. It also has a role in supporting the development of the Meitheal model. In the context of this report, Meitheal refers to an Irish early intervention and prevention practice model that is used when children and young people need support around, for example, behavioural issues or emotional needs, but do not meet the threshold for an intervention by Tusla's Child Protection and Welfare (CPW) service. Further details on this model are provided in section 1.4.

1.2 The Aims of the Report

The purpose of this study is to report on the findings of data collected with members of CFSNs on their experience of participating in these networks. The report focuses on participants' perceptions of the CFSNs' benefits, their role in early intervention and prevention, their connections to the Meitheal model, and challenges relating to their implementation. Although this is part of a wider research study whose aim is to evaluate the overall Meitheal model and that of CFSNs, this report only focuses on CFSNs with the exception of an exploration of the links between the two. It should be noted that extensive data is available on the Meitheal model in the Interim Meitheal Process and Outcomes Study Report (Rodriguez et al., 2017). This current report is based on qualitative data with quantitative findings on the CFSNs included in the Meitheal Process and Outcomes Study.

The aims of this study are to:

- explore the CFSNs' benefits to practice and their potential role in meeting the needs of service users.
- consider the connections between the CFSNs and other structures, including Meitheal
- examine the challenges to the implementation of the CFSNs.

[1] Tusla is regionally divided up into 17 Integrated Service Areas, each with its own management structure and Child Protection and Welfare department(s).

[2] This is based on the idea that service providers are able to direct families to the appropriate agency even if they or the sector they operate in do not offer that service themselves (No Wrong Door, 2014).

1.3 The Prevention, Partnership and Family Support Programme

The Programme for Prevention, Partnership and Family Support is the title given to a new programme of action being undertaken by Tusla as part of its National Service Delivery Model. Tusla's Programme for Prevention, Partnership and Family Support (PPFS) was developed with the intention of placing greater emphasis on early intervention and Family Support principles in the work it carries out with children, young people[3] and their families. Central to this programme are five distinct but complementary and interwoven Work Packages: Parenting Support and Parental Participation; Public Awareness (i.e., increasing awareness of where to access help among the general public); Children's Participation (i.e., enhancing child and youth participation at all levels of their engagement with Tusla); Commissioning, which focuses on the funding of services; and the development of the Meitheal and the CFSN model. The latter is a distinct stream but it also acts as a fulcrum for much of the development of the other aspects of the programme. Implementation of this programme was supported by the creation of the post of PPFS Manager in each Integrated Service Area (ISA), whose role includes overseeing the introduction and management of Meitheal and the CFSNs and developing a smoother continuum of support for families, from low-level universal supports through to more acute interventions.

1.4 The Meitheal Model

The Meitheal model is a process-based system, which is not linked to a particular physical infrastructure or network but rather revolves around the development of an approach that can be applied by disparate organisations in the community and voluntary sector, by Tusla and other statutory services. This is grounded in a set of principles and structures that help to ensure that the type of support a family can expect to receive is similar across the country irrespective of the ISA they live in (Tusla, 2015). There are a number of principles that Meitheal operates under:

- Parents[4] are made aware at the outset that child protection concerns in relation to their child or children will be referred to Tusla Child Protection and Welfare Services in line with 'Children First: National Guidance' (2017).
- Meitheal is a voluntary process. All aspects are led by the parent and child or young person, from the decision to enter the process, to the nature of information to be shared, the outcomes desired, the support delivered, the agencies to be involved, and the endpoint of the process.
- A Meitheal Review Meeting cannot take place without the involvement of at least one parent.
- The Meitheal model looks at the whole child in a holistic manner, in the context of their family and environment. It takes into account strengths and resilience, as well as challenges and needs.
- The Meitheal process privileges the voices of the parent or guardian and child, recognising them as experts in their own situations and assisting them to identify their own needs and ways of meeting them.
- The Meitheal model is aligned with the wider Tusla National Service Delivery Framework.
- The Meitheal model should be focused on outcomes and implemented through a Lead Practitioner (Tusla, 2015: 15–16).

[3] 'Children and young people' refers to all individuals who are under the age of 18.

[4] For the purposes of this study, the term 'parent' refers to all individuals who are either parents, guardians, or carers of children or young people.

1.5 Structure of the Report

The next section of the report outlines the methods used in the study, including its research design, the recruitment and data collection process, its ethical procedures, and the limitations of the study. The following section focuses on the findings. First it provides a profile of the participants in the research. It is then divided into the following themes: the benefits of the CFSN model for service providers and service users; challenges to the implementation of the CFSNs; the links between Meitheal and the CFSNs; and finally the CFSNs' perceived role in early intervention and prevention. The report's key conclusions are then outlined, and some recommendations for the implementation of the CFSNs are provided.

2

Methodology

2.1 Research Design

The study was carried out using a qualitative approach, as it was focused on gathering views on the perceived benefits, challenges of participating in the CFSNs, and the participants' experiences of being a member of the CFSN (Quinn-Patton, 2002). The data collection was carried out through focus groups. Krueger and Casey (2015) note that focus groups allow researchers to collect data on perceptions, attitudes, and opinions, which was the primary intention of this study. Furthermore, Kitzinger (2004) argues that focus groups are a useful means of exploring the collective experience of 'pre-existing groups' (p. 105), a description that applies to CFSNs.

2.2 Sampling

CFSN Coordinators nationwide were emailed with a request to provide details of the number, location, and membership details of the existing networks in their catchment areas. Information was received about 44 CFSNs nationwide.[5] Using the RAND function in Microsoft Excel,[6] a random selection of all the identified networks was carried out to identify a representative sample of 20% of these CFSNs. This led to 9 individual CFSNs being selected to take part in the data collection for the study.

2.3 Recruitment

The relevant CFSN Coordinator who was in charge of each of the selected networks was contacted and asked for assistance in organising the data collection. The CFSN Coordinators sent participant information sheets to the members of the CFSN on behalf of the research team with a request to participate in the research study. The CFSN Coordinators also arranged the date for the focus group, either by asking those who had agreed to take part for suggestions for suitable dates, or by allocating time at an upcoming CFSN network meeting for the focus group to take place. Participation was open to all members of the chosen CFSNs.

2.4 Data Collection

A total of 9 focus groups[7] with 75 participants took place between November 2017 and January 2018. The focus groups lasted from 45 minutes to one hour. Before they began, the participants were again provided with a participant information sheet and an informed consent form[8] to sign. They were audio recorded and later transcribed. The data was stored securely and was accessible only to the research team.

[5] As of June 2017, 88 CFSNs were operating, with a further 53 planned (Tusla, 2018).

[6] This function generates random numbers and here was used to randomly generate a sample for the study.

[7] The interview guide is included in Appendix 1.

[8] These documents are included in Appendix 2.

2.5 Data Analysis

The data was analysed thematically using several headings based on the questions that were asked in the focus group and the study's aims. Participants' perceptions were also compared across the focus groups in order to generate a cohesive set of findings. Quotes from across the focus groups are included in order to illustrate the points that are made. Participants' quotes are identified according to the focus group they took part in rather than being individually identifiable. The focus group identifiers are explained in the ethics section below. It should be noted that, as the networks were at various stages of development, they were not all equally vocal about certain topics. This means that some of the findings' themes are shorter than others and there are more quotes from some focus groups than others.

2.6 Ethics

Ethical approval was applied for and received from NUI Galway's Research Ethics Committee and the Tusla Research Ethics Committee. Participant information sheets and informed consent forms were provided, which clearly stated that taking part in the data collection was voluntary. Before the focus groups began, participants were also given an opportunity to ask the researcher questions about the research study and the data collection process. In order to protect the anonymity of the participants, they are not directly identified in the findings by, for example, job description. The specific network areas where the research was carried out are also not named in the report. Codes were created to identify individual focus groups using a numbered sequence: FG1 represents one focus group, FG2 a second one, and so on. The codes were assigned randomly to the focus groups and are therefore not linked to the order in which the data collection took place, nor have they any significance in terms of the findings.

2.7 Limitations

As the CFSN model has only been operational since 2015, a limitation of the research is that at the time the data was collected it was difficult to gauge, for example, participants' perceptions of the CFSNs' long-term benefits or challenges.

A limitation of the findings is that they do not include data on issues around the implementation of the CFSNs at a managerial level. This is because the intention was to focus on the members of the CFSNs, and as these had little involvement in the management of the networks, data was not collected on this subject.

3

Findings

3.1 Profile of the Child and Family Support Networks

Three of the CFSNs that took part in the research were established in 2015 and four in 2016. One was created in 2016 but did not become operational until 2017. One had been established as an interagency network in 2007 but had taken on a remit as a CFSN since the PPFS Programme had been introduced. Table 1 below outlines the number of focus groups per Tusla region.

Table 1: Number of Focus Groups per Tusla Region

Tusla Region	Number of Focus Groups
South	1
West	2
DML	5
DNE	1

In order to help protect participant anonymity, a national profile of the participants by sector and profession is provided in Table 2.

Table 2: Participants' Professional Role

Agency	Role	Number
Tusla	Family Support Service[9]	7
	Educational Welfare Officer	3
	Social Care	3
	CFSN[10] Coordinator	2
	CYPSC Coordinator	2
	Domestic Violence Service	1
	PPFS Principal Social Worker	1
	Other	3
	Total	**22**
Statutory Partner Agencies	Home School Liaison Teacher	7
	Garda Youth Diversion Project	2
	School Principal	2
	Addiction Services	1
	CAMHS	1
	Clinical Psychologist HSE	1
	County Childcare Committee	1
	Education Other[11]	5
	Total	**20**
Community and Voluntary Sector	Youth Service	16
	Family Support Service	6
	Childcare	1
	Community Development Project	1
	Counselling Service	1
	Total	**25**
Other[12]	**Total**	**8**

3.2 Benefits of the Child and Family Support Networks

Generally, participants appeared satisfied with their involvement in the CFSNs, as expressed in the following quote:

> *I suppose like for me, access, soldiers on the ground, access to the soldiers and the network, like there's loads of positives in it. It's starting, and it's a snowball that won't be stopped, because we all want it. I haven't met anyone who doesn't want it.* (FG2)

[9] This includes both management and practitioners.

[10] Children and Young People's Services Committees.

[11] This includes staff from alternative educational services.

[12] This includes representatives from regional and local drugs task forces, local development companies, and two students.

This is also highlighted in the quote below:

> *So even though it is one of the most rurally challenged [networks], people haven't allowed the distance be a barrier. […] But in fairness to people here that would generally work a lot in isolation as being the only services in certain areas, I think this network in particular has really come together in terms of meetings and that.* (FG8)

Most felt that members of the networks were committed to ensuring that they were successful and could be sustained. They also believed that the CFSNs made some difference to the delivery of services to individual families and at a wider service-provision level. Specific benefits, such as increasing practitioners' awareness of other services, improving relationships between different agencies, and improving the help provided to families, are discussed in detail in the following section. In addition, it should be noted that in most focus groups, participants stated that there was a history of interagency collaboration in the area, albeit largely at an informal case-based level or between services in the community and voluntary sector. Therefore, in these areas the CFSNs were regarded as building on an existing tradition rather than developing it from the beginning.

3.2.1 Improving Service Provision

In most focus groups, participants reported that the introduction of the CFSNs appeared to have had a positive influence on service users. This was for a number of reasons. Firstly, some participants stated that they were now able to organise more appropriate and prompter supports for families because of their increased awareness of other services in the area. Others said that they had been able to draw on specialist support for families they were working with, as noted in the following quote:

> *Where people [other practitioners] are saying, Can I contact you? Have you information on this, that or the other? Because they might be doing a piece of work with a child. So I think that's how it has been translating on to the floor.* (FG8)

Secondly, some participants noted that they had begun to work with families on the recommendation of other professionals who they had met through the network. This included carrying out joint pieces of work with other practitioners, which participants believed could be a more effective means of supporting families, as shown in the quote below:

> *I suppose we would see the value if they [other practitioners] could come – that way you could build a relationship with them. [Before,] it would be referral on paper or a phone call, whereas I think when you do build up that relationship and you do see people face to face, you start seeing: 'You know that family really well; will we do a joint visit?'* (FG7)

Thirdly, some felt that families benefited because information, ideas, and techniques for working with particular needs could be shared and discussed at the network meetings. Fourthly, a number of participants highlighted the importance of the personal relationship they developed with other practitioners and professionals. As a result of this enhanced connection, they felt more confident in referring families on to other agencies. This was because they believed that they shared a common ethos in how to work with service users and could therefore trust them more, as highlighted in the following quote:

> *One thing that I think is useful is, we can all pick up the phone to an agency, but when you have a face, it's much, you know, more personable, and you know who you're dealing with. […] Whereas if you're on the other end of the phone, we'd all be wondering who is this, and what is this person's agenda, or you know what I mean? There's more of a trust between agencies when you get to know each other in this format.* (FG9)

Finally, a crucial benefit of the CFSNs emerging from the focus groups is that as their members begin to develop better awareness of other services in the locality, the No Wrong Door principle is put into practice. This can help to ensure that where a practitioner recognises that a service user has additional needs that fall outside of their remit, they can direct them to the appropriate agency. This is highlighted in a quote from one participant:

> *So then the domestic violence network, I didn't know they were in this town, so if I meet a family and that's an issue, they'll be the first people I'll be, I'll be straight to the list, what's their number again, you know? And that's how it works, you know? I can't do that; who can do that? They're on the list.* (FG2)

3.2.2 Influence on Practice

In the findings benefits for practice emerged. All focus groups reported that participating in the CFSN provided opportunities to meet other professionals who work with families in the same geographic area. Participants emphasised the importance of the space the network meetings created for professionals to develop deeper connections with each other. Several non-Tusla participants stated that taking part in the CFSN helped them to build better relationships with Tusla staff in particular, which for one participant had the following consequence:

> *I have names; I know how to contact somebody if I need, particularly in an emergency situation or somewhere where I really need an intervention. I would have confidence that I can get through to someone and get a response.* (FG1)

Participants in all focus groups reported that through developing better relationships with other organisations, members gained greater awareness of what services were available in the area in which they worked. Some participants believed that it reduced the duplication of service provision, because practitioners were aware of what other agencies offered in an area and could therefore begin to think of other gaps they might address. By developing members' capacity to refer families to other services, the CFSN model appears to be fulfilling one of its stated goals: of developing practitioners' awareness of the service provision landscape. Some participants felt that having better access to information about other services meant they were now in a position to make more appropriate referrals to other service providers. This was because they had greater understanding of other agencies' roles and what they could offer families, as shown in the following quote:

> *It gives a more holistic view of what you can offer somebody and another service can offer that you don't have the skills for.* (FG6)

Others identified practical benefits arising from these connections. For example, one participant noted that they now carried out outreach work with families in facilities belonging to a service whose coordinator they had met through the network. Another indicated that they had begun to receive referrals from practitioners they had met through the network. Members of both urban and rural CFSNs stated that developing these relationships reduced their sense of isolation in how they could support families, as noted by a participant from an urban-based network:

> *Building relationships that's intangible, but it's really so important, because then you know who to call if there's a certain issue [that] comes across your desk or comes to your attention, and how do you measure that? It's a very intangible piece but it's really, really important.* (FG3)

Developing a better knowledge base about local service provision was helpful to participants in specific roles, including:

- practitioners who worked across a large geographic area who previously had inconsistent access to information about services in different localities but who now could easily learn about initiatives that could benefit families
- professionals and practitioners who had recently started working in an area, as it allowed them to quickly develop an understanding of the local service provision landscape and its key stakeholders
- service providers who worked on an outreach basis across a number of communities who might only operate in locations for short periods of time and who would therefore be unfamiliar with what was available in a locality
- participants who worked in niche services such as home school liaison teachers who potentially have limited contact with other practitioners in their day-to-day roles.

In several focus groups, the CFSN was viewed as an efficient vehicle for sharing information across a number of services about, for example, a parenting programme that was being organised. This occurred in two ways. Firstly, information could be shared during the network meetings, as members had the opportunity to discuss their work and presentations were given on new initiatives, changes to laws, and so on. Secondly, information could be shared between meetings, as practitioners could pass on relevant news to the CFSN coordinator for circulation among the group – news about upcoming programmes they were organising, for example. Participants felt that this also had a positive effect on service provision in their own agency, as they could share any information they received with colleagues and service users.

In two of the focus groups, participants felt that the network was particularly important in enabling the sharing of views among frontline staff. This was regarded as important because it allowed other members who did not work directly with families to gain a better understanding of the issues that children, young people, and their families were encountering. One stated that this had informed the development of their programmes and their work plans. Another felt that it reduced the potential disconnect that emerged when managers spoke on behalf of their staff about issues on the ground:

> *Sometimes it can be a disconnect between management and what's going on on the ground, and the management are speaking on our behalf. […] So I think it's important that frontline staff are at these meetings and can discuss these issues like [for example, transport in rural areas].* (FG4)

3.2.3 Influence on the Service Provision System

Across the focus groups, the CFSN model was perceived to be important to the development of service provision at a system level. One way this occurred was through promoting interagency collaboration. Although participants in some focus groups noted that there was a history of interagency work in the network area, they argued that this had mainly revolved around the community and voluntary sector. By contrast, the CFSN model included representatives from a broader range of bodies, including statutory agencies such as Tusla, thereby enabling higher levels of cross-sectoral interagency work to occur. In one focus group, participants noted that under the previous network structure, certain agencies had been excluded because some of their work was carried out outside particular geographic boundaries. Therefore, the creation of the CFSN had led to the establishment of a more cohesive network across the entire Tusla ISA. Higher levels of interagency collaboration were perceived to have had two further significant consequences, as outlined below.

Firstly, as practitioners began to work more closely together and have regular opportunities to engage in structured dialogue on the nature of service provision in an area, gaps in the supports being provided to families could be identified. Participants reported that the network meetings served as a forum where practitioners from a range of sectors could exchange ideas – not only on the issues that were emerging in the network area but also on what strategies needed to be put in place to help resolve these challenges. Participants in different focus groups stated that this had led to specific actions, such as the expansion of counselling services and the funding of new initiatives, including play therapy in an area.

Secondly, in several focus groups, participants noted that the CFSN was useful as a means of collectively advocating for change in how funding is allocated and how services are provided in response to identified needs. Participants felt that the collective voice would be more powerful than that of a single agency in this regard. In this way the collaborative voice of the network could push for change at a macro-level in how resources are allocated. In one network area, a community training centre was established to address a need that had been identified around the provision of alternative educational opportunities for early school leavers. Members of the network had worked closely with the local CYPSC towards this goal. In the focus group it was noted that this gap in services had been informally discussed by professionals and practitioners for a number of years. Participants argued that the collective power of the network and the formal interagency response to the issue had been crucial to the successful development of this project. They believed that this had already led to positive changes for a number of vulnerable young people, as they had begun to enrol in educational courses. In another focus group, participants stated that they felt their views carried more weight when they were voiced as part of the CFSN, as demonstrated in the following quote:

> *I also think when we identify something and let's say we decided that we're going to write a letter, nobody can ignore the fact that we will always start with: 'I am writing to you on behalf of the FG7 network.'* (FG7)

3.2.4 Availability of Child and Family Support Network Coordinators

In addition to the role the CFSN Coordinator was recognised as playing in the Meitheal model, participants in several focus groups identified them as being key to the implementation of the CFSN model. Firstly, they coordinated network meetings and played a central role in, for example, organising training sessions for the network. Secondly, they were also important conduits of information between services, particularly between meetings because, as has been already noted, they could share updates on new initiatives or supports for families that were being developed in the area. However, a challenge identified in some focus groups was that there were not enough CFSN Coordinators in place in the ISAs to support the establishment of all the networks. This meant that some parts of the ISA did not have CFSNs in place. These were one participant's views on the subject:

> *So that's a very clear gap [lack of CFSN Coordinators], and I know there's plans to do it, it's not happening quick enough. I mean that would, you know? There's plans to fill them, but it's certainly not happening quick enough.* (FG1)

3.3 Challenges to the Implementation of the Child and Family Support Networks

3.3.1 Access to Resources

A clear challenge to the implementation and the sustainability of the CFSNs appears to be the absence of a designated budget to support their activities. However, it should be noted that in some areas participants stated that Tusla had begun to fund particular services such as play therapy in response to requests from the CFSN. Nevertheless, in other focus groups participants argued that while CFSNs had successfully identified gaps in service provision, they did not seem to have access to funding to address these. In one focus group, participants discussed at length the challenges they had faced in developing a programme that they believed could be a crucial support for children and young people in the area. They noted that they had struggled to secure funding from statutory agencies and had largely relied on the goodwill and personal commitment of network members to ensure that it could be established. In the absence of an allocation of funding by statutory agencies, they remained doubtful as to whether the programme could be sustained into the future. These were the views of one participant on the topic:

> *So we have written to say that this [the programme] needs to be more sustainable. This needs a future, and it needs to be a secure future, and like, I'm hoping we get a comprehensive response or support in going forward in making sure it's sustainable, but you know? In one way unless they [agencies such as Tusla] are going to give a budget to be able to help projects like that, you know, how are they going to move forward?* (FG7)

Furthermore, participants from other networks where training events had been organised stated that no budget was available to cover costs, for example, in relation to refreshments or hiring venues. They believed that funding for these sessions was crucial for building capacity among service providers. In addition, they were concerned about the sustainability of the CFSN, as without this support, members' enthusiasm and willingness to engage and initiate activities would dwindle. This concern is highlighted in the following quote:

> *I think they [the CFSNs] are sustainable with support. I think the motivation, the energy, the commitment will wane if they are not properly resourced and properly supported.* (FG7)

3.3.2 Connection to Existing Structures

While some progress had been made to date in the CFSNs that featured in the research around building connections and pathways with other structures such as CYPSC, these had not yet been formalised or fully developed. In a small number of focus groups, participants noted that there were opportunities to feed information into the relevant CYPSC committee, for example through the CYPSC Coordinator, who attended both, as noted below:

> *So I have a very definite role in bringing back information to the managers [at the CYPSC committee] and ensuring that they see it as a possible future role of their project or of their service to support or fund or whatever it is going to be.* (FG4)

However, potentially significant challenges were identified across the focus groups around boundary differences with other structures and the practical implications of this. For example, in one network it was noted that the relevant CYPSC committee covers the entire county, but within Tusla the county was divided between two different ISAs, and the county was also split between two separate Tusla regions. This could lead to issues, for example, around ensuring that the development of long-term strategies

in CFSN networks are compatible with other plans in a county, Tusla ISA, or Tusla region. In addition, organising training across an ISA, for instance, or even within a CFSN area could be difficult, due to the number of key stakeholders who would have to be negotiated with and how resource contributions would be balanced. In some focus groups, participants also expressed concerns over the network's geographic configuration, as they believed that service users would be reluctant to access support in towns they did not feel an affinity with but in whose coverage area they were now living. A challenge for practitioners and professionals who work over a wide geographical area is that they are often expected to join a number of networks within a Tusla ISA. Participants feared that this would become too much of a burden on their workload. One participant who was in this situation felt unable to contribute enough to the CFSN that was part of the research study, because of demands on their time caused by their membership of multiple networks.

3.3.3 Securing Engagement by Services

Many participants were keen to emphasise the commitment and willingness of CFSN members to supporting its development, for example by regularly attending meetings. Nevertheless, a challenge identified across most of the focus groups was securing the engagement of all relevant services, particularly from the statutory sector. In some of the longer-established networks, concerns were expressed about ensuring that representatives from the statutory sector continued to attend, and in newer ones this was around securing an initial commitment to participate. Some agencies whose commitment appeared to be waning, or who had yet to join the networks, were potentially key stakeholders in the provision of supports to families, which limits the CFSNs' capacity to meet their stated goals.

Participants noted that representatives of statutory agencies were not mandated to attend and that more commitment was needed at a higher level, either in terms of management or at an interdepartmental government level. This is highlighted in the following quote:

> *Getting that kind of interdepartmental buy-in, you know, you can only do so much on the ground; [if] kind of managers aren't encouraging staff and recognising the work that's being done on an interagency level, it's a very hard ask to then go and ask people on the ground to become involved.* (FG5)

In the absence of such a mandate, participation by statutory agencies was quite uneven, as it was based on an individual's motivation and whether managers facilitated their attendance. This also meant that even where individuals had joined, attending the meetings did not always seem to be prioritised, so their participation was somewhat inconsistent. Participants also recognised and acknowledged that services and agencies were under pressure due to a lack of resources and time constraints, which also influenced their capacity to attend. Concerns were also raised in one focus group that the statutory sector might not see the value of attending or the potential benefits for them and the work they did.

A number of participants believed that it would be difficult to secure the support of stakeholders who do not have a designated role of working with children, young people, and families around their unmet needs. They argued that teachers or general practitioners, for example, would find it difficult to regularly attend network meetings because of their work commitments. In addition, because some sectors, such as Early Years Education, employ large numbers of staff, it could be difficult to secure the support of enough practitioners from a field to ensure their views were representative of the wider cohort.

3.3.4 The Focus of the Child and Family Support Networks

A theme that was discussed in most focus groups was confusion about the exact purpose of the CFSN. In some focus groups, participants appeared to be aware of what the CFSN's objective is, but for more recently established ones the collective identity of the networks and their underpinning remit had yet to be fully established. Participants in one focus group noted that its members were still trying to create a discrete identity for the CFSN and to achieve 'full clarity about purpose' – around whether it was oriented towards practice or at a system level, for instance, in working to identify changes that needed to be made in service provision. This confusion over the CFSN's role was highlighted by one participant:

> *What will its focus be on those two monthly meetings? Like whether it's a piece of training, or is it something brought in from outside, you know what I mean?* (FG6)

Some participants felt that this lack of clarity around the role and value of the network could be affecting potential members' willingness to join, as can be seen in the quote below:

> *It's kind of random who goes to networks. Not everyone in my service goes to networks. They wouldn't see that as – they just think that's extra work for them, it wouldn't be part of their [role].* (FG7)

Some participants expressed concern that if clear, long-term objectives were not created, the sustainability of the networks might be put under threat. In one focus group, for example, participants noted that the main purpose of the CFSN seemed to be to build relationships between service providers in the area. If or when this goal was achieved, then the network's perceived value might be reduced, which could lead to members' attendance dropping. However, a participant from a longer-established network noted that initially they had been unsure of the network's purpose because members were from very disparate backgrounds. Over time they said they had begun to recognise that all members were dealing with very similar issues, and they believed that it had begun to evolve into a shared space for exchanging information or organising training.

In a small number of focus groups, concerns were raised that the CFSN might not be sustainable if there was a continued lack of clarity over its purpose or if it did not move beyond its role as a vehicle for developing relationships with other practitioners. In those instances, participants believed that the CFSN might not be viewed as adding value to the work that individuals carried out with families, or having an influence on service provision in local communities.

3.4 The Link between the Child and Family Support Networks and Meitheal

Under the CFSN model's guiding framework, members' roles in the network should include supporting the implementation of Meitheal by agreeing to act as Lead Practitioners or participating in a process (Gillen et al., 2013). Therefore, if the CFSN principles are being adhered to, there should be strong connections between the network and Meitheal. The following section explores participants' perceptions of the links between these two structures in the CFSN they are members of.

Within the focus groups there appeared to be considerable variation in participants' direct experience of Meitheal in practice. In some groups, all participants had already attended the Meitheal Standardised Training, but in others this was not the case. Furthermore, while some individuals had taken part in Meitheals, most of those who had attended the training did not seem to have been involved in Meitheal either as a Lead Practitioner or as a participant. For example, in one focus group, only two out of ten participants had been involved with a Meitheal. Overall, most participants seemed to have a good understanding

of Meitheal as a practice model, for example of its potential benefits, challenges, and when it could or should be used with families. However, it was notable that little data emerged across the focus groups on the connection between Meitheal and the CFSN at a system level. Generally, it appeared that Meitheal was viewed as a practice-oriented model for working with families, while the CFSNs were perceived to have more of a connection to the wider system of service provision and strategic development. In only one focus group did participants report that the CFSNs had been established for the purpose of supporting the development of the Meitheal model and increasing the number of practitioners using it. Where Meitheal was discussed, it was largely in relation to its day-to-day implementation, with clear distinctions drawn between it and the CFSN structure, as highlighted in the following quote:

> *No, there's definitely a differentiation between the practitioner side of the work, the facilitating practitioner [in Meitheal] and then the network meetings.* (FG1)

One participant believed there was little overlap between the two:

> *I mean apart from like one person being, say, on my Meitheal team and on the CFSN group, like there's not been an overlap as such, you know? It's not that I come to either [the Meitheal Review Meetings or the CFSN meetings] thinking about the other. I didn't really even consider that they were connected, except for the CFSN Coordinator being the common theme, you know?* (FG7)

In this focus group, the main link that was made between the two structures was that members of networks were informed about upcoming Meitheal training and that some practitioners who participated in Meitheals were also part of the same network.

Despite this perceived lack of a structural link, a number of participants did note that there were connections between Meitheal and the CFSNs. This was evident in a number of ways, such as having feedback on members' experience of participating in Meitheal as a regular agenda item, and information being shared about upcoming Meitheal Standardised Meitheal Training. In some of the more newly established CFSNs, participants believed that the network could help to support Meitheal by acting as a mechanism for building familiarity with the model, such as the role of the Lead Practitioner and working towards the use of a shared language and model of practice with families. In one focus group, it was pointed out that since the network had begun to organise, training services that had been unwilling to participate in Meitheal were now more willing to contribute in some way, by giving reports or verbal updates prior to Meitheal Review Meetings. The participants believed that this was because services could see the utility in participating because they had access to training. One participant also noted that the CFSN and the Meitheal model were complementary to each other:

> *It's been hugely beneficial to each other I suppose really. I think if people are familiar with Meitheal they might be more likely to hear it through the CFSNs to be familiar with it.* (FG5)

It should be noted that several participants expressed concerns about possibly negative consequences for the CFSN if too strong a connection was made between it and the Meitheal model. Firstly, this was because potential members who worked with families who were unsuitable for a Meitheal could be deterred from joining the CFSN if they believed that Meitheal was its sole focus. Secondly, some participants believed that the CFSN should also focus on a range of families with either a lower or higher level of needs than usually participated in Meitheal.

3.5 The Child and Family Support Networks' Role in Early Intervention and Prevention

The question of the perceived role of the CFSN in improving capacity around early intervention and prevention met with mixed responses across the focus groups. A number of participants argued that it had strengthened local capacity in this regard. While beneficial, this appeared to be largely informal in nature rather than based on changes at a structural level. As a result of the growing awareness among practitioners and professionals of what services were available and their improving relationships, participants felt they could informally raise concerns with other network members they knew to be working with a family, which could help to prevent issues from escalating. These were the views of one participant on the subject:

> *If you found out that anyone here [in the network] was working with them, you'd have a word, you'd say: 'Do you know what, I've noticed a problem here. Could you work on that?' So you mightn't even be fully involved or officially involved in any way, so what? [...] So those relationships that you have, from my perspective with the schools, with whoever, you are intervening in very soft ways, and it might only cost you an hour and then you're done, and it might have stopped something.* (FG2)

They could also use the knowledge they gained to identify potential services to support families they were working with, as demonstrated in the quote below:

> *So I think we have the same principle of early intervention, that like at a meeting somebody could say, 'I didn't know you offered that service, that's fantastic!' And you will see the pens up and you can see they've made a connection. We won't discuss that case [at the meeting], we don't know anything about it, but somebody has made a connection that I can get something from that for somebody that I need.* (FG1)

In one network, an example was provided of an early intervention programme that was developed by the CFSN. In a local town a homework club was established for children from marginalised communities and vulnerable families who could, for instance, be referred by schools or child protection and welfare services. Participants noted that this could play a very important role in early intervention at a local level. Firstly, they believed that it could help prevent problems of early school leaving from arising in the future among those who attended the club. Secondly, children could develop supportive relationships with workers that could help to increase their resilience. Thirdly, it appeared to be building the children's sense of community, as they were becoming more involved in organised activities in their own neighbourhood. Fourthly, participants felt it could prevent formal interventions in the future by child protection and welfare services, for example, as parents were beginning to engage with other supports in the facility in which the homework club was located.

However, serious concerns were raised in the focus groups about the lack of resources to support the implementation of early intervention approaches with individual families and more universal prevention strategies in the area. In one focus group, a participant noted that a prevention programme, which they believed would be useful to a large cohort of children and young people, could only be made available to a small number of families because of financial constraints. In a mainly rural network, participants highlighted the increasing centralisation of services in towns in the area, which meant that families struggled to access supports in their own locality. It was stated as well that in that area, while higher-level services were available, more universal ones such as mother and toddler groups were not, as the population was quite small and spread out.

Across the focus groups, participants also highlighted gaps in service provision, such as the lack of appropriate services in a network area, delays caused by length of waiting lists for acute supports such as child and adolescent mental health services, and shortages in staff with a preventative remit, such as those who worked in the area of Family Support. In one focus group, a participant argued that the network's member profile inhibited its capacity to work towards the development of a coherent early intervention approach, as most worked at a higher level of need:

> *Even just looking around the table here, it's up at the higher level of need that the representation is kind of concentrated in. The more universal provision that actually stops children and families further progressing with their needs along whatever spectrum, that tends to get lost, or it's very hard or can't be accommodated, or there's nearly a sense that, 'Well, everything is going fine there.' So we need to focus on the families with higher needs.* (FG4)

4

Conclusions

The CFSNs' objective of supporting the development of practitioners' relationships and increasing their awareness of other services in an area appears to be working quite well. However, it was not possible to fully establish the influence of the networks in how they interact with the wider system of service provision. This is because structured relationships do not yet appear to have been established with, for example, the Meitheal process or CYPSCs. The development of more formal, structured links with these bodies and of clear, long-term objectives are important elements in how the identity of a network is constructed and perceived by its current members, prospective members, and external institutions that it engages with.

The findings in this report demonstrate that the CFSNs have a potentially important role in the development of early intervention and prevention strategies in local areas. This is due to the members' collective identification of gaps in service provision and the collaborative approach that the CFSN structure facilitates in responding to these. However, there are challenges around access to resources and the availability of appropriate services to support the development of this approach.

Although it is too early in the development of the CFSNs to fully explore their sustainability, participants did appear to be satisfied with their decision to join and were committed to them. However, the lack of clarity around the purpose of the CFSN, issues around securing and maintaining engagement by all relevant stakeholders, and the absence of a specific budget to support proposed activities in the network were identified as possible challenges to their long-term future.

The study's findings demonstrated that participants were beginning to develop a better understanding of what services were available in local areas. This awareness was beginning to be manifested informally, through carrying out joint pieces of work with other practitioners whom participants had gotten to know through the CFSNs, and formally through referring families on to other services. From this it appears that the 'No Wrong Door' principle which underpins the CFSN framework is beginning to work in practice.

5

Recommendations for the Implementation of the Child and Family Support Networks

- A specific budget should be provided to support, for example, training events organised for CFSNs and to enable a response to be made to needs identified in the network. This would help to prevent participation fatigue and possibly increase members' long-term commitment to the network.
- Consideration should be given to organising broader training events across a Tusla ISA, with more specific actions tailored to local needs initiated within individual CFSNs. This would allow the efficient pooling of resources across an ISA, reduce the organisational burden on members of individual networks, and facilitate the establishment of links between a broader range of professionals and practitioners across a wider area.
- The objective of the CFSNs should be clearly established and emphasised so that members are aware of their purpose for attending. Within this, the relevance of practitioners working at different levels of need must be further explored and supported so that professionals and practitioners recognise the value to their own work with families.
- The implications of boundaries across Tusla and other statutory services' catchment areas should be addressed, with contingencies worked out for how relationships across and between these can be managed in an efficient and effective manner.
- The formal relationship between the CFSNs and the Meitheal model should be explored further at the individual network level and across the wider system. The extent to which they should be formally linked should be examined in order to ensure that the CFSN has an appropriate balance in supporting the Meitheal model and improving service provision for families with unmet needs outside of the remit of Meitheal.
- Efforts to increase engagement with the CFSN model should continue to be made among statutory services and agencies, particularly at a higher management level, so that all relevant stakeholders can be facilitated to join the networks.

References

Department of Children and Youth Affairs (2017) *Children First: National Guidance for the Protection and Welfare of Children,* Dublin: Government Communications Office.

Gillen, A., Landy, F., Devaney, C., and Canavan, J. (2013) *Guidance for the Implementation of an Area-Based Approach to Prevention, Partnership and Family Support,* Dublin: HSE.

Kitzinger, J. (2004) 'The methodology of focus groups: The importance of interaction between research participants', *Sociology of Health & Illness, 16(1), 103–21.*

Krueger, R. and Casey, M. (2015) Focus Groups*: A Practical Guide for Applied Research,*

New Delhi: Sage Publications.

No Wrong Door (2014) 'No Wrong Door Framework & Philosophy Training Guide', Australia: Youth Partnerships.

Quinn-Patton, M. (2002) *Qualitative Research & Evaluation Methods,* California: Sage Publications.

Rodriguez, L., Cassidy, A., and Devaney, C. (2017) *Interim Report on the Meitheal Process and Outcomes Study,* Galway: UNESCO Child and Family Research Centre, National University of Ireland Galway.

Tusla – Child and Family Agency (2015) *Meitheal Toolkit,* Dublin: Tusla.

Tusla – Child and Family Agency (2018) *Quarterly Service and Activity Performance Report,* Quarter 2, 2017, Dublin: Tusla.

Appendix 1

Focus Group Prompt Questions

(Adapted from Dunn (2016) 'Northern Ireland Family Support Hubs. Core Members Interagency Survey Report Card', Northern Ireland: Children & Young People Strategic Partnership)

Characteristics of the CFSN(s)

1. What is it like to be involved in a Meitheal CFSN network?
2. How are the CFSNs working in practice?
3. Can you describe the composition of the CFSN(s) in your local area? (number of agencies, name of agencies)
4. How many CFSNs are you involved with?
5. How long have you been involved in the CFSN(s)?
6. Do you have an actual network or is it a virtual network?
7. How regularly do you meet as a network?
8. What is the role of your agency in the CFSN?

Perceived impact of the CFSN(s)

1. What is the impact of the CFSNs in your local area? (Improved access, improved awareness, use of services)
2. What are the gaps in your local area? (lack of services, unmet needs)
3. What is the impact of the CFSNs in prevention and early intervention?
4. What is the impact of becoming part of a CFSN in your own agency? (perception, increased demands)
5. What are the benefits of interagency collaboration? (locally and in your professional practice – knowledge, information exchange, trust)
6. What are the challenges of interagency collaboration? (locally and in your professional practice – engaging agencies, budgets)
7. What is the impact of the CFSN on service users?
8. What are the most common issues you deal with on a regular basis?
9. How do you ensure a holistic approach to the needs of service users?
10. What is the contribution of CFSN to improve outcomes of children, young people and families? (increased understanding of the needs)
11. What is the impact of CFSN in Tusla's 'continuum of support'? (reduce duplication of services, families say their story only once)
12. Do you have any recommendations on how to improve the Meitheal CFSNs

Appendix 2

Participant Information Sheet

Dear Participant,

This gives you information about a research study on the experience of families, practitioners, managers and coordinators in Tusla and its partner agencies involved in the Meitheal and CFSNs model. You are invited to take part in the research, and it is very important that you know what the project is about and what you are asked to do.

What's the study about?

The UNESCO Child and Family Research Centre at NUI Galway, and TUSLA, the Child and Family Agency, are doing a nationwide study on Meitheal and CFSNs including the views of families, practitioners, managers and coordinators in Tusla and its partner agencies. We want to know more about the perception of practitioners involved in Meitheal and the CFSNs about the model and its implementation nationwide, from the perspective of Tusla and also its partner agencies.

What will you do?

If you agree to take part, you will be asked to take part in a focus group with other members of your local Child and Family Support Network (maximum one hour) with one of the researchers. This focus group will be coordinated at a day and time convenient for you between the months of October and November.

Do you have to take part?

Taking part is voluntary. You can decide to take part or not. You can opt out at any time during the process.

How shall the information be collected and stored?

The focus group will be recorded and your name will be removed but not the area or role, as this is very specific.

Who are the researchers?

The project researchers are Dr Carmel Devaney and Dr Leonor Rodriguez and Dr Anne Cassidy.

If you agree to take part, we ask that you sign a consent form. Also, if you have any questions or comments, you can contact Carmel Devaney, one of the researchers, by phone at 091 495733 or email at **carmel.devaney@nuigalway.ie.**

Yours sincerely,

Carmel, Leonor and Anne

Thank you for reading this and taking part in this study!

Informed Consent Form

CFSN Informed Consent Form

Please read the Participant Information Sheet before you agree/do not agree to take part in the research. If you agree, researchers will coordinate a focus group that you will participate in. If you do not agree, this information will not be shared.

This research was approved by the Research Ethics Committee of the National University of Ireland Galway and Tusla Research Ethics Committee. If you have any questions or concerns about your rights as a participant in this study, please contact the Chairperson of the NUI Galway Research Ethics Committee, c/o Office of Vice President for Research, NUI Galway. You can also e-mail them at **ethics@nuigalway.ie.**

If you wish to ask any questions or to discuss any concerns about the research, please contact Carmel, Project Researcher, at 091 495733 or via e-mail at **carmel.devaney@nuigalway.ie.**

Please tick the boxes below if you agree to take part in the study:

- I have read the Participant Information Sheet for the study ☐
- I have had the opportunity to ask questions ☐
- My participation in this Study is voluntary ☐
- I understand that I can withdraw from the study at any time, with researchers for the Meitheal Study ☐

Please sign your name here: _____ **Date:** _____

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