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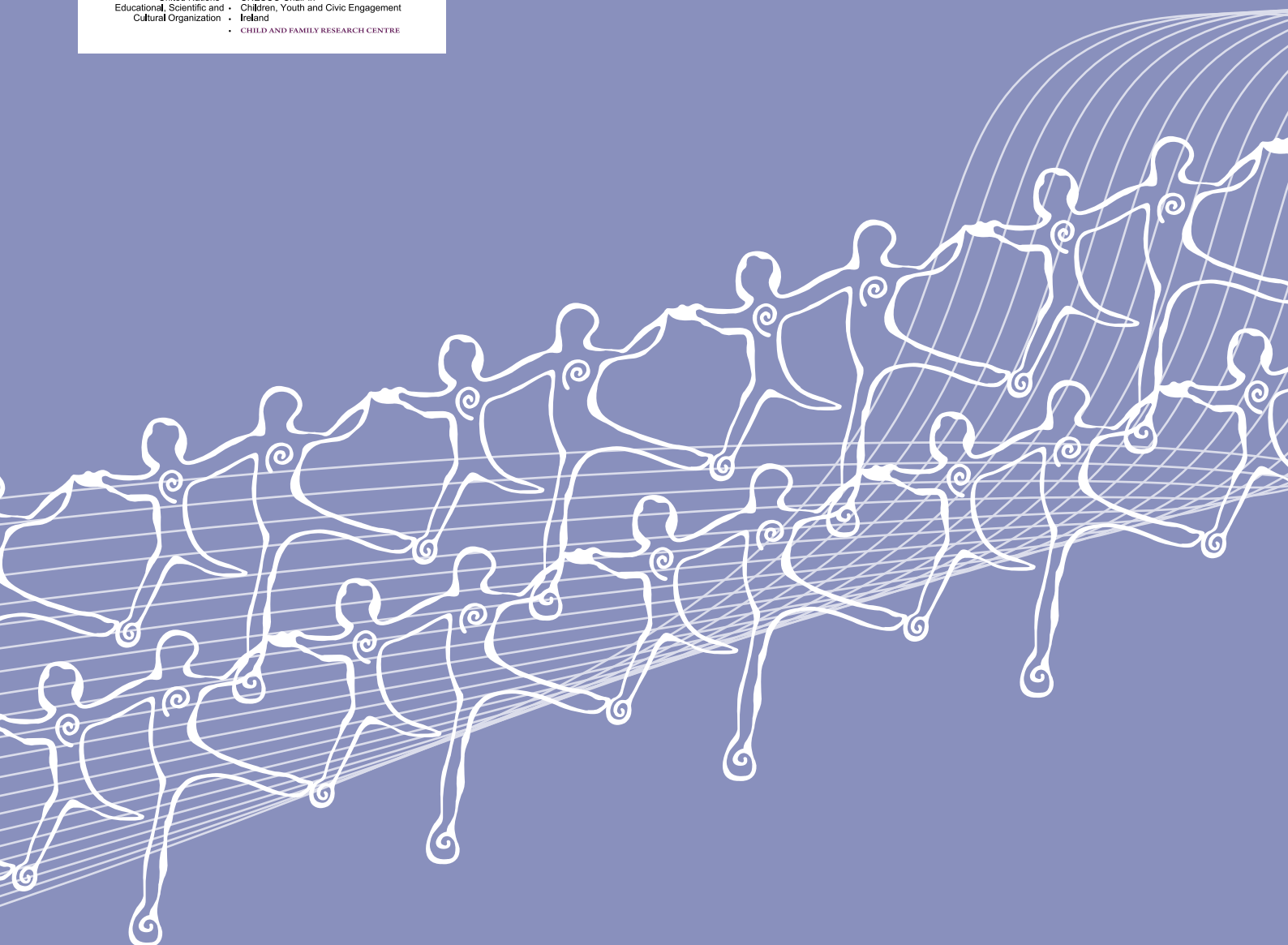
UNESCO Chair in  
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CHILD AND FAMILY RESEARCH CENTRE



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Meitheal and Child and Family Support Networks

## A Retrospective Study of the Meitheal Model

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**JULY 2018**



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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 Tusla - 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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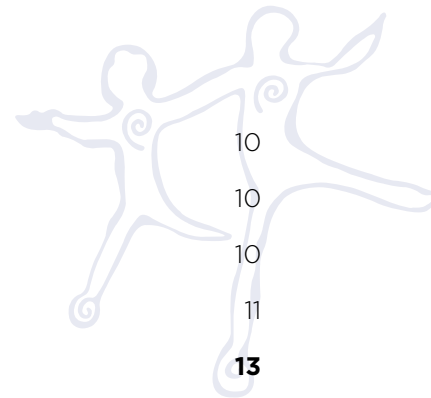
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# Table of Contents

<b>About the Development and Mainstreaming Programme for Prevention, Partnership and Family Support</b>	<b>i</b>
<b>About the UNESCO Child and Family Research Centre</b>	<b>i</b>
<b>Glossary of Terms</b>	<b>iv</b>
<b>Acknowledgements</b>	<b>v</b>
<b>1. Introduction</b>	<b>1</b>
1.1 Introduction	1
1.2 Study Aims	1
1.3 The Prevention, Partnership and Family Support Programme	1
1.4 The Meitheal and Child and Family Support Networks Model	2
1.5 Structure of the Report	3
<b>2. Methodology</b>	<b>4</b>
2.1 Research Design	4
2.2 Eligibility Criteria	4
2.3 The Recruitment Process	4
2.4 Data Collection	5
2.5 Data Analysis	5
2.6 Ethics	5
2.7 Limitations of the Research	5
<b>3. Findings</b>	<b>6</b>
3.1 Participant Profile	6
3.2 Benefits of the Meitheal Process	6
3.3 Key Features of the Meitheal Process	7
3.3.1 The Meitheal Review Meetings	7
3.3.2 Parental Participation	8
3.3.3 Relationships between Parents and Lead Practitioners	9
3.4 Relationships between Parents and Service Providers	9



3.5 Challenges to the Implementation of Meitheal	10
3.5.1 Access to Supports	10
3.5.2 Child and Youth Participation	10
3.6 Closure of the Meitheal	11
<b>4. Conclusions</b>	<b>13</b>
<b>5. Recommendations for Practice</b>	<b>14</b>
<b>References</b>	<b>15</b>
<b>Appendix 1</b>	<b>16</b>
Child Information Sheet	16
Child Consent Form	17
Young Person Information Sheet	18
Young Person Consent Form	20
Parent Participant Information Sheet	21
Parent Consent Form	23
Lead Practitioner Participant Information Sheet	24
Lead Practitioner Consent Form	26
<b>Appendix 2</b>	<b>27</b>
Parent Interview Prompt Questions	27
Child/Young Person Prompt Questions	28
Lead Practitioner Prompt Questions	29

# 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.

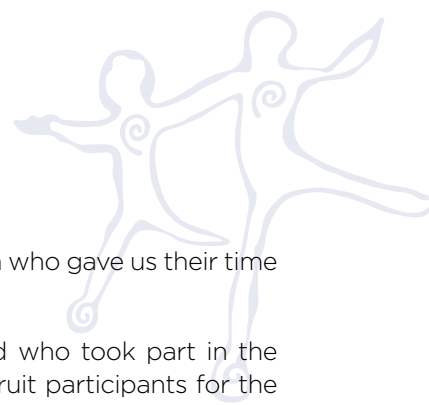
**Integrated Service Area (ISA):** Tusla is regionally divided up into 17 administrative areas, each with its own management structure and Child Protection and Welfare department(s).

**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.

# Acknowledgements



Our deepest thanks and appreciation go to the families who took part in this research who gave us their time and shared their experiences so freely and honestly.

We would also like to thank the Lead Practitioners who supported this study and who took part in the research. We extend our gratitude to the CFSN Coordinators who helped us to recruit participants for the study and the members of the Tusla working group who helped us to design and carry out the study.

Many thanks to our colleagues here in the UCFRC including Eileen Flannery, Clare Tracy and Iwona O'Donoghue for their project and administrative support.

# 1

## Introduction

### 1.1 Introduction

This report presents findings on a retrospective study of the experiences of parents<sup>1</sup> and Lead Practitioners who participated in Meitheals initiated prior to 2017. This is complementary to the Meitheal Process and Outcomes study, which is part of the overall evaluation of the Meitheal and Child and Family Support Networks (CFSNs) model. A qualitative approach was used to gather the data for this research study. The findings focus on participants' views on taking part in the process and its perceived role in addressing children's, young people's<sup>2</sup>, and families' unmet needs, with some discussion about whether the changes have been sustained.

### 1.2 Study Aims

**The aims of this study are to:**

- retrospectively explore the experience of participating in Meitheal initiated between 2015 and 2016 for families and Lead Practitioners
- analyse perceptions of the process of implementing the Meitheal model
- explore the perceived role of the Meitheal model in addressing children's, young people's, and families' unmet needs.

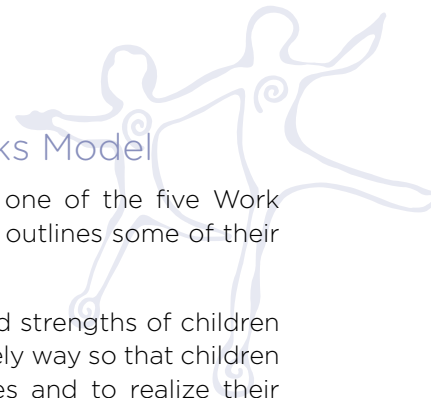
### 1.3 The Prevention, Partnership and Family Support Programme

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, 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.

<sup>1</sup> 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.

<sup>2</sup> 'Children and young people' refers to all individuals who are under the age of 18.





## 1.4 The Meitheal and Child and Family Support Networks Model

As previously outlined, the development of the Meitheal and CFSN model is one of the five Work Packages in the PPFs Programme. This section briefly explains these terms and outlines some of their key components.

Tusla defines Meitheal as ‘a national practice model to ensure that the needs and strengths of children and their families are effectively identified, understood and responded to in a timely way so that children and families get the help and support needed to improve children’s outcomes and to realize their rights’ (Gillen et al., 2013: 1). For the purposes of this research, Meitheal is constituted as such when the preparation stage has been completed, consent has been obtained from a family, and a decision has been made that the discussion stage will be proceeded to. This primarily relates to interventions that require a multi-agency response, but in certain circumstances it can also include a single-agency response.

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 by 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 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 or guardian 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 the child or young person, 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).

This is complemented by two core features. Firstly, the Meitheal model operates outside of the child protection system in that, for instance, families cannot be involved with Meitheal and Child Protection and Welfare (CPW) at the same time. Should child protection concerns be raised during the Meitheal process, a referral will be made to CPW, and the Meitheal process will be suspended or concluded. However, support can continue to be provided by individual agencies and practitioners. Secondly, the Lead Practitioner should have a prior relationship with the family and take on the role with the agreement of the family.

There are three initiation pathways into Meitheal. The first is the direct or self-initiated Meitheal, where a request is made by a practitioner or by a family itself. The second avenue is where a case is diverted by the CPW Intake Team into Meitheal. In this situation, social workers must be satisfied that there are no child protection concerns but that there are unmet needs which can potentially be addressed through this process. The final method is the step-down pathway, which again is initiated by the CPW department. This occurs when child protection concerns have been dealt with by CPW but where social workers feel that further support would be beneficial as the family transition out of the system or where there are still some unmet welfare needs.

In order to support Tusla's aim of developing an 'integrated service delivery' framework (Gillen et al., 2013: 14) for working with families, CFSNs are being established. In each ISA a number of these multi-agency networks (ideally one per 30,000-50,000 inhabitants) were to be developed, 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'<sup>3</sup> and that services are available to support them as locally as possible. Members' roles include supporting the implementation of Meitheal by agreeing to act as Lead Practitioners or participating in a process in other ways, and working in a collaborative way with other agencies in their network (Gillen et al., 2013).

## 1.5 Structure of the Report

The following section outlines the methods used in this study, including the overall design, the recruitment process, the data collection, and the data analysis. It then details findings from the interviews thematically. These themes include: the benefits of the Meitheal process from the perspective of the parents and Lead Practitioners, its key features, and challenges to its implementation. Included in this section are illustrative examples from the data that highlight particular points from the findings. Finally, some conclusions are provided and recommendations for practice are made.

<sup>3</sup> 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).

# 2

## Methodology



### 2.1 Research Design

The study was underpinned by a qualitative approach to the data collection. This method was chosen because, as Quinn-Patton (2002) argues, it is the best means of capturing a cohort's views on their experiences of a phenomenon such as Meitheal, their perceptions of it, and so on. Data was collected through semi-structured interviews with parents and Lead Practitioners. Semi-structured interviews were chosen, as this allows researchers to ask participants predetermined questions but also allows space for posing follow-up questions, which take into account the individual circumstances of each person (Wengraf, 2001). The study was overseen by a steering group comprised of representatives from Tusla, including the PPFS Regional Implementation Managers and members of the UNESCO Child and Family Research Centre (UCFRC) research team. Support was provided by this group in areas such as the research study's design and participant recruitment.

### 2.2 Eligibility Criteria

All families and their Lead Practitioners participating in the Meitheal model which were initiated prior to 2017 were eligible to take part in this study. This date was decided on to enable families whose Meitheal began prior to the start of the Process and Outcomes Study to participate in the UCFRC's research work. Eligibility for inclusion in the Process and Outcomes Study was based on the Meitheal being initiated between January and October 2017.

### 2.3 The Recruitment Process

The study was carried out over a period of four months, from November 2017 to February 2018. Recruitment took place in November and December 2017. The sample size was not predetermined, so all families who identified themselves as willing to participate during this period were to be included in the study. Ten families responded positively in the timeframe for recruitment. In one family, both parents agreed to take part in the study, so in total eleven parents took part. Participants were recruited in two ways. Firstly, a number of parents (n = 8) were recruited through the snowball sampling method via direct contact between the research team and Lead Practitioners and CFSN Coordinators. The latter provided names and contact details of families they had worked with in the past who they believed may wish to take part in the study and obtained verbal consent from the families to be contacted by the researcher. These families were contacted by the researcher by telephone, and the interviews were carried out at a place and time convenient to the participants. Secondly, an email was sent by the research team to the CFSN Coordinators to advertise the study in early November 2017. All CFSN Coordinators who agreed to support the study were sent information packs for distribution to eligible families via the Lead Practitioners. These packs contained information sheets and consent forms<sup>4</sup> for parents, young people, and children (the latter two in age-appropriate formats) as well as prepaid envelopes. Anyone who was willing to take part in the study returned signed consent forms to the UCFRC research team, using these prepaid envelopes. The researchers then contacted the participants to organise the interviews. Three of the participant families were recruited through this process. All of the relevant Lead Practitioners were approached and asked if they wished to take part in the research study. They were also provided with

<sup>4</sup> These are included in Appendix 1.

participant information sheets and informed consent forms.<sup>5</sup> Telephone interviews were then carried out with those who had agreed to participate.

## 2.4 Data Collection

Although the study was open to children and young people as well as parents, only parents agreed to take part in the research. The researchers organised face-to-face interviews with participating parents at a day, time, and place of their choosing. Semi-structured interviews were carried out, which ranged from 30 minutes to 1 hour in duration. Parents were given a €30 'One4all' voucher as a token of appreciation for their participation in the research. Eight Lead Practitioners agreed to participate in the research. Data collection with the Lead Practitioners took place over the telephone, with the interviews,<sup>6</sup> which were semi-structured in format, lasting from 30 to 45 minutes.

## 2.5 Data Analysis

Each interview was analysed thematically, with comparisons also made between the parents' interviews and the corresponding Lead Practitioners' ones. The data was analysed under the themes of the benefits of Meitheal; key features of its implementation, for example parental engagement with the process; and challenges, such as access to resources. As the criterion for inclusion was based on the start date for the Meitheal (prior to 2017), and not when it was concluded, this means that there is no uniformity among the families as to when the Meitheal finished, with some still ongoing at the time the data was collected. Therefore, it was not possible to analyse the data based on whether changes that had occurred during the Meitheal were perceived to have been sustained for a uniform length of time after the Meitheal had closed.

## 2.6 Ethics

Ethical approval was applied for and received from NUI Galway's Ethics Committee and the Tusla Ethics Committee. Participation in the research was voluntary, and it was made clear that there would be no adverse consequences should an individual choose not to take part. The NUI Galway Protocol for Distressed Participants was available for use if the participants experienced any discomfort during the interviews. In order to protect their anonymity, a code was assigned to each participant. Along with a number, each category was given a letter. So, for example, Lead Practitioners were coded A, mothers B, fathers C, and children and young people D upwards. The letter R was added to the code to signify that participants were part of the Retrospective study, so the codes became, for example, R1A or R1B. To further protect participants' anonymity, specific personal details (for example, about medical conditions) are not included in the findings. For the purposes of this study, parents are identified in quotations as P and Lead Practitioners as LP, in addition to the number assigned to the family.

## 2.7 Limitations of the Research

One of the limitations of this research study is that the parents who took part in the study were approached by either their Lead Practitioner or a CFSN Coordinator. This may have introduced an element of selection bias, which possibly reduced the inclusion of families who had negative experiences of Meitheal being represented in the study.

As the sample size was small, it is not possible to generalise the findings to the wider cohort of families and Lead Practitioners who participated in Meitheal between 2015 and 2016<sup>7</sup>

As no children or young people agreed to take part in the research, their views are not directly represented in the study.

<sup>5</sup> These are included in Appendix 1.

<sup>6</sup> The interview schedules for both cohorts are included in Appendix 2.

<sup>7</sup> Approximately 1,160 Meitheals were carried out nationwide during this period (Rodriguez et al., 2017).

# 3

## Findings



### 3.1 Participant Profile

Ten families are represented in the study, with a total of 11 parents. Seven of these parents are mothers and four are fathers. Eight Lead Practitioners, seven of them female, participated in the study. Three worked for Tusla and five were employed by other services. Four worked in Family Support services such as Family Resource Centres, two worked in education-related services, one was a youth worker, and one was employed as a full-time Lead Practitioner. Of the families included in this study, Lead Practitioners and parents indicated that there was a range of unmet needs relating to, for example, poor school attendance by young people, parent and child mental health difficulties, challenges caused by children's behavioural disorders, social isolation across the family, and insecure housing. The Meitheals had lasted from six months to two years, and all had featured Meitheal Review Meetings. At the time the data was collected, most of the Meitheals had been closed, but it was unclear what the status was of three of them.

### 3.2 Benefits of the Meitheal Process

Similar to the findings in the Interim Report on the Meitheal Process and Outcomes Study (Rodriguez et al., 2017), parents and Lead Practitioners were satisfied with the Meitheal process and believed that it helped to meet the needs of children and young people. The Meitheal process was identified by parents and Lead Practitioners as being beneficial in a number of ways, as outlined below:

- Both parents and Lead Practitioners noted that for most of the children and young people, almost all of the identified needs were met during the Meitheal processes. However, some issues were highlighted in this regard, as discussed subsequently. Although challenges were noted in some Meitheals around securing the support of all relevant services, coordinated action plans were developed for families, with both children and their parents receiving specialist support to resolve identified needs from a range of services, such as mental health practitioners, counsellors, schools, speech therapy, Family Support, and local housing authorities. Waiting lists for specialist services presented challenges in some of the Meitheals.
- Many of the parents felt they now had access to a formal support network of trusted practitioners that they could draw on in the future, should further issues arise for their family.
- Three participants who were parenting alone stated that the Meitheal process reduced their sense of isolation, gave them access to supports to improve their parenting skills, and enabled them to develop successful coping strategies around their families' issues.
- Parents and Lead Practitioners indicated that children and young people for whom the Meitheal was initiated appeared to benefit considerably from the process. Parents and Lead Practitioners noted improvements, for example, in their school attendance and performance, as well as in their engagement with peers and their mental health, as shown by positive changes in their mood and emotional regulation. At the time of the data collection, participants believed that most of the changes that had taken place appeared to have been sustained.
- Parents highlighted perceived improvements in their own mental health, better engagement with service providers, positive changes in family relationships, increased self-confidence in their capacity to parent, and a greater sense of self-efficacy.

- Some participants noted that all members of the Meitheal team, including parents and professionals, appeared to have gained a better understanding of how to support children and young people with additional needs. This was because they had access to specialist advice from a range of professionals who attended the Meitheal Review Meetings.
- Lead Practitioners also believed the Meitheal was beneficial to their work because, for example, it gave them an opportunity to build relationships with other practitioners and improve their knowledge on how to support families with complex needs. It also allowed them to create a team of professionals to support a family, which led to a wider range of services being provided. In addition it led to the creation of a sense of shared responsibility towards helping the family.

The following is an illustrative example of the perceived benefits of Meitheal for one family, as reported by a parent:

A Meitheal was initiated for a young person who had mental health issues, had a poor attendance record in school, and was socially isolated. Their parent lacked confidence and felt overwhelmed and alone. Supports were put in place for the young person in school and in relation to their mental health, and the parent also had access to specialist services to resolve personal issues. The parent stated that the young person was now less stressed, regularly attended school, had significantly improved their educational performance, and engaged with their peers. The parent noted that they had better mental health, had more confidence in their parenting ability, and felt they now had a trusted network of relevant practitioners they could rely on to support their family should future issues arise.

However, it should be noted that not all participants believed the Meitheal process was fully effective in resolving families' unmet needs, or that the changes which had occurred would be sustained. In some instances, actions that had been agreed on were not taken up by the members of the family, including both parents and the child or young person, which reduced the possibility of resolving unmet needs within the Meitheal process. In one family, significant progress had been made in relation to a young person's school attendance, but the parent believed that the child had begun to regress since the closure of the Meitheal. In another, the Lead Practitioner pointed out that particular underlying issues were not addressed because the family refused to allow them to be included in the Meitheal action plan. Therefore, the Lead Practitioner felt it was likely that the family would continue to struggle after the Meitheal closed as new needs linked to these difficulties regularly emerged.

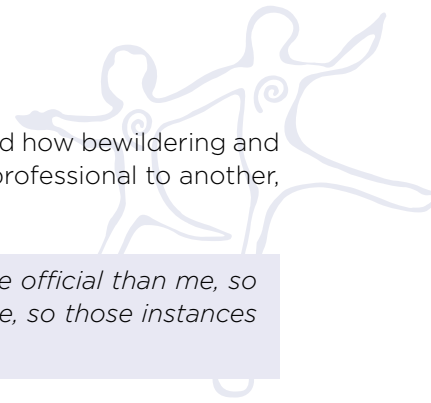
### 3.3 Key Features of the Meitheal Process

#### 3.3.1 The Meitheal Review Meetings

As has been noted in previous research (Rodriguez et al., 2017), participants identified the Meitheal Review Meetings as crucial elements of the process. Parents and Lead Practitioners believed that they led to practitioners being more accountable for the work they carried out with families. In addition, both parents and Lead Practitioners felt that the Meitheal Review Meetings acted as a forum for the creation of a holistic understanding of the child or young person's strengths and needs. This was based on the perspectives of a range of key informants, such as the family themselves and professionals and practitioners who worked with them. One parent noted that the meetings created a shared space for discussing the best way to support their child:

*Everyone is talking about the same topic and sharing ideas and learning from each other: Oh did you try this? Or what if I tweak it this way? Would this work better? [...] It was fantastic. (RP2)*

This led to the development of tailored programmes of support based on a coordinated understanding of a child's unmet needs. In addition, parents whose children had complex needs were no longer required



to take on an intermediary role between different services. Two parents highlighted how bewildering and frustrating this had been, as they often struggled to relay information from one professional to another, and they noted the relief they felt at the Meitheal Review Meetings:

*So because it was like they [other participants in the Meitheal] were more official than me, so [...] their words felt like they had more weight than mine would have done, so those instances would have been fantastic and like a weight lifted off my shoulders. (RP1)*

### 3.3.2 Parental Participation

One theme that emerged from the data, which reflects findings from the Interim Report on the Meitheal Process and Outcomes Study (Rodriguez et al., 2017), was how actively parents participated in the Meitheal processes and the power they felt they had to influence decisions that were made. Most parents appeared to be aware of their centrality to the Meitheal process and what rights they could exercise, including, for example, deciding who attended the Meitheal Review Meetings. However, some parents did not seem to have as much control of the Meitheal process as they potentially could have had. In some instances they did not appear to have had a role in the decision to close the Meitheal. In another, a parent stated that while they had a very difficult relationship with one of the individuals who attended the Meitheal Review Meetings, they had not been able to prevent them from attending. Most Lead Practitioners also noted that parents were engaged with the process and took an active role in completing agreed actions. They appeared to be keenly aware of the parents' centrality to the Meitheal process, as highlighted below:

*Pretty much any action that came up, it was [the parent] that came up with it. She might not have pinpointed it as an action, she may not have had those words on it, but it was pretty much [the parent] that decided what she wanted out of it, like. (RLP9)*

In addition, all of the parents stated that they felt listened to and respected, as noted in the following quote:

*For the first time in a long time, it felt like I was in control and I had a voice. Like, I was able to put out my opinions, and if they were agreed with, they were agreed with, if they weren't agreed with, they weren't agreed with, but they weren't shot down. (RP5)*

A key feature of the parents' participation was that they felt they could be more truthful with practitioners in the Meitheal process than they would have been in their prior interactions with services. This seemed to be particularly true where their family had previous contact with Child Protection and Welfare services. The separation of Meitheal from Child Protection and Welfare departments also appeared to increase these parents' willingness to engage with the Meitheal process. One Lead Practitioner noted that at the start of the Meitheal, a parent with this kind of background history did not appear to trust those who were involved in the Meitheal. However, the parent said they now had confidence in those who participated in the Meitheal process:

*Well, you can talk without being judged in the Meitheal. [With] social workers you have to watch what you're saying, because you know right away you'll be judged. And that's from my own experiences, like. (RP7)*

### 3.3.3 Relationships between Parents and Lead Practitioners

The findings in this study reflect those of the Interim Report on the Meitheal Process and Outcomes Study (Rodriguez et al., 2017) on the importance of the relationship between parents and the Lead Practitioner. In line with the previous study, parents felt listened to and supported by them. They also emphasised the crucial role the Lead Practitioner played in encouraging their participation, especially early on in the process. This was noted by the following parent:

*[I was] very stressed and anxious and worried and you know? Vulnerable position, trying to deal with all these other, you know? With the CAMHS<sup>8</sup> and with the school, so when I was in the Meitheal meeting I had the backup all the time, I felt, of [the Lead Practitioner]. (RP1)*

Parents who were involved in a Meitheal where they had a prior relationship with the Lead Practitioner noted that this was beneficial, as they believed that they could trust them more and were reassured by the connection they already had with this individual. This view was echoed by their Lead Practitioners. However, other parents who had no prior relationship with the Lead Practitioner did not appear to have found this a significant hindrance and seemed to have developed a strong, positive connection with them.

### 3.4 Relationships between Parents and Service Providers

One important consequence of the Meitheal process was that there appeared to be a shift in parents' attitudes to service providers and accessing help. This mirrors findings from the Meitheal Process and Outcomes Study. Almost all of the parents who took part in the research noted that they now had a stronger, more collaborative relationship with professionals, as highlighted in the following quote:

*You feel like you're one of them; you're not the parent and they're the professionals. [...] There's a lot more of a friendly basis to it. (RP8)*

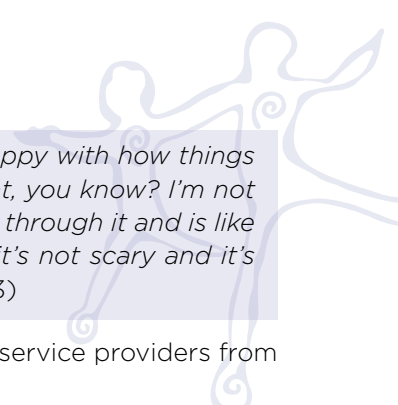
As a result, parents who had lacked the confidence to talk directly to or challenge professionals, such as teachers or psychologists, felt more able to act as advocates for their children or to work with others to develop strategies to address unmet needs in their family. This was also identified by their Lead Practitioners as an important consequence of these families' Meitheal processes. Parents also noted that they would be more likely to seek help for their family in future, because not only did they have more awareness of their child's needs but they also knew what support was available and who to contact. One parent noted Meitheal's role in changing their attitude towards help-seeking:

*Because I realised that the help was there, and it made life easier for me to know that I didn't have to be so independent. [...] You get into a rut, you just, you don't see the outside; you just [see] the bubble that you're in. [...] They [Meitheal] literally burst that bubble and showed me, because even when I went outside the door, that bubble was just around me, so to me there was nothing that could help. (RP6)*

One notable feature of the interviews was that parents had begun to encourage other parents to seek support for their families around issues they were struggling with. All parents had either recommended the Meitheal process to other families or would do so. Some had advised other parents about how or where to seek support for their family about particular issues. One parent noted that they had made a conscious decision to be more vocal in advising other parents to seek help and how to do so:

<sup>8</sup> Child and Adolescent Mental Health Services.





*I made a decision a while back [...], that I wouldn't just sit back and be happy with how things are going; I was going to be more vocal about it and let people know that, you know? I'm not hiding that, I think just to hear it from somebody who, you know, has been through it and is like a normal Joe Soap, they don't have a big title. For people to know that it's not scary and it's there to help. It's there basically for you; it's not for any other reason. (RP3)*

The following example shows Meitheal's influence on a parent's relationship with service providers from the perspective of both the parent and the Lead Practitioner:

A parent had been very wary of practitioners at the beginning of the Meitheal process and had been scared that their children would be removed from their care. They also lacked confidence in their ability to make decisions and had low self-esteem. In parallel to their child receiving support to address their unmet needs, the parent attended workshops around their child's condition and was encouraged to enrol in an educational course. The parent stated that they had also developed a strong relationship with the other participants in the Meitheal. As a result of their involvement in the Meitheal, the parent reported that their engagement with services had completely changed and they had developed a greater sense of trust that help was available should their family need it. They noted that they now actively contributed to a parent support group and had advised a friend to enquire about a Meitheal for their own child. They had also identified their other children's unmet needs, which resulted in early interventions being put in place to resolve their issues. The Lead Practitioner also highlighted that the parent was more assertive and confident in their interactions with professionals and appeared to find it easier to express their opinions.

## 3.5 Challenges to the Implementation of Meitheal

### 3.5.1 Access to Supports

In general, Lead Practitioners noted that services and professionals were willing to participate in Meitheals, with valuable contributions made by a range of agencies, including teachers and staff from CAMHS. However, there were some issues identified in this area. Several Lead Practitioners said it was difficult to secure the full support of schools, with some attributing this to a lack of interest on the part of principals and others to resource issues. Other Lead Practitioners noted that while services were eager to help, they did not have sufficient staff in place to be able to do so. Participants also noted that waiting lists for services was an issue for children and young children with needs that required specialist support.

### 3.5.2 Child and Youth Participation

Child and youth participation remains a challenging issue in the implementation of Meitheal. From the interviews, it appeared that an effort had been made to include the child or young person's voice in the process and to ensure that their best interests were represented at, and central to, the Meitheal Review Meetings. However, their participation was uneven: it varied from full attendance at the Meitheal Review Meetings to completing the Strengths and Needs Form but not being informed about the Meitheal process itself. In many cases it did not appear to have been considered as integral to the process as parental participation was, because, for example, the possibility of the child or young person attending Meitheal Review Meetings was not always discussed by parents and Lead Practitioners. This can be a complex issue, as some parents and Lead Practitioners felt that due to a child's behavioural disorder, full participation in the Meitheal could have had a detrimental impact on their behaviour, or that their welfare would be negatively impacted by attending meetings where their issues or their family's issues

were discussed. Furthermore, in two Meitheals both the parents and Lead Practitioners believed that the children were too young to participate, as highlighted in the following quote from a Lead Practitioner:

*He [the child for whom the Meitheal was initiated] didn't attend any of the meetings, because I suppose it just would have went over his head, really; he was just so young. (RLP9)*

Some parents and Lead Practitioners felt that young people who did attend the Meitheal Review Meetings found them to be a positive experience and that they benefited from seeing what support was available to them. They also appeared to appreciate being able to voice their opinions, which made them feel involved in the process, as commented on by one Lead Practitioner:

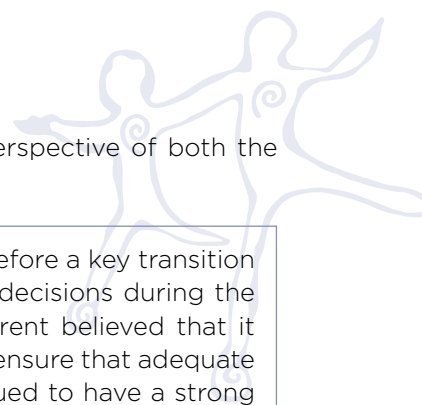
*So I think he is fully aware of how things work and came along quite openly and happily and, you know? When the opportunity arose, he did speak his mind and is quite happy to continue doing that. (RP7)*

However, some young people who attended the meetings appeared to find it difficult to contribute, regardless of whether they were encouraged to do so:

*It was kind of nearly [...] one of the later ones [the Meitheal Review Meetings] that she [the young person] kind of spoke up, really. Now she was encouraged to do it as well and prompted [to speak] as well [in earlier meetings], and there was things she knew she wanted to say before she went in, you know? But overall she was kind of quiet throughout the process, but you know anything that she did say was brought into the meetings and was heard, I would have said. (RLP6)*

### 3.6 Closure of the Meitheal

Most of the parents believed that it was the correct decision to close the Meitheal as the family's needs had been met. They also noted that the closure of the Meitheal had been discussed with them in advance of the decision being made. After the Meitheal had concluded, a number of parents and Lead Practitioners noted that supports continued to be provided to the family or that parents knew how to access help should they require it. However, there appeared to be issues in some of the Meitheals around the closure of the process, where, for example, the Meitheal was inactive but had not been formally closed through holding a final meeting. In others there appeared to be confusion as to whether the Meitheal was closed or not, as there was a discrepancy between the views of Lead Practitioners and parents about this. Whether or not the Meitheal was required to close after a certain length of time had elapsed emerged as an issue in a small number of interviews. This meant that families were not necessarily receiving the required support to resolve all identified needs.



The following example illustrates the issue of closure in a Meitheal from the perspective of both the parent and Lead Practitioner:

In one Meitheal there were issues around the timing of its closure, as it ended before a key transition point in the child's life. Although the parent felt they had participated in key decisions during the process, they were not involved in the discussion around its closure. The parent believed that it would have been beneficial to continue with the Meitheal for a longer period to ensure that adequate supports were in place to help their child. In this case, while the family continued to have a strong relationship on an informal level with the Lead Practitioner the nature of the service they worked for meant that the family could no longer formally attend it. The Lead Practitioner expressed frustration that few services were in place in the area to support the young person or they were not willing to fully engage with the Meitheal process. The parent and Lead Practitioner noted that although there had been improvements in the child's outcomes during the Meitheal, these were unlikely to be fully sustained.

# 4

## Conclusions

All parents were happy with their decision to take part in Meitheal. Similarly, the Lead Practitioners who participated believed it was beneficial to their work with families. Despite challenges around, for example, accessing certain services, they identified clear benefits in the supports that could be provided to families. It was also perceived to have had a positive role in addressing families' unmet needs.

Challenges were identified around child and youth participation and the extent to which they are included as key factors in the Meitheal process. This is an ongoing issue that requires continued monitoring and education among practitioners and parents, in order to ensure that children and young people's involvement becomes more extensive and they have an appropriate level of influence on the process.

One significant result of Meitheal, with possibly long-term consequences, is that a number of parents appeared to have experienced a change in their attitude to and relationship with professionals. Their increased confidence and trust in practitioners had led to more positive engagement with services and appeared to increase the likelihood of an early intervention taking place in their family should other issues arise - as had already occurred in some instances. They had also begun to act as signposts for formal support services in their own informal social networks for friends and families who were experiencing difficulties.

# 5



## Recommendations for Practice

- Careful attention needs to be paid to the closure of the Meitheal process. Parents should participate in the decision to conclude the process and be appropriately prepared by the Lead Practitioner for its ending. Where necessary, supports should be put in place or existing ones continued for a period of time to ease their transition out of the Meitheal process. The formal process of concluding the Meitheal needs to be adhered to as much as possible in order to ensure that all participants are aware that it has been closed off. The timing of the Meitheal's closure could take into account upcoming stressors in families' lives to ensure that adequate support is provided during this period so that progress which has been made can be sustained.
- Further engagement is needed with key stakeholders such as school principals to ensure that they understand the Meitheal process and where necessary are willing to commit to participate in a Meitheal in some capacity.
- Parents and Lead Practitioners need to be further supported to fully understand the potential role of children and young people in the Meitheal process and how to ensure that appropriate measures are in place to support the involvement of younger children or those with additional needs.

# References

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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.

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Wengraf, T. (2001) *Qualitative Research Interviewing*, London: Sage Publications.

# Appendix 1

## Child Information Sheet



### Who are we?

Carmel, Leonor and Anne are researchers from the UNESCO Child and Family Research Centre, at the National University of Ireland, Galway.

This centre works with children and young people to understand their everyday experiences and how to improve children's lives.



### What is this study about?

We are trying to understand the experiences of children, young people and families that took part of Meitheal. This will help adults understand what is good about it, what is not so good and how can it be better so we can help children, young people and families even more.

### What will you have to do if you decide to take part?

We will talk to you about what you felt about being involved in Meitheal.

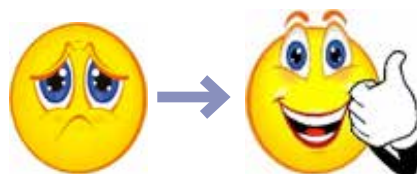
We will ask you to draw a picture for us called 'All About Me'. And tell us all about you.

We will record you with a voice recorder (only if you agree!) and you can hear yourself on it afterwards.

### Do you have to take part?

Not at all! It is up to you. You can also say yes and change your mind later on, all you have to do is let us know or your parent/guardian or another adult know.

We are not going to be angry at you and you and your family will continue to receive the help you need as normal.



### Will anyone know that you are taking part or what you told us?

We are the only ones that will know your name and that you are taking part in the study.

We will never use your real name.

The only time we will have to tell someone what you say is if you tell us that someone is hurting you or **harming you or another person** in any way, as we want this to stop immediately.

### Is there anything that will upset you if you take part?

Talking about your experiences, particularly difficult ones, can be a bit sad or upsetting.

If you feel like this, please let us know or another adult know immediately. You can stop taking part at this time.

We will also give your parent/carer names of people you can talk to about how you feel and they will help you feel better.

**If you have any questions, please ask us any time in person, by phone or by email.**











**Carmel Phone: 091495733**

**Email: [carmel.devaney@nuigalway.ie](mailto:carmel.devaney@nuigalway.ie)**

**Thank  
You!**

# Child Consent Form

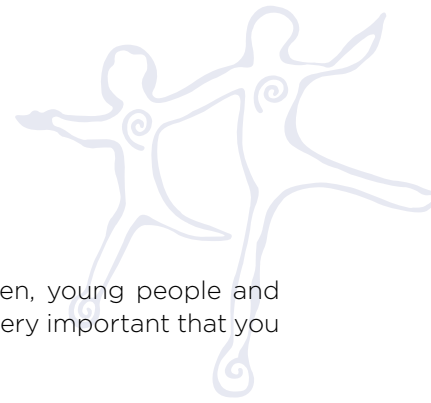


I agree to take part in the study	YES 	NO 
I agree to complete the activities and/or pictures	YES 	NO 
I am happy to be recorded	YES 	NO 
I know my name will not be used in the report but my words can be used as examples	YES 	NO 
I know I can withdraw from the study at any time	YES 	NO 

My name is: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/ Guardian: \_\_\_\_\_ Date: \_\_\_\_\_





## Young Person Information Sheet

### Young Person Information Sheet

This gives you information about a research study on the experience of children, young people and parents involved in Meitheal. 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, are doing a study on children and young people and families that were involved in Meitheals that started before 2017. We want to know more about the lives of children and families and what happened since you were involved in Meitheal. This is important for improving services for children, young people and families in Ireland. We are asking you to participate in this study that will take place in October and November 2017.

#### What is the benefit of taking part?

This study allows Tusla and researchers to hear your opinions about things that they do that work for children and young people and things that they could be doing better to improve children's lives and how services can be improved.

#### What do I do?

If you would like to take part, talk to your parent(s)/guardian(s), who also received information on the study. If you would like to be involved in the research and your parent(s)/caregiver(s) are happy for you to take part, you can sign the consent form.

If you agree to take part, you will be asked to talk with the researchers and complete one interview with us to get to know you better and tell us about your experience in Meitheal by completing a short activity called 'All about me'. We will meet you at a day and time that suits you.

If you agree, researchers will also have access to Meitheal databases. These will help us know a bit more about you, but we will never use your real name and we will not share that information with anyone.

#### Do I have to take part?

No, you don't have to take part! And even if you decide you'd like to take part in the research and then change your mind, that's okay! Also, taking part or not taking part will not make any difference to the services provided for you.

#### What are the risks of taking part?

During the process, you might have uncomfortable feelings or emotions. If this happens, you can tell the researcher, who will ask you if you wish to continue, or decide not to take part anymore. If you tell us something about you or another child that puts you at risk of harm, then we are required to pass this information on as part of our responsibility.

**How will the information be collected?**

Our conversation and the activity 'All about me' will be audio recorded. All your information will be stored securely, and only the researchers will have access to it. This information will be safely kept for five years and then it will be destroyed.

**Will anyone know they were my answers?**

No. Nobody will be able to identify you, and we won't share any information with anyone. However, if you tell us about something that has put you or another person at risk of harm or abuse, we must pass this information on to Tusla as part of our responsibility to protect children.

**Who are the researchers?**

The project researchers are Carmel, Leonor and Anne. They have a lot of experience doing research with children and families and they work at the UNESCO Child and Family Research Centre, NUI Galway.

You can contact Carmel about the project by telephone at 091 495733 or you can e-mail her at [carmel.devaney@nuigalway.ie](mailto:carmel.devaney@nuigalway.ie). You can also ask your parent(s)/caregiver(s) to do this for you.

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

You will receive a copy of this Information Sheet and a signed Consent Form to keep.

*Young Person Information Sheet Version 2*

*12/10/2017*



## Young Person Consent Form

Please read the Participant Information Sheet before you agree/do not agree to take part in the Meitheal Study. If you agree, researchers will work with you and your practitioner to get to know you better and what Meitheal has been like for you.

This research was approved by the Research Ethics Committee of the National University of Ireland Galway. 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](mailto: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](mailto:carmel.devaney@nuigalway.ie)

**Please tick to indicate whether you agree to take part, or you do not agree:**

I have read the Participant Information Sheet for the study	
I agree to talk with the researcher and complete the activity she will ask me to do ('All about me') and a recorded interview	
I agree to let the researcher obtain information about me and my family from Meitheal records (date of birth, nationality, sex, address, siblings and services who are or have supported you)	
I allow researchers to use anonymised direct quotes from my interview	
I understand that my name will never be revealed and my information will always be safe and locked away until destroyed	
I am happy to be recorded and I understand that this information will always be safely stored away until destroyed	
I do not agree to be involved in this study	

Please sign your name here: \_\_\_\_\_

Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## Parent Participant Information Sheet

Dear Parent/Guardian,

This gives you information about a research study on the experience of children, young people and families that took part in Meitheal. 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, are doing a study on children and young people and parents/guardians that were involved in Meitheal before 2017. We want to know more about the lives of children, young people and families and what happened since you were involved in Meitheal. We also want to hear parents'/guardians' voices about the impact of Meitheal in Ireland and about your experiences taking part in Meitheal. This is important for improving services for children, young people and families in Ireland. We are asking you and your child/children to participate in this study that will take place in October and November 2017.

### **What will you do?**

If you and/or your child/young person agree to take part in the study, researchers from NUI Galway shall meet with you and ask you to complete an interview once. We will ask your permission to let your child/young person to be involved in the study. They will complete a creative activity ('All about me') and an interview.

If you agree, we will also have access to Tusla databases regarding you and your family. Your name or family name will never be revealed, and information will be stored very carefully. Only the researchers will have access to it.

### **Do you have to take part?**

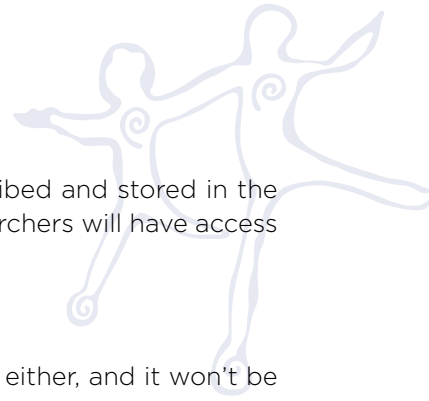
Taking part is voluntary. You and your child/young person can decide to take part or not. You can say 'No' at any time and opt out during the process if you/they wish. Services for you or your child/young person won't be affected if you or your child/young person participates or not.

### **Are there any risks involved?**

You/your child/young person might experience some uncomfortable feelings or emotions during the interviews. If this happens, you should tell the researcher, who will ask you if you wish to continue with the process or not. There won't be any negative consequences for you or your child if you do this.

### **What happens if a concern about risk to a child is talked about during the research process?**

As far as possible, all information will be confidential and there will be no way to link what you tell us directly back to you. The data will be fully anonymised. However, if you or your child/young person tells us about something that has put your child or another child at risk of harm or abuse, we will be obliged to pass this information on to Tusla as part of our responsibility for child protection under Children First 2017 Guidelines. This is the ONLY situation when confidentiality will be broken.



### **How will the information be collected and stored?**

All interviews with children, young people and parents guardians will be transcribed and stored in the researcher's computer. All information will be stored very safely so only the researchers will have access to it. It will be destroyed after five years.

### **Will someone be able to identify me or what I say in an interview?**

No. Details about you or your child/young person won't be given to anyone else either, and it won't be possible for anyone to recognise you or your child.

### **Who are the researchers?**

The project researchers are Dr Carmel Devaney and Dr Leonor Rodriguez and Dr Anne Cassidy. They have a lot of experience researching with children and families and work at the UNESCO Child and Family Research Centre, NUI Galway.

If you and your child/young person want 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 e-mail at [carmel.devaney@nuigalway.ie](mailto:carmel.devaney@nuigalway.ie).

Yours sincerely,

Carmel, Leonor and Anne

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

**You will receive a copy of this Information Sheet and a signed Consent Form to keep.**

## Parent Consent Form

If you agree to take part in the Meitheal Study, you must tick the boxes below. Please read the Participant Information Sheet before you agree/do not agree to take part in the research.

This research was approved by the Research Ethics Committee of the National University of Ireland Galway. 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](mailto: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](mailto:carmel.devaney@nuigalway.ie).

**Please tick to indicate whether you agree to take part, or you do not agree:**

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 allow my child(ren) to take part in this research study	
I understand that I can withdraw from the study at any time	
I agree to let the researchers obtain information about me and my family from Meitheal records (date of birth, nationality, sex, siblings and Meitheal forms)	
I allow researchers to use anonymised direct quotes from my interview	
I am happy to be recorded and I know this information will be safely stored for 5 years until destroyed	

Please sign your name here: \_\_\_\_\_

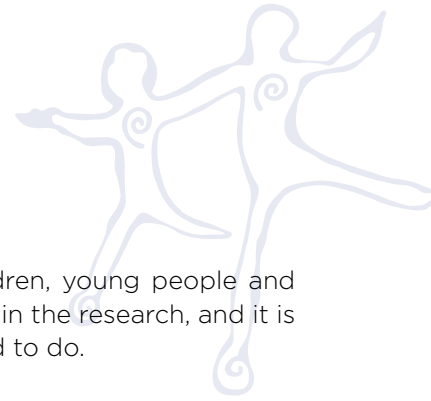
Date: \_\_\_\_\_

Please provide us with your contact details if you are happy to be contacted,

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_



## Lead Practitioner Participant Information Sheet

Dear Lead Practitioner,

This gives you information about a research study on the experience of children, young people and families that were involved in Meitheal prior to 2017. 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 study on children and young people and families involved in Meitheals initiated before 2017. We want to know more about the lives of children and young people and their families and what their involvement in Meitheal was like from the point of view of Lead Practitioners. We also want to hear practitioners' voices about the impact of Meitheal on Tusla and service delivery in Ireland and about your experience taking part in Meitheal. This is important for improving services for children, young people and families in Ireland. We are asking you to participate in this retrospective study that will run in October and November 2017.

### **What will you do?**

Families involved in Meitheal prior to 2017 will be contacted and invited to take part in the Meitheal Retrospective Study. Families that consent will be included in this retrospective study. If you were the Lead Practitioner of one of these participating families, we would ask you to complete a telephone interview about the Meitheal process you carried out with them.

### **Do you have to take part?**

Taking part is voluntary. You can decide to take part or not, and you can opt out during the process if you wish. Your role in Meitheal won't be affected if you decide not to participate. You don't have to take part, and you don't have to talk about anything you don't want to during the interviews.

### **Are there any risks involved?**

We do not foresee any risks by taking part in this study, but if you feel fatigued, uncomfortable or upset, you can tell the researcher, who will ask you if you wish to continue with the interview or not. There won't be any negative consequences for you if you do this.

### **How shall the information be collected and stored?**

We will coordinate the telephone interview at a day and time that suits you. This interview will be recorded. You will not be personally identifiable, and we will not share any individually identifiable information about the family you are being interviewed about. All recordings will be safely stored for five years after which they will be destroyed.

### **Who are the researchers?**

The project researchers are Dr Carmel Devaney, Dr Leonor Rodriguez and Dr Anne Cassidy. They have a lot of experience researching with children and families and they work at the UNESCO Child and Family Research Centre, NUI Galway.

If you want 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](mailto:carmel.devaney@nuigalway.ie).

Yours sincerely,

Carmel, Leonor and Anne

**Thank you for reading this and taking part in this study! You will receive a copy of this Information Sheet and a signed Consent Form to keep.**





## Lead Practitioner Consent Form

Please read the Participant Information Sheet before you agree/do not agree to take part in the research. If you agree, searchers will coordinate an interview with you to talk about your experience of Meitheal with a family taking part in the retrospective study.

This research was approved by the Research Ethics Committee of the National University of Ireland Galway. 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](mailto: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](mailto:carmel.devaney@nuigalway.ie).

**Please tick to indicate whether you agree to take part, or you do not agree:**

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	
I am happy to be recorded and I know this information will be stored for five years until destroyed	

Please sign your name here: \_\_\_\_\_

Date: \_\_\_\_\_

Please provide us with your contact details if you are happy to be contacted,

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

## Appendix 2

### Parent Interview Prompt Questions

(Adapted from Brandon et al., 2014 and Brady et al., 2008)

#### **Perception of Meitheal**

What was it like for you and your family to take part in Meitheal?  
Have you been involved with other services before?  
If so, what was different between Meitheal and other services?  
Why were you referred to Meitheal?  
What type of help were you looking to obtain? (Was your family having a problem at the time?)  
What did you expect of Meitheal before starting; how did you think it would be?  
How did you feel about the amount of time you and your family had to spend during the Meitheal process?

#### **The Meitheal Process**

How did you get on with Meitheal practitioners?  
Did you feel you could trust Meitheal practitioners?  
Do you think practitioners were fair?  
Did practitioners explain things clearly?  
Were practitioners easy to talk to and listened to you carefully?  
How did practitioners help you understand and sort your problems?  
Were practitioners consistent (doing what they said they would do)  
What sort of help/support were you provided?  
Was there anything Meitheal could not help you with?  
What happened if you were unhappy or upset about something the practitioner said or did?  
How has Meitheal helped you as a parent/adult?  
How has Meitheal helped your family/children and young people?  
Is your family coping better with problems now?

#### **Perception of the future**

What are the best things about Meitheal? What is not so good?  
What do you think can be changed to make Meitheal better?  
Is there anything that you have not yet asked or discuss?



## Child/Young Person Interview Prompt Questions

(Adapted from Brandon et al. 2014 and Brady et al., 2008)

### **Perception of Meitheal**

What was it like to be part of Meitheal?

Were you happy to take part? Do you think it helped you and your family?

What did you think of Meitheal before? What did you expect it would be like?

What do you think of Meitheal now?

### **The Meitheal Process**

How did you get on with the practitioner/people in Meitheal that helped you?

Did you feel that they were fair and you could trust them?

Was the practitioner/Meitheal person easy to talk to?

Did the practitioner/Meitheal person help you sort out and understand your problems?

Was there anything they could not help you with?

Was the practitioner/Meitheal person consistent (did what they said)?

Did the practitioner/Meitheal person listen carefully to what you said?

What did you do with the practitioner/Meitheal people?

Did the practitioner/Meitheal person listen to your views and do something about them?

Did the practitioner/Meitheal people help you or support you and your family in any way?

What happened if you were unhappy or upset about something the practitioner/Meitheal person said or did?

Did you understand the reasons why decisions were taken?

### **Perception of the future**

What were the best things about Meitheal? What was not so good?

What do you think can be changed to make Meitheal better?

Is there anything that you have not yet asked or discuss?

## Lead Practitioner Prompt Questions

(Adapted from Brandon et al., 2014 and Brady et al., 2008)

1. What was your relationship with this family (How was the process of establishing the relationship, frequency of visits?)
2. Can you summarise the Meitheal process you undertook with this family (sessions, phases)?
3. What was it like to engage with this family?
4. How did you obtain family consent?
5. How did you agree an action plan with this family?
6. How did you ensure that the voices of all family members were heard?
7. How did you make sure you were meeting the needs of all family members?
8. What resources did you use/found helpful?
9. What kind of supports did you find easier or harder to deliver successfully with this family?  
Can you give me an example of work you did that worked well and an example of what did not work so well.
10. What unforeseen challenges did you experience with this family? How did you deal with them?
11. How was the closing of the Meitheal process with this family?
12. Anything else you would like to say?

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**TUSLA**

An Ghníomhaireacht um  
Leanaí agus an Teaghlach  
Child and Family Agency

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