



*Better Outcomes
for Children:
Are we there yet?*

Special Conference Issue

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

The first article is a comprehensive overview of the outcomes of the Prevention and Early Intervention Initiative (PEII), in which Rochford, Owens, Doherty and O'Donnell highlight key findings from the Capturing the Learning Series produced by the Centre for Effective Services. The findings invite careful reading by practitioners and policy makers interested in improving outcomes for children living in areas of social disadvantage and are united by a common theme of the need for a strong evidence-base for programmes which aim to improve the outcomes of children and families.

Three articles in this special edition focus specifically on parenting programmes and supports as a means to improve children's outcomes. Lorna Kerin's article reports on the implementation and evaluation of a pilot programme targeting parents that are vulnerable to social isolation and mental health difficulties in the perinatal period and first year of their child's life. In what is a relatively rare programme delivered to mothers during this period of pregnancy and infancy, participating mothers positively reported on the three aspects of the programme (yoga, baby massage and the Incredible Years parenting programme). Pauline McCleneghan also highlights parents as a major protective factor in early childhood and the importance of providing parental educational supports to optimise responsive parenting in the early years. In her report of a randomised controlled trial of the Growing Child programme as delivered in the Republic of Ireland and Northern Ireland, McCleneghan highlights the benefits of evidence-based parenting supports for children's outcomes in a range of areas including cognitive, socio-emotional and language development. Continuing the theme of parents as early educators who impact children's outcomes directly, Kent, Bleach and Hagan report on evidence in support of the Parent Child Home Programme (PCHP) which is a parenting programme that has been delivered by the Early Learning Initiative in Dublin's Docklands since 2007. The authors report on international evidence and internal and external evaluations of the PCHP

which provide support for the programme's effectiveness in promoting responsive parenting and literacy activities at home.

Moving to the pivotal role of quality formal early educational experiences in children's outcomes, Hayes, O'Neill, Rooney and Byrne-MacNamee present initial findings from the Strengthening Foundations of Learning programme. In their article they highlight the mechanisms necessary for improving quality in early years' settings through changing educators' practice and enhancing reflective practice. In this way, children's outcomes, especially those from disadvantaged areas are positively impacted. Carol Ann O'Siorain examines educational support for children with autism and investigates current educational practices to improve literacy outcomes. She highlights the unique learning environments and experiences of children with autism which must be taken into account when aiming to develop literacy skills. Patricia McCarthy explores the experiences of blind/vision impaired young people and adults with regard to the study of mathematics. She presents evidence that while access to the maths curriculum in schools has improved, barriers are still faced by blind/vision impaired students in terms of teacher training in specialised teaching and learning methodologies.

McCarthy is one of three researchers in this issue to highlight the importance of ensuring children and young people's voices are heard in research. Brady, Moran and Forkan continue this work in relation to exploring the perspectives of adolescents and their experiences of Youth Cafés as a means of supporting health and wellbeing. Their findings support the implementation of Youth Cafés as a means of improving mental health outcomes for young people, reporting that adolescents found the cafés an important way of connecting to their community, helping them stay safe and providing them with support and opportunities for personal

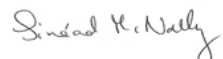


development. The final article in this issue (Horgan, Forde and Martin, 2016) presents findings from a study of children's decision making in their own lives, commissioned to inform the development of the National Strategy on Children and Young People's Participation in Decision-Making 2015-2020. Adopting a child participatory qualitative approach to gaining the perspectives of children and young people, the authors found that participants felt they had a voice at home but that this was much more limited in formal educational settings. This lack of consultation was also felt in community settings with the exception of young people who were highly involved in community projects. Interestingly, their research supports that of Brady et al, also in this issue with regard to the need for spaces such as Youth Cafés that provide opportunities for children and young people to engage with their communities and develop personal skills.

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

Special thanks are also due to all the reviewers who took the time to carefully review the articles and make suggestions for

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References

Department of Children and Youth Affairs (2014) *Better Outcomes, Brighter Futures: The National Policy Framework for Children and Young People 2014 – 2020*, Dublin: Government of Ireland Stationary Office.

Office of the First Minister and Deputy First Minister (2006) *Our Children and Young People – Our Pledge: A 10 Year Strategy for Children and Young People in Northern Ireland*, Belfast: OFMDFM.



Capturing the Learning: Ten years of Learning from the Prevention and Early Intervention Initiative

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

Background

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

There has been a strong focus on the collection of evidence in the PEII. A core condition of PEII funding was that organisations rigorously evaluated the effectiveness of their services in improving outcomes, and share their learning. In order to synthesise and harvest this collective knowledge, the Centre for Effective Services (CES) produced the Capturing the Learning series, collecting data and information from evaluations conducted as part of the PEII

and extracting the key messages about what works. Six outcome reports were produced by CES in the areas of Organisational Learning (Sneddon, Kehoe, Harris, Owens, Sheehan, and Mac Evilly 2012), Improving Child Behaviour (Statham, 2013), Children's Learning (Sneddon and Harris, 2013), Child Health and Development (McAvoy et al., 2013), Promoting Inclusion (McGuirk and Kehoe, 2013) and Parenting (Sneddon and Owens, 2012). The learning from these outcome reports and the summary report (Rochford, Doherty and Owens, 2014) from the past ten years of the PEII communicate

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valuable messages about improving outcomes for children and families and contributes to addressing the important theme of the 2015 conference of the Children's Research Network of Ireland and Northern Ireland – *Better Outcomes, are we there yet?*

Summary of the Learning from the PEII

Prevention is focused on stopping a problem arising in the first place or preventing it from getting worse. Early intervention emphasises intervening at a young age or early on in a problem. Prevention and early intervention programmes and services can help address problems through timely intervention or at key points in a child or young person's life where there is increased vulnerability, such as school transitions and adolescence. A number of important themes and lessons that emerged from the PEII have been distilled by CES into seven key areas for change (Rochford et al., 2014). These are

listed here and elaborated upon below:

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

Supporting Parents

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

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

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

Focusing on the First Three Years of Life

International evidence indicates that prevention and early intervention investment in children from birth to three years can reap rewards, both in addressing immediate health and development needs,



and longer term capacities to thrive and develop (Allen, 2011). The learning from the PEII (Sneddon and Owens, 2012; McAvoy, Purdy, Sneddon, and Mac Evilly, 2013; Sneddon and Harris, 2013) illustrates the importance of supporting parents and children from zero to three years, with programmes in the initiative providing accessible information on child development and support in a number of areas. An infant health and wellbeing service should be delivered which integrates these supports.

Focus on Key Life Transitions

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

Cassidy, Garrity, and O’ Regan, 2012). This should include in-service and pre-service training for professionals that provides greater continuity in curricular and learning approaches for children and awareness of the need to support these transitions.

Supporting Children’s Learning

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

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

Prevention and early intervention programmes have an important role in supporting children’s learning

Given the link between disadvantage and educational outcomes, prevention and early intervention programmes

have an important role in supporting children’s learning (Sneddon and Harris, 2013). Experienced professionals should provide training and support to practitioners to implement existing early years quality standards, frameworks, curricula and programmes. Parental education programmes supporting engagement in their

child’s learning, along with those supporting socio-emotional learning and promoting inclusion should be supported within wider school structures and policies, and be clear on how they will be integrated.

Support for Professionals working with Children, Young People and Families

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

Better Interagency Work

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

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

PEII findings also highlighted the crucial role of partnership in planning and funding services with regards to tackling the costs of unresolved childhood problems across a range of agencies. Two such partnerships are the Children and Young People Services Committees (CYPSC) in Ireland, and the Children and Young People’s



Strategic Partnership (CYPSP) in Northern Ireland. These partnerships need to be fully supported as vehicles for interagency working to support children, young people and families to meet their full potential.

Community Consultation and Engagement

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

The Economic Case for Investing in Prevention and Early Intervention

The learning from the PEII also demonstrates clear economic benefits, along with improved life outcomes. Research shows that the rate of economic return on good early years' investment is significantly higher than for any other stage in the child's life, since development in children's earliest years increases the effectiveness of educational investments later in life (Heckman and Masterov, 2007). Evaluations undertaken of services and programmes should incorporate a cost-effectiveness

component, demonstrating services that produce the best value for money through optimal use of resources and achieving intended outcomes. This should include the true costs for services, such as training, resources and ongoing delivery costs.

Conducting cost-benefit analyses is also useful for interventions where initial costs for delivery may be incurred by one department/ agency and long-term savings accrued by another.

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

Conclusion

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

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

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

- Early Intervention Transformation Programme in Northern Ireland, which aims to embed early intervention approaches (DHSSPS, 2016).
- National Policy Framework for Children and Young People 2014-2020, Better Outcomes, Brighter Futures, which is

a cross-government framework for children and young people in Ireland (DCYA, 2014).

- Area Based Childhood Programme in Ireland, which is an initiative targeting investment in effective services to improve outcomes for children and families living in areas of disadvantage (CES, 2016).
- Nurture Programme for Infant Health and Well-being, which is a programme that works to improve health and wellbeing outcomes for infants and their families (CES, 2016).

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

References

- Allen, G. (2011) *Early Intervention: The Next Steps*. UK: HM Government.
- Brady, B., Canavan, J., Cassidy, A., Garrity, S. and O' Regan, C. (2012) *Mobilising Peer Support in Schools: An Evaluation of the Big Brother Big Sister School-Based Mentoring Programme*, Galway: UNESCO Child and Family Research Centre, NUI Galway.
- Centre for Effective Services (2016) *Area Based Childhood Programme*. Available online at <http://www.effectiveservices.org/work/article/area-based-childhood-programme>
- Centre for Effective Services (2016) *The Nurture Programme – Infant Health and Wellbeing*. Available online at <http://www.effectiveservices.org/work/article/nurture>
- Department of Children and Youth Affairs (2014) *Better Outcomes Brighter Futures – The National Policy Framework for Children and Young People 2014-2020*. Dublin: The Stationary Office.
- Department of Health, Social Services and Public Safety (2016) *The Early Intervention Transformation Programme*. Available online at <https://www.dhsspsni.gov.uk/articles/early-intervention-transformation-programme>
- Heckman, J. and Masterov, D. (2007) 'The Productivity Argument for Investing in Young Children', *Applied Economic Perspectives and Policy*, Vol. 29 (3), pp. 446-493.



Katherine Howard Foundation (2016) *Parenting Support Initiative*. Available online at <http://www.khf.ie/what-we-do/parenting-support-initiatives/>

McAvoy, H., Purdy, J., Sneddon, H. and Mac Evilly, C. (2013) *Prevention and Early Intervention in Children and Young People's Services – Child Health and Development*, Dublin: Centre for Effective Services.

McGuirk, N. and Kehoe, S. (2013) *Prevention and Early Intervention in Children and Young People's Services – Promoting Inclusion*. Dublin: Centre for Effective Services.

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

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

Rochford, S., Doherty, N. and Owens, S. (2014) *Prevention and Early Intervention in Children and Young People's Services: Ten years of Learning*, Dublin: Centre for Effective Services.

Sneddon, H., Kehoe, S., Harris, M., Owens, S., Sheehan, A. and Mac Evilly, C. (2012) *Prevention and Early Intervention in Children and Young People's Services – Organisational Learning*, Dublin: Centre for Effective Services.

Sneddon, H. and Owens, S. (2012) *Prevention and Early Intervention in Children and Young People's Services – Parenting*, Dublin: Centre for Effective Services.

Sneddon, H. and Harris, M. (2013) *Prevention and Early Intervention in Children and Young People's Services – Children's Learning*, Dublin: Centre for Effective Services.

Statham, J. (2011) *A Review of the International Evidence on Interagency Working, to Inform the Development of Children's Services Committees in Ireland*, Dublin: Department of Children and Youth Affairs.

Statham, J. (2013) *Prevention and Early Intervention in Children and Young People's Services – Improving Child Behaviour*, Dublin: Centre for Effective Services.

Author Information

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

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

Lorna Kerin

Introduction

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

these maternal mood disorders, adverse developmental impacts may affect in-utero brain structures (Lupien, McEwen, Gunnar and Heim, 2009), foetal development, birth outcomes (Sandman, Davis, Buss and Glynn, 2011), the attachment process and subsequent child emotional, behavioural, cognitive and mental health (O'Connor, Heron and Glover, 2002).

Given that stress, anxiety and depression affect between 10% to 28.6% of all pregnant women (Brown and Lumley, 2000; Gavin et al., 2005; Leahy-Warren, 2012), perinatal mental health constitutes a significant and urgent public health challenge with the accompanying imperative to provide appropriate prevention, early intervention and treatment support services. However in Ireland there is a massive service gap at secondary and tertiary care level, with an estimated 80% of women in Ireland having no access to specialised perinatal mental health services (HSE, 2015). There is also a striking absence at community and primary care level of prevention and early intervention perinatal mental services with a few notable pockets of good practice (Kerin, 2014; Menton, 2015). This author therefore decided to develop an action research project in 2014 in her local community of north inner-city Dublin which aimed to create a low-cost, perinatal mental health early intervention initiative and to build interagency partnership capacity to support maternal and infant mental health.

Community Based Action Research Steps

Initial action research steps included securing key stakeholders to form an

interagency steering group with whom the author conducted a focus group to analyse local perinatal mental health needs and existing resources and community assets. The group included senior management from Public Health Nursing (HSE), the Rotunda maternity hospital, the local community childcare service and the local area partnership company. An overall aim was agreed to support local, marginalised pregnant women by providing a group-based, evidence-informed programme to decrease mental health risk factors such as stress, anxiety, depression and social isolation and to increase protective factors such as emotional, peer and practical support, stress management, maternal attachment and parental self-efficacy.

An overall aim was agreed to support local, marginalised pregnant women

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

Programme Structure and Evidence Base

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

The first phase was twelve weekly facilitated sessions of integrated pregnancy yoga classes to reduce anxiety and depression (Newham, Wittkowski, Hurley, Aplin, and Westwood, 2014). It is important to note that it was 'integrated yoga', which includes physical postures, breathing practises, meditation and yogic philosophy, and not the solely



physical exercise based yoga, that has been evidenced to significantly reduce depression (Gong, Ni, Shen, Wu and Jiang, 2015). The second phase consisted of ten weekly facilitated sessions of mama baby yoga and infant massage to reduce stress and postnatal depression and to enhance mother-baby attachment and mental health outcomes (Onozawa, Glover, Adams, Modi and Chinni Kumar, 2001). The third phase was eight weekly sessions of the 'Incredible Years Parents and Baby' programme (Webster-Stratton, 2011) to develop parental sensitivity efficacy and confidence (Jones, Hutchings, Erjavec and Vikator, 2014).

Referrals and Participation

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

Persistent and repeated coordination efforts resulted in the referral, engagement and retention of participants who were experiencing significant mental health distress

Research Methodology

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

Research limitations included the lack of pre-intervention measures as implementation challenges rendered data collection unfeasible at the pre-intervention stage. There was also potential for research bias as the author delivered the first intervention phases of pre-natal yoga, co-delivered the third intervention phase of the parenting programme, and gathered and analysed post intervention data. An anonymised online survey was offered to reduce research bias but six of the twelve participants did not complete this survey due to language, literacy and internet access issues. However, all twelve participants' views were recorded in the weekly end of session feedback sheets and in the two focus groups.

Research Ethics

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

Evaluation Outcomes

Reduced Prenatal Psychological Stress and Increased Emotional Support

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

Participants in the focus groups reported that the emotional and peer support in the group reduced their mental health distress in different ways. For example, one woman disclosed that her struggle with prenatal depression made her

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



worry that she should give her baby up for adoption but that coming each week and ‘having the opportunity to share how I was feeling with a group of people who listened and cared made a huge difference to me’. (Focus group participant 3). Another mother, struggling with depression due to social isolation, said that group had become her ‘family’ over the last year and she intends keeping in contact with the other women. (Focus group participant 5). All participants surveyed stated they would ‘highly recommend’ the integrated perinatal yoga programme to other pregnant women (Survey 1, q.10).



Young mother, baby and grandmother enjoying the supportive group atmosphere

Increased Referrals to Support Services Where Available

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

Participant Progression onto a Structured Parenting Programme

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

Increased Maternal Knowledge of Baby Development Techniques

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



Author demonstrating visual stimulation and eye tracking during a programme session

Improved mother baby attachment

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



Mother enjoying practising responsive communication with her baby

Increased interagency collaboration

Following the successful initial year of coordination, programme delivery and participant outcomes, the local interagency group agreed to build on collaboration efforts. Philanthropic funds were secured from the Parenting Support Initiative to deliver a subsequent second year of the programme.



The local public health nurse presents a programme graduation certificate to a proud mother and her family

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

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

References

- Brown, S. and Lumley, J. (2000) Physical Health Problems after Childbirth and Maternal Depression at Six to Seven Months Postpartum, *BJOG: An International Journal of Obstetrics and Gynaecology*, Vol. 107, pp. 1194–1201.
- Curt A. Sandman, E.P. Davis, Buss, C., and Glynn, L.M. (2011) Prenatal Programming of Human Neurological Function, *International Journal of Peptides*, Vol. 2011, pp.1-9.
- Department of Children and Youth Affairs (2014) *Better Outcomes, Brighter Futures: The National Policy Framework for Children and Young People 2014 – 2020*, Dublin: Government of Ireland Stationary Office.
- Department of Health (2013) *Healthy Ireland - a Framework for Improved Health and Wellbeing 2013 – 2025*, Dublin: Government of Ireland Stationary Office.
- Department of Health (2016) *Creating a Future Together: National Maternity Strategy 2016-2026*, Dublin: Government of Ireland Stationary Office.
- Eliot, L. (2001) *Early Intelligence: How the Brain and Mind Develop in the First Five Years of Life*. London: Penguin Books.
- Fox, S. E., Levitt, P. and Nelson III, C. A. (2010), How the Timing and Quality of Early Experiences Influence the Development of Brain Architecture, *Child Development*, Vol. 81:pp. 28–40.
- Gavin, N., Gaynes, B., Lohr, K., Meltzer-Brody, S., Gartlehner, G. and Swinson, T. (2005) Perinatal Depression: a Systematic Review of Prevalence and Incidence, *Journal of Obstetrics and Gynecology*, Issue 106, pp. 1071-83.
- Gong, H., Ni, C., Shen, X., Wu, T. and Jiang, C. (2015) Yoga for Prenatal Depression: A Systematic Review and Meta-analysis. *BMC Psychiatry*, Vol.15 (1)14.
- Heron, J., O'Connor, T., Evans, J., Golding, J. and Glover, V. (2004) The Course of Anxiety and Depression through Pregnancy and the Postpartum in a Community Sample, *Journal of Affective Disorder*, Vol. 80, pp. 65-73.
- HSE (2015) *An Enhanced Partnership Approach towards Improving the Detection, the Assessment and the Care Management for Women with Mental Health Issues during Pregnancy and Post-natally. Advanced Nurse Practitioner in Perinatal Mental Health ANP/ PMH – Waterford/Wexford Mental Health Services*. Available online at <http://www.hse.ie/eng/about/Who/clinical/integratedcare/conference/MatMentalHealth.pdf>

Jones, C., Hutchings, J., Erjavec, M., and Vikator, S. (2014) Outcomes of the Pilot Study of the Incredible Years Parent and Babies Group Based Program, *Infant Mental Health Journal*. Supplement to Vol 35, Issue 3.

Kerin, L. (2014). *National and International Good Practice in the Provision of Child and Adolescent Mental Health Services*. Mental Health Reform. Available online at http://www.childrensmentalhealth.ie/wp-content/uploads/2015/03/Literature-Review-on-Child-and-Adolescent-Mental-Health-Services-and-Supports_-26.11.14.pdf

Knickmeyer, R., Gouttard, S., Kang, C., Evans, D., Wilber, K., Keith Smith, J., Hamer, R., Lin, W., Greir G. and Gilmore, J. (2008) A Structural MRI study of human brain development from birth to 2 years. *Journal of Neuroscience*, Vol 28(47), pp. 12176–12182.

Menton, A. (2015) *Perinatal and Infant Mental Health: Draft Position Paper and Recommendations*. The Psychological Society of Ireland (PSI) Perinatal and Infant Mental Health Special Interest Group (SIG). Available online at http://www.psihq.ie/page/file_dwn/222/Draft%20Position%20Paper%20PIMHSIG.pdf

Milgrom, J. and Gemmill, A. (2015) *Discussion Paper: Comments on Victoria's next 10 year mental health strategy*. Parent-Infant Research Institute (Piri), Melbourne, Australia. Available online at http://www.mentalhealthplan.vic.gov.au/application/files/7414/4238/5009/Comment_from_The_Parent-Infant_Research_Institute.pdf

Leahy-Warren, P. and McCarthy, G. (2011) Postnatal Depression in First-time mothers: Prevalence and Relationships between Functional and Structural Social Support at 6 and 12 Weeks Postpartum. *Archives of Psychiatric Nursing*, Vol.25, (3), pp. 174-184.

Lupien, S., McEwen, B., Gunnar, M. and Heim, C. (2009) Effects of Stress throughout the Lifespan on the Brain, Behaviour and Cognition, *Nature Reviews Neuroscience* 10, pp.434-445.

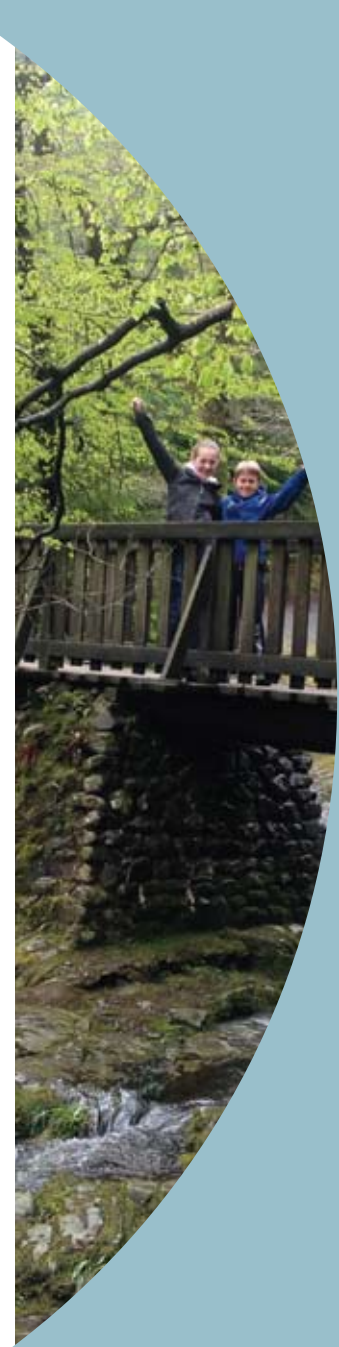
Minkler, M. and Wallerstein, N. (2003) *Community-Based Participatory Research for Health*. San Francisco, CA: Jossey-Bass Inc.

Newham, J. J., Wittkowski, A., Hurley, J., Aplin, J. and Westwood, M. (2014) Effects of Antenatal Yoga on Maternal Anxiety And Depression: A Randomized Controlled Trial, *Depression and Anxiety*, Vol. 31, pp. 631–640.

O'Connor, TG. Heron, J., Glover, V. and the Alspac Study Team (2002) Antenatal Anxiety Predicts Child Behavioral/Emotional Problems Independently of Postnatal Depression. *Journal of the American Academy of Child and Adolescent Psychiatry*. Vol 41 (12), pp: 1470-1477.

Onozawa, K., Glover, V., Adams, D., Modi, N., and Kumar RC. (2001) Infant Massage Improves Mother-infant Interaction for Mothers with Postnatal Depression, *Journal of Affective Disorders*. Vol. 63(1-3), pp. 201-207.

Sandman CA, Davis EP, Buss C and Glynn LM. (2011) Exposure to Prenatal Psychobiological Stress Exerts Programming Influences on the Mother and Her Fetus, *Neuroendocrinology* Vol 95 (1), pp. 7-21.



Scottish Intercollegiate Guidelines Network (2012). *Management of Perinatal Mood Disorders*. Edinburgh: *Guideline 127, SIGN*. Available online at: <http://www.sign.ac.uk/guidelines/fulltext/127/index.html>

Lee, E. W., Denison, F. C., Hor, K., and Reynolds, R. M. (2016) Web-based Interventions for Prevention and Treatment of Perinatal Mood Disorders: A Systematic Review, *BMC Pregnancy and Childbirth*, Vol 16 (38). Available online at: <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC4770541/>

O'Hara, M., Wisner, K., Asher, N. and Asher H. (2014) Perinatal Mental Illness: Definition, Description and Aetiology, *Best Practice and Research Clinical Obstetrics and Gynecology*, Volume 28, Issue 1, pp. 3-12.

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Working in Partnership to Improve Outcomes for Children

Pauline McClenaghan

Introduction

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

International research shows that the quality of parenting, the level of attachment between parent and child and the home learning environment are all critical to child development (Moran, Ghate and van der Merwe, 2004; Abbot and Langston, 2005; Evans 2006; Flett, 2007). The evidence confirms that compromised parenting is a serious child development risk factor that can be replicated from generation to generation, bringing the children of the same families into the care system. But the research also shows that parents can learn new parenting techniques, insights into how young children develop and learn can affect how people parent and good parenting can reduce the effects of factors with the potential to negatively impact on child

outcomes (Desforges and Abouchaar, 2003). Developing the optimal conditions for early childhood development, therefore, involves supporting good at-home parenting and the pedagogical role of parents (Melhuish, Phan, Sylva, Sammons, Siraj-Blatchford and Taggard, 2008).

Effective intervention requires sustained one-to-one support

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

Lifestart Foundation Evidence-base

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

The expert designed 'Growing Child' has been empirically tested in Ireland (NI and ROI) through a fully scientific Randomised Controlled Trial (RCT) (2008-2015) based on a rigorous experimental design (Miller and Dunne 2015). The RCT,



involving 848 parents and children, proved conclusively that the Lifestart programme works as predicted, producing statistically significant positive outcomes for parents and improved outcomes for children. Parents who received the Lifestart programme were found to be less stressed, had greater knowledge of child development, demonstrated higher levels of parenting efficacy, were more confident around child discipline and boundary setting, reported better parenting mood and increased feelings of attachment and felt less restricted in their parenting role. Effect sizes ranged from 0.21 to 0.27.

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

The Lifestart Foundation's best practice model includes:

- A proven theory of change/ logic model
- Operations, training, Practitioner, resource manuals
- Research-based programme materials
- Professional staff training
- Outcomes focused referral, reporting systems

Improvements in parent outcomes mediated changes in child outcomes and the positive effects are expected to accumulate over the children's life course

- Rigorous quality assurance procedures, fidelity measures
- Robust impact measures, evaluation methodologies
- Flexible fidelity at the point of delivery
- Franchise model of service licensing enabling voluntary and statutory service providers to deliver the 'Growing Child' programme through their own staffing resources
- Experienced programme delivery support team.

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

Working in partnership

Lifestart practice has always aimed to reflect the needs of parents and children and of service commissioners. In 2011 we began working more formally and directly in collaboration with the Health Service Executive's social work and family support staff (now TUSLA), with public health nurses, health promotion staff and other health and social care professionals to provide an integrated and effective parenting support service to vulnerable families and first-time parents. With our ROI statutory

partners we worked to integrate Lifestart practice more closely with statutory child protection and family support services, while retaining the core principles and values embedded in the Lifestart approach. We refined our referral, reporting and implementation policies and procedures and outcomes measures to explicitly reflect the full range of our partners' needs.

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

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

Issues in Partnership Practice

Our closer integration into state family support structures has had important implications for how we conduct our work, not least the shift from universal to targeted provision, and how we meet the expectations of parents and of our statutory partners, in the face of the increased demands an integrated



approach places on Lifestart staff. We are now operating in a more complex set of relations influenced by different discourses and meaning systems, governed by different forms of authority and legitimacy and structured by differences in perceived status and power. Raising awareness and improving understanding of how we work with parents, what we aim to achieve and the contribution we are making to the day-to-day work of our professional partners is an on-going and demanding task.

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

Establishing and managing good family-centred communications is key to an effective integrated approach to parenting support

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

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

References

Abbot, A and Langston, A (eds) (2005) *Birth to Three Matters – Supporting the Framework of Effective Practice*, Maidenhead, UK: Open University Press.

Davis, F.A, McDonald, L. and Axford, N. (August 2012) *'Technique is Not Enough (TINE) A framework for Ensuring that Evidence-based Parenting Programmes are Socially Inclusive'* Discussion Paper, Professional Practice Board, The British Psychological Society.

Desforges, C with Abouchaar, A (2003) *The Impact of Parental Involvement, Parental Support and Family Education on Pupil Achievements and Adjustment: A Literature Review*, Department of Education and Skills, Research Report RR433, Queen's Printer.

Evans, Judith, L. (2006) *Parenting Programmes: An Important ECD Intervention Strategy*. Paper commissioned for the EFA Global Monitoring Report 2007, Strong Foundations: Early Childhood Care and Education, United Nations, Education, Scientific and Cultural Organization.

Flett, M (2007) Supporting mothers, Enriching the Learning Environment for Young Children, *Early Child Matters*, June No. 109, pp 45-50, The Netherlands: Bernard van Leer Foundation.

Miller, S. and Dunne, L. (2015) *A Randomised Controlled Trial Evaluation of the Lifestart Parenting Programme, Technical Report*, School of Education, Centre for Effective Education, Queens University Belfast.

Melhuish, E.C, Phan, M.B, Sylva, K, Sammons, R, Siraj-Blatchford, I and Taggard, B (2008) Effects of the Home Learning Environment and Preschool Center Experience upon Literacy and Numeracy Development in Early Primary School, *Journal of Social Studies*, Vol. 64 (1), pp. 95-114, Blackwell Publishing: Oxford.

Moran, P, Ghate, D and van der Merwe, A (2004) *What Works in Parenting Support a Review of the International Evidence*, Department of Education and Skills Research Report RR574.

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The Role of the Parent Child Home Programme in Supporting Better Outcomes in Education and Learning

Gráinne Kent, Josephine Bleach
and Beth Fagan

Introduction

Parent Child Home Programme (PCHP) is one of the programmes offered by the Early Learning Initiative (ELI), National College of Ireland (NCI), which aims to address educational disadvantage and improve outcomes for children and their families. This article outlines the role PCHP plays in supporting parents' interaction with their children and improving the home learning environment. Through presenting the rationale, methodology and outcomes of PCHP, the authors will demonstrate how PCHP is supporting better outcomes in education and learning across the Dublin Docklands.¹

The Early Learning Initiative

The ELI is a community-based educational initiative, which provides an integrated programme of training and supports for children, their parents and families, and educators from early years up to third level. It operates as a partnership with all relevant parties committed to improving outcomes for children and young people at home, in school and throughout the community

(Bleach 2010). Action research (Senge and Scharmer, 2001; Bleach, 2013) is used to enable the local community to shape the development of ELI's programmes. Central to this approach is the belief that early intervention and a supportive home learning environment is critical to children's outcomes.

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

The initial survey of need conducted for the ELI by the Dartington Social Research Unit (2006) found that while local parents had high aspirations for their children, they did not feel confident in supporting their children's educational progression. As a result, the ELI has focused on helping parents to develop their children's social, language and thinking skills from an early

¹ This area contains significant clusters of high deprivation, which are masked by the extreme influx of largely affluent professionals in the wake of the inner city's gentrification (Haase, 2008). The level of educational disadvantage appears more acute as it co-exists with modern knowledge sectors, which attract the most highly educated people (DCC, 2013).



age; thereby ensuring that children enter school ready to learn, with the skills they need to be successful.

Rationale

Of all ELI's programmes, PCHP has the most influence on parenting skills and the home learning environment. Originally developed in the US in 1965, PCHP is an innovative home based literacy and parenting programme which aims to strengthen families and prepare students to succeed academically

(ELI, 2015). Through twice weekly home visits over a two year period, the Home Visitor models for the parents how to talk, read and play with their children. The parents are encouraged to continue these activities between visits.

PCHP is a targeted programme and the PCHP Coordinators work closely with the local Public Health Nurses and other statutory agencies to identify the children aged eighteen months to three years who are most in need. Priority is given to families where children have developmental delays; where there is little interaction between children and parents and where parents have low levels of education. The programme is only offered to one child per family as the benefits of the programme are likely to extend to all children in the family. All the Home Visitors are local women who are employed and trained by NCI. There is no requirement for Home Visitors to be mothers themselves.

Methodology

From 2007-15, 584 children and their families have taken part in PCHP in the Docklands. Over 20,000 home visits have taken place with an average of forty-six visits per family per year. At present there are over 100 families and twenty-five Home Visitors involved in PCHP. Central to the delivery of PCHP is Aistear (NCCA, 2009) and SÍolta (CECDE, 2006), the Irish National Curriculum and Quality Frameworks. Aistear shapes the pedagogy

used by the Home Visitors in their interactions with children and parents, while SÍolta informs the quality of the service PCHP provides to families.

A non-directive, modelling approach is used by the Home Visitors (Fagan, 2011). By following the

children's lead and using open-ended questions, the Home Visitors encourage the children to exercise choice and to become active participants in their own learning. High quality, open-ended materials, which cover the themes and learning goals in Aistear, are used. Promoting parents as their children's first and most important teachers is the cornerstone of the PCHP model with parental involvement encouraged at each visit. This helps the parents to develop the understanding and skills needed to continue the learning activities between visits and long after they have finished the programme.

Outcomes

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

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

Annual internal evaluations of PCHP, completed by the parents in line with our action research methodology, show that parents have a high degree of satisfaction with the programme (ELI, 2015). Veerman and van Yperen (2007) suggested that a programme can be considered successful when ninety five per cent of the clients are satisfied with the service received and ninety per cent of the goals of a programme are attained. From 2008-2015, ninety nine per cent of PCHP parents found the programme useful, while one hundred per cent felt supported by their Home Visitor.

Analysis of the open



questions highlighted that parents felt that their children's language, literacy and numeracy skills had improved, with ninety eight per cent of parents feeling confident in using strategies for reading and playing with their children.

Internal assessments completed on the PCHP children by the Home

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

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

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

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

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

Conclusion

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

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

References

- Allen, L., Sethi, A., and Astuto, J. (2007) An Evaluation of Graduates of a Toddlerhood Home Visiting Program at Kindergarten Age, *NHSA Dialog: A Research-to-Practice Journal for the Early Intervention Field*, Vol. 10(1), pp. 36–57.
- Bleach, M.J. (2010) *Parental Involvement in Primary Education in Primary Education in Ireland*, Dublin: Liffey Press.
- Bleach, M. J. (2013) Improving Educational Aspirations and Outcomes Through Community Action Research, *Educational Action Research*, Vol. 21 (2), pp. 253-266.
- Centre for Early Childhood Development and Education (2006a) *Síolta: The National Quality Framework for Early Childhood Education Handbook*, Dublin: CECDE.
- Dartington Social Research Unit (2006) *National College of Ireland Early Learning for Children in North Docklands: Report of Findings*, Dublin: National College of Ireland (unpublished).
- Dublin City Council, (2013) *North Lotts and Grand Canal Dock. Draft Planning Scheme 2013*, Dublin: Dublin City Council.
- Early Learning Initiative (2014) *Annual Report 2013-14*. Available online at <https://www.ncirl.ie/Portals/0/Users/030/30/30/ELI%20End-of-year%20Report%20%202014-15%20Summary.pdf>
- Early Learning Initiative (2015) *Annual Report 2014-15*. Available online at <https://www.ncirl.ie/Portals/0/Users/030/30/30/ELI%20End-of-Year%20Report%20%202014-15%20Summary.pdf>
- Fagan, B. (2011) Parent Child Home Programme (PHCP). In: *Childhood Unfolding, World Organisations for Early Childhood Education (OMEP) Ireland Annual Research Conference*, 2nd April 2011 Cork.
- Growing Up in Ireland (2012) *Influences on 9-Year-Olds' Learning: Home, School and Community Report 3*, Dublin: Growing Up in Ireland.
- Hart, B. and Risley, T.R. (1995) *Meaningful differences in the everyday experiences of young American children*, Baltimore: P.H. Brookes.
- Haase, T. (2008) *Key Profile for Dublin Inner City*. Available online at <https://www.pobal.ie/WhatWeDo/Deprivation/Publications/1.1.02%20Area%20Profile%20-%20Dublin%20Inner%20City%20report.pdf>
- Knickebein, B. (2005) *The Parent-Child Home Program Final Report*, Center for Educational and Program Evaluation, Department of Educational and School Psychology, Indiana University of Pennsylvania.
- Levenstein, P., Levenstein, S., Shiminski, J. A., and Stolzberg, J. E. (1998) Long-term Impact of a Verbal Interaction Program for At-risk Toddlers: An Exploratory Study of High School Outcomes in a Replication of the Mother-Child Home Program, *Journal of Applied Developmental Psychology*, Vol. 19, pp. 267-285.



Mann, V., Sandoval, M., Garcia, L., and Calderon, D. (2009) Using Spanish in the Home to Promote School Readiness in English. In A. Harrison (ed.), *Speech Disorders: Causes, Treatment and Social Effects*, USA: Nova Science Publishers, Inc. (Santa Anna Evaluation), pp. 97-118.

National Council for Curriculum and Assessment (2009) *Aistear. The Early Childhood Curriculum Framework*, Dublin: NCCA.

ORS Impact (2016) *Long-Term Academic Outcomes of Participation in the Parent-Child Home Program in King County*, WA. Available online at <http://www.uwkc.org/wp-content/uploads/2016/02/Long-Term-Outcomes-PCHP-2-10-16.pdf>

Organizational Research Services (2010) *Evaluation of the Parent-Child Home Program/Play and Learn Group Demonstration Project 2005-2010: Final Report*, Seattle: Business Partnership for Early Learning.

Senge, P. and Scharmer, O. (2001) Community Action Research. Learning as a Community of Practitioners, Consultants and Researchers. In Reason, P. and Bradbury, H. [Eds.] (2001). *Handbook of Action Research, Participative Inquiry and Practice*, London: Sage, pp. 238-249.

Share, M., Doyle, E., Callahan, A., Greene, S., Wachtler, M. and Boyd, E. (2011). *Baseline Evaluation of the Dublin Docklands Parent Child Home Programme (PCHP)*, Dublin: Children's Research Centre, Trinity College (unpublished).

Veerman, J.W. and van Yperen, T.A. (2007) Degrees of freedom and degrees of certainty: a developmental model for the establishment of evidence-based youth care, *Evaluation and Program Planning*, Vol. 20, pp. 212-21.

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

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

Introduction

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

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

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

Part of the Preparing for Life (Prevention and Early Intervention Project), Northside Partnership.



Improving outcomes for children is a central focus of national policy for children (DHC, 2007; Ireland, 2014; DCYA, 2015). To achieve better outcomes, it is essential to ensure that children have quality early learning opportunities (Hayes, 2015).

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

International research suggests that EYEs are not confident in talking about their practice or analysing and critically evaluating the impact of their practice on young children. In a study of pedagogical effectiveness in early learning Moyles and her colleagues (2002) found that the ability to articulate and reflect on practice was related to the level of training and the ‘ethos within settings, which positively promotes self-evaluation and reflection and adopts strategies for developing these’ (p.130). This suggests that setting-based teamwork and pedagogical leadership are important to sustaining and enhancing the quality of practice in early years settings.

The SFL project works directly with EYEs, within and across settings, to enhance the quality of early education practice and the early learning experiences of the children attending. To achieve this the SFL model provides a quality Continuing Professional Development (CPD) support programme through workshops, coaching and mentoring, on-site speech and language support for each setting and transition support for the early years settings. SFL was designed as a two-year project with a team of three and was built around the animation of Aistear (NCCA, 2009) in practice.

The ability to articulate and reflect on practice was related to the level of training and the ‘ethos within settings, which positively promotes self-evaluation and reflection and adopts strategies for developing these’

Early in the intervention it was decided that the project should include an evaluative component. The lead author was invited to become part of the team as an embedded evaluator, one who works with the team and the initiative, recognising that evaluation is ‘a process that involves making practice visible

and thus subject to reflection, dialogue and argumentation’ (Dahlberg et al, 2007, p. ix).

The aim of the programme was to facilitate EYEs to:

- Engage with children as active, unique and competent participants in their early education
- Improve curriculum, to create enriching experiences for children, drawing on Aistear, the Early Childhood Curriculum Framework;
- Develop reflective quality practice within their teams;

- Actively promote and enhance language development among children;
- Make children’s learning visible to parents;
- Facilitate a successful transition to school, for the children in their care.

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

Findings

SFL Learning Environments

Learning and developing through play was regarded by the SFL team as a natural starting point for engagement with EYEs for a number of reasons.

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

The team worked with eight settings, thirteen rooms, forty-six staff and 251 children. Group meetings were followed by one-to-one on site mentoring. Educators were enabled to consider and reflect on their role in creating, maintaining and designing the learning environment.



Settings were encouraged to include layout adjustments and source free, open-ended or recycled resources that would support children's learning and development. SFL provided a small equipment grant to each setting.

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

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

The linking of the Aistear Framework with the High Scope curriculum and how important it is to encourage the development of the whole child (EYE)

A better understanding of Aistear. When changing the room discuss the change with children (EYE)

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

Speech and Language Support

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

Expanding on the Aistear theme of Communicating the Hanen- Learning Language and Loving It™ - programme was used to provide educators with practical strategies to support and stimulate language, literacy and social skills in children.

Two groups of educators

(n=28) from seven settings providing the Free Pre School Year (FPSY) participated. The programme is based on the premise that purposeful teaching and learning occurs when practitioners' own understanding and knowledge informs their practice. Learning and practice were regularly examined from the perspective of the educators through discussion, observation and feedback.

Early baseline data gathered in settings identified the prominence of phatic communication in settings. Phatic communication is communication directed at being social, a form of politeness such as passing inquiries/comments about health, weather or behaviour. While important for general social cohesion it does little to extend or expand the language of young children. Awareness of this cultural use of phatic questions was used as a catalyst for encouraging reflective practice and improving communication with children.

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

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

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

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

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



Participants discussed the positive effects of child-led interactions and described how this helped them plan for children's learning individually or with their team. Setting-based observations and video clips taken before and after this element of the programme found enhanced self-awareness and improved pedagogical practice.

Conclusion

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

References

Bronfenbrenner, U., and Morris, P. A. (2006) The Bio-ecological Model of Human Development. In W. Damon and R. M. Lerner (Eds.) *Handbook of child psychology, Vol. 1: Theoretical Models of Human Development* (6 edition) New York: John Wiley 793-828.

Dahlberg, G., P. Moss and A. Pence (2007), *Beyond Quality in Early Childhood Education and Care: Languages of Evaluation*, (2 edition), London: Falmer Press.

Department of Children and Youth Affairs (2015) *Report of Inter-Departmental Working group: Future Investment in Childcare in Ireland* Dublin: Government Stationery Office.

Department of Health and Children (2007) *The Agenda for Children's Services* Dublin: Government Stationery Office.

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

Hayes, N. (2007) *The Role of Early Childhood Care and Education from An Anti-poverty Perspective*. Dublin: Combat Poverty Agency.

Hayes, N. and Bradley, S. (2009) *Right by Children: Children's Rights and Rights-based Approaches to Policy Making in Early Childhood Education and Care*, Dublin: CSER/DIT.

Hayes, N. (2015) Troubling Outcomes: A Challenge for Early Childhood Education *An Leabhbh Óg-OMEP Ireland Journal of Education Studies*, Vol. 9.

Ireland (2014) *Better Outcomes: Brighter Futures. The National Policy Framework for Children and Young People 2014-2020* Dublin: Government Stationery Office

Moyles, J., Adams, S. and Musgrove, A. (2002) *SPEEL: Study of Pedagogical Effectiveness in Early Learning*, London: Department for Education and Skills.

National Council for Curriculum and Assessment (2009) *Aistear, the Early Childhood Curriculum Framework*, Dublin: NCCA.

Siraj-Blatchford, I., Sylva, K., Muttock, S., Gilden, R. and Bell, D. (2002) *Researching Effective Pedagogy in the Early Years*, London: Department of Education and Skills.

Sylva, K., Melhuish, E., Sammons, P., Siraj-Blatchford, I. and Taggart, B. (2012) *The Effect of Starting Pre-school at Age 2 on Long Term Academic and Social-behavioural Outcomes in Year 6 for More Deprived Children: Analyses Conducted for the Strategy Unit*, London: Institute Of Education/Dept. for Education

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Where are we going? Looking for a Road Map in Supporting Literacy Development for Children With Autism

Carol Ann O'Sioráin

Autism Provision

Ireland is actively responding to the growing identification of pupils with autism in early years and primary education. In September 2015 an additional 149 autism specific classrooms attached to mainstream schools were established. McCoy, Banks, Frawley, Watson, Shevlin and Smyth (2014) suggest that 60% of all special education class provision in Ireland is specifically allocated to autism intervention. In a review of evidenced best practice, Parsons, Guldberg, MacLeod, Jones, Prunty and Balfe (2009) identified a dearth of knowledge in the learning experiences and outcomes for pupils enrolled in these units. McCoy et al. (2014) suggests a tokenism towards the ideology of inclusion as they raise concerns that pupils assigned to specialist classes were found to have little interaction with their non-disabled peers. In response to this growth in special education provision, Ireland has established major policy frameworks and legislation to provide direction and enhance the inclusion of children with special educational needs including autism in mainstream settings (Department of Children and Youth Affairs,

2014). Guldberg (2010) in a review of literature on 'best autism practice' in the early years suggests a 'transactional approach' to inclusion. She advocates a need for environments, personnel and curricula to be flexible and accommodating stating that learning happens for pupils with autism through a process of 'transactions between individuals' (Guldberg, 2010, p. 169). Lanter (2009) adds concerns that there remains a significant lack of research, internationally, on the literacy skills building of pupils with autism. This article presents some of the preliminary results of a study of the literacy skill development of children with autism in Irish mainstream, primary schools.

Policy on Literacy Skills Development

Policy has also focused on literacy skills development among Ireland's 'literate and non-literate' population (DES, 2011). Assessment results from the Organisation of Economic Co-operation and Development (OECD) and national examinations has influenced and driven policy to ensure a more literate workforce. Within this policy framework is the definition of 'literacy'; 'the capacity to read, understand and critically appreciate various forms of communication including spoken language, printed text, broadcast media, and digital media' (DES, 2011, p. 8). The policy draws attention to the development of literacy skills for children and young people with special educational needs. This suggests that there is a real knowledge and understanding of the standards of literacy capabilities among

Standardised assessments do not reflect what the learners with autism know or are capable of

this population of learners. Children with autism may experience language impairment such as delayed language development, limited language ability or diminished language use; and according to Lanter, Watson, Erickson, and Freeman (2012) this presents difficulties in social communication. Chandler-Olcott and Kluth (2009) highlight that standardised assessments do not reflect what the learners with autism know or are capable of; but teachers who observe and take note, do reflect on their learners' abilities and can relate a more knowledgeable analysis of that ability. While quantitative research is plentiful on programme efficacy and models of best practice, there is little research to provide evidence of curriculum and assessment, pedagogy, school and classroom organisation, the use of resources and assessments and how they relate to literacy practices and outcomes for pupils with autism. Concerns have been raised as to the adequacy of educational provision and the quality of teaching and learning within these autism specific classrooms (Jones and Jordan, 2008).

Method

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

Semi-structured interviews provided person-to-person interactions and offered the participants with an opportunity to relate their understanding/ experiences in a narrative form.



Interview questions were set to draw on the relevant personal and professional experiences of the participants. Two ‘exhibit questions’ (Stake, 2010, p.97) were included in both sets of interviews, ‘what is autism? And ‘what is literacy?’ These questions allowed for a more focused response and were essential to the research objective.

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

Research Scope and Participants

Research Scope					
Schools	Pupils	Parents	Primary Teachers	Classroom Observations	Duration Of Material Gathering
n = 7 primary schools	n =27 boys n =7 girls	n =21 mothers n =3 fathers	n =15 female n = 0 males	n =168 hours	November 2014 to May 2015

Table 1.1 Research Scope

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

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

Emerging Research Findings

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

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

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

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

Further teacher training is needed to support an exploration and understanding of some echolalic behaviours as a communicative intent. Prizant and Fields-Meyer (2015)



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

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

Discussion

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

autism, greater attention is needed to the professional development of the teachers and staff within these units.

References

Burton, N., Brundrett, M., and Jones, M. (2014) *Doing Your Education Research Project*. London: Sage.

Chandler-Olcott, K., and Kluth, P. (2009) *Why Everyone Benefits from including Students with Autism in Literacy Classrooms. The Reading Teacher*, 62(7), 548-557. Available online at: <http://www.jstor.org/stable/20464465>

Crotty, M. (1998) *The Foundations of Social Research*. London: Sage Publication.

Department of Children and Youth Affairs (2014) *Better Outcomes, Brighter Futures: The National Policy Framework for Children and Young People*. Dublin: Government Offices. Available online at <http://www.dcy.gov.ie/viewdoc.asp?DocID=2192>

Department of Education and Skills (2011) *Literacy and numeracy for Learning and Life: the National Strategy to Improve Literacy and Numeracy among Children and Young People*. Dublin: Department Of Education and Skills.

HighScope Educational Research Foundation and International Association for Evaluation of Educational Achievement (IEA) (2007a) *IEA Preprimary Project: Child Activities Observation System*. Michigan, HighScope Educational Research Foundation

HighScope Educational Research Foundation and International Association for Evaluation of Educational Achievement (IEA) (2007b) *IEA Preprimary Project: Adult Behaviour Observation System*. Michigan, HighScope Educational Research Foundation.

Guldborg, K. (2010) Educating Children on The Autism Spectrum: Preconditions For Inclusion And Notions Of ‘Best Autism Practice’. In *Early Years. British Journal of Special Education*, 37(4), 168-174.

Janzen, J. (1996) *Understanding The Nature Of Autism: A Practical Guide*. Texas: Therapy Skill Builders.

Jones, G., E, and Jordan, R. (2008) Research Base for Intervention in Autistic Spectrum Disorders. In E. McGregor, M. Nunez, K. Cebula, and J. Gomez, C (Eds.), *Autism, an Integrated View from Neurocognitive, Clinical and Intervention Research*. Oxford: Blackwell Publishing.

Lanter, E. (2009) *Emergent Literacy Development in Children With Autism Spectrum Disorder*. (PhD in Speech and Hearing Sciences), University Of North Carolina, Chapel Hill.

Lanter, E., Watson, L., Erickson, K. A., and Freeman, D. (2012) Emergent Literacy in Children with Autism: An Exploration of Developmental and Contextual Dynamic Processes. *Language Speech and Hearing Services in Schools*, 43(July), 308-324.

McCoy, S., Banks, J., Frawley, D., Watson, D., Shevlin, M., and Smyth, F. (2014) *Understanding Special Class Provision in Ireland: Phase 1, Findings from a National Survey of Schools* (16). Available online at <http://www.ncse.ie>

Parsons, S., Gulberg, K., MacLeod, A., Jones, G., Prunty, A., and Balfe, T. (2009) *International Review of Literature of Evidence of Best Practice Provision in Education of Persons With Autistic Spectrum Disorders* (2). Available online at <http://www.ncse.ie>

Prizant, B. M., and Fields-Meyer, T. (2015) *Uniquely Human: A Different Way of Seeing Autism*. London: Simon and Schuster.

Staines, A., and Sweeney, M. (2013) *Autism Counts: an Irish Autism Action-Funded Research Project*. Available online at <http://www4.dcu.ie/marketing/staffnews/2013/jul/irishautism.shtml>

Stake, R. (2010) *Qualitative Research: Studying how Things Work*. New York: The Guilford Press.

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

Patricia Mc Carthy

Introduction

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

This article concentrates on limited aspects of the overall study by focusing on the teaching and learning of Mathematics and

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

Overview of pertinent literature

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

Spungin and Ferrell (2007) argue that vision impaired students have the same curricular needs as all students, but due to vision impairment can experience difficulties when the usual methods of teaching and learning are utilised. The teaching and learning of mathematics has been identified as posing particular challenges for blind/vision

impaired young people (Cahill, Linehan, McCarthy, Bormans, and Engelen, 1996; AHEAD, 2008; Twomey and O'Grady, 2012). This is significant as mathematics is a required subject for entry to the vast majority of programmes at Third Level (McCarthy, 2015). The presentation of mathematics is generally visual, two-dimensional, and nonlinear in nature (Cahill and Linehan, 1996). This can impose additional access barriers for blind/vision impaired people. Confusion with Braille notation and, the fact that the majority of Mathematics teachers do not know Braille mathematics notation (Karshmer and Bledsoe, 2002) also contribute to the challenges experienced by this student cohort.

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

Assistive technology is generally "reactive in design"

Methodology

In Ireland there has been a dearth of research conducted involving blind/vision impaired people as primary participants (AHEAD, 2008; McCarthy, 2013). This paucity has resulted in legislation that has not generally been informed by the lived experiences of this section of the population. This research was qualitative in nature with a life history approach utilised for data gathering purposes. It was hoped that this approach would ensure the voices of participants "were captured by the research process in ways



that reflect their views and recognize them as active social agents” (Shah, 2006, p. 207). In-depth unstructured and semi-structured interviews were conducted with twenty three blind/vision impaired people (fourteen male nine female), ranging in age from late teens to early forties. Recruitment of participants was largely through voluntary response to research publicity. Information regarding the research was disseminated to all universities, six Institutes of technology, a number of service providers, a resourced mainstream post-primary school and to blind/vision impaired people known to the researcher.

Findings

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

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

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

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

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

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

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

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

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

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

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

Discussion

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

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

Conclusion

This study has implications for policy and practice at many levels including



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

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

References

Association for Higher Education Access and Disability (2008) *Seeing Ahead: A Study of Factors Affecting Blind and Vision Impaired Students Going on to Higher Education*, Dublin: AHEAD Education Press.

Association for Higher Education Access and Disability (2015) *Giving Voice to Blind and Visually Impaired Students Transition Experiences, Addressing Gaps in Policy Provision*. Dublin: AHEAD Education Press.

Cahill, H., Linehan, C., McCarthy, J., Bormans, G. and Engelen, J., (1996) Blind and Partially Sighted Students' Access to Mathematics and Computer technology in Ireland and Belgium, *Journal of Visual Impairment and Blindness*, vol. 90, pp.105-114.

French, S., and Swain, J. (2006) Telling stories for a politics of hope, *Disability and Society*, vol. 21(5), pp.383-396.

Ireland (1998) *Education Act, 1998*, Dublin: Stationery Office.

Ireland (2000) *Equal Status Act, 2000*, Dublin: Stationery Office.

Ireland (2004) *Education for Persons with Special Educational Needs Act, 2004*, Dublin: Stationery Office.

Griffin, S., and Shevlin, M. (2007) *Responding to Special Educational Needs : an Irish perspective*, Dublin: Gill and Macmillan.

Hesketh, R. (1999) Reading and Writing Media and Methods Used and Preferred by a Sample of Visually Impaired Adults, *British Journal of Visual Impairment*, vol. 17(1), pp.17-22.

Karshmer, A.I. and Bledsoe, C. (2002) Access to mathematics by blind students. In *Computers Helping People with Special Needs* (pp. 471-476). Springer Berlin Heidelberg.

Kim, M. M., and Williams, B. C. (2012) Lived Employment Experiences of College Students and Graduates with Physical Disabilities in the United States, *Disability and Society*, vol. 27(6), pp.837-852.

McCarthy, P. (2013) *Expectations You Encounter: The Educational Experiences and Transition Choices/ Opportunities of Blind/Vision Impaired People in the Republic of Ireland*, PhD thesis, Dublin: Trinity College Dublin (Unpublished).

McCarthy, P. (2015) The Importance of Effective Access to the Curriculum for Transition Opportunities among Vision Impaired Pupils, *The AHEAD Journal*, 1(1), 33-44. Available online at http://www.ahead.ie/userfiles/files/Journal/Issue1_journal.pdf

McDonnall, M. C., and Crudden, A. (2009) Factors Affecting the Successful Employment of Transition-age youths with Visual Impairments, *Journal of Visual Impairment and Blindness*, vol. 103(6), pp.329-341.

Peters, S. J. (2010) The heterodoxy of student voice: challenges to identity in the sociology of disability and education, *British Journal of Sociology of Education*, vol. 31(5), pp.591-602.

Shah, S. (2006) Sharing the world: The Researcher and the Researched, *Qualitative Research*, vol. 6(2), pp.207-220.

Shah, S., and Priestley, M. (2011) *Disability and Social Change : Private Lives and Public Policies*, Bristol: Policy Press.

Söderström, S., and Ytterhus, B. (2010) The Use and Non-use of Assistive Technologies from the World of Information and Communication Technology by Visually Impaired Young People: a Walk on the Tightrope of Peer Inclusion, *Disability and Society*, vol. 25(3), pp.303-315.

Spungin, S. J., and Ferrell, K. A. (2007) The Role and Function of the Teacher of Students with Visual Impairments, *Reston, VA: Council for Exceptional Children*.

Twomey, O., and O'Grady, M. (2012) *Blind and Vision Impaired: Analysis of Applicants through DARE 2010 and 2011*, [PDF] Cork: Disability Support Service, University College Cork. Available online at <http://www.ucc.ie/en/media/support/disabilitysupportservice/research/BlindandVisionImpaired-AnalysisofApplicantsthroughDARE2010and2011.pdf>

UNESCO. (2011). *Accessible ICTs and Personalized Learning for Students with Disabilities: A Dialogue among Educators, Industry, Government and Civil Society*. Paris: UNESCO.

Watson, N., (2004) The dialectics of disability: A Social Model for the 21st Century. In Barnes C and Mercer G. (Eds.). *Implementing the social model of Disability: Theory and Research*. Leeds: The Disability Press.

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‘We are all like a family here’: Qualitative insights on the role of youth cafés in supporting the health and well-being of young people

Bernadine Brady, Lisa Moran and Cormac Forkan

Introduction

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

Youth cafés are drug and alcohol free settings, designed for recreation, entertainment, information, advice and, in many cases, direct service provision

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

Methodology

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

Findings

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

Feeling supported

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

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

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



Belonging and connection

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

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

Personal and identity development

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

I used to be a very closed-off person. I wouldn't leave the safety of my own room.

I've learned to be more confident and open up to people and I've learned to have a lot more confidence ... and respect for myself since coming here. (Café 10)

Safety

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

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

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

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

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

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

When I'm outside of here, I feel way more self-conscious about what I do and what

I say and how I look. But the second I walk back in here, I feel a million feet tall. I don't have to worry if I say something stupid or act like an idiot because I'm accepted. There are no worries, you know. (Café 10)

Alcohol and drugs

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

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

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

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

Conclusion

Young people taking part in this research see the youth café model as a means of enhancing their connections with their communities, providing them with support, promoting personal development and helping them to stay safe. Youth cafés were seen to have particular significance for young people living in disadvantaged urban areas who valued the café space as a refuge from stress experienced at home, school and in the community. At a time of significant concern over youth mental health, the findings underline the importance of community based provision in promoting



and safeguarding the health and well-being of young people. While acknowledging the limitations to generalisability of the study, it can be argued that the findings appear to validate the government's decision to invest in the youth café model. For many youth café stakeholders who took part in the research, however, the resourcing of youth cafés to ensure their sustainability into the future was the key issue they would like to see addressed by government.

References

Cheng Y, Li X, Lou C, Sonenstein FL, Kalamar A, Jejeebhoy S, Delany-Moretlwe S, Brahmabhatt H, Olumide AO and Ojengbede O. (2014) The Association between Social Support and Mental Health among Vulnerable Adolescents in Five Cities: Findings from the Study of the Well-being of Adolescents in Vulnerable Environments. *Journal of Adolescent Health*. 55: 6 (Supplement):S31-S38.

Cohen, S. and Willis, T.A. (1985) 'Stress, Social Support, and the Buffering Hypothesis', *Psychological Bulletin*, Vol. 98, No. 2, pp. 310-57.

Department of Children and Youth Affairs. (2015) *Better Outcomes, Brighter Futures. National Policy Framework for Children and Young People*. Dublin: Government Publications.

Dooley B, Fitzgerald A. (2013) *My World Survey: National Study of Youth Mental Health in Ireland*. Dublin: Headstrong and UCD School of Psychology.

Forkan C, Brady, B, Moran L, Coen, L. (2015) *An Operational Profile and Exploration of the Perceived Benefits of the Youth Café Model in Ireland*. Dublin: Department of Children and Youth Affairs.

Frey CU, Röthlisberger C. (1996) Social Support in Healthy Adolescents. *Journal of Youth and Adolescence*. 25: 1: 17-31.

Lalor, K., de Róiste, A. and Devlin, M. (2007) *Young People in Contemporary Ireland*. Dublin: Gill and Macmillan.

PISA Research Project. (2015) *Facts about Suicide*. Dublin: Dublin City University. Available at: <http://www.pisa.dcu.ie/index.php?page=suicide-facts>

Thomson R. (2007). Biographical approaches. In: *Understanding Youth: Perspectives, identities and practice*. M.J. Kehily (ed.) London: Sage / The Open University.

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Children and Young People's Participation in their Everyday Lives: Evidence Based Policy

Deirdre Horgan, Catherine Forde and Shirley Martin

Introduction

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

The study provides a snapshot of the nature and scope of children and young people's participation in Ireland today

This article addresses the theme of the 2015 Children's Research Network conference 'Better Outcomes: Are we there yet?' and specifically the sub-theme 'Better outcomes in civic engagement, rights and participation'. In 2011 and 2012 the DCYA commissioned a series of studies to provide a strong evidence base for the National Strategy on Children and Young People's Participation in Decision-Making 2015-2020. This article will discuss the approach, methodology, and selected findings of one of these studies, Children and young people's experiences of decision-making at home, in schools and in their communities (Horgan et al., 2015).

Aims of the Research

This study focuses on children and young people's participation in decision making in their everyday lives. It seeks to elicit children and young people's views on what might improve their opportunities for voice and participation, as well as the level of influence they could effect within their home, school and local community. The study provides a snapshot of the nature and scope of children and young people's participation in Ireland today and is particularly interested in children's experiences of informal decision-making across these settings.

Literature

Much national and international research on children and young people's participation

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

Methods

The study was informed by Lundy's (2007) model of conditions for meaningful participation and Percy-Smith's (2010) understanding of participation as the practice of citizenship in the informal and formal spaces of everyday life. It involved child participatory qualitative research with children and young people aged seven to seventeen years in three distinct geographical locations in Ireland: urban mixed-income, urban low-income and rural mixed income. In total, ninety four children and young people were involved in this study as respondents in focus group interviews and as advisory group members. Thirty four parents, teachers and community stakeholders were also interviewed.

A project Steering Group was established at the outset to guide the research. It comprised the project team, members of the DCYA Participation Unit, a representative from the Department of Community, Environment



and Local Government, and a number of key stakeholders from schools and youth and community settings as well as a parent representative from a parent advisory group. Both a Children Advisory group (aged 7-12) and a Young People's Advisory group (aged 12-17) were established to ensure that the project maintained its focus on issues that children and young people considered to be of importance to them in their everyday lives. Moreover, they assisted in the development of the data collection instruments ensuring that they were age appropriate and relevant for use in the data collection, and undertook some initial data analysis.

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

Findings

That children and young people experience different cultures of participation as they

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

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

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

Discussion

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

The commitment to consulting with children on all policies and issues affecting their lives, as well as the recognition of the need for improvement of the effectiveness of student councils, as contained in the Strategy, is welcome. However a cultural shift in adults' attitudes towards children and young people is evident from our study as well as a clear need for training in participation of adults living and working with children and young people. Notably, as part of the implementation of the Strategy, a new participation hub has been established in the Department of Children and Youth Affairs which will attempt to address some of these challenges through providing information, guidance, training and practical support on child and youth participation to Government departments and agencies, and through establishing an online children's participation database for professionals who work with and on behalf of children and young people. It will develop and document innovative best practice in children and young people's participation in

A cultural shift in adults' attitudes towards children and young people is evident from our study as well as a clear need for training in participation of adults living and working with children and young people



decision-making. Finally, as evidenced in our study, there is a critical need for more everyday spaces and places such as youth cafés and youth projects where children and young people can benefit from the experience of participation and active citizenship and gradually take on more responsibilities and active roles.

References

Barker, J. and Weller, S. (2003) "Is it Fun?" Developing Children Centred Research Methods, *International Journal of Sociology and Social Policy*, Vol. 23, pp. 33-58.

Bjerke, H. (2011) 'It's the way they do it': Expressions of Agency in Child-Adult Relations at Home and School. *Children and Society*, Vol. 25, pp. 93-103.

Cherney, I. D. (2010) Mothers' Fathers' and their Children's Perceptions and Reasoning about Nurturance and Self-Determination Rights, *International Journal of Children's Rights*, Vol. 18, pp. 79-99.

Cosgrove, J. and Gilleece, L. (2012) An International Perspective on Civic Participation in Irish Post-primary Schools: Results from ICCS, *Irish Educational Studies*, Vol. 31(4), pp. 377-395.

Davey, C.; Shaw, C.; Burke, T. (2010) *Children's Participation in Decision-making: A Children's Views Report*. London: Participation Works.

Department of Child and Youth Affairs (2014) *Better Outcomes Brighter Futures: The National Policy Framework for Children and Young People: 2014-2020*, Dublin: DCYA.

Department of Children and Youth Affairs (2015) *National Strategy on Children and Young People's Participation, 2015-2020*, Dublin: Department of Children and Youth Affairs.

De Castro, L.R. (2012) The 'Good-enough Society', the 'Good-enough Citizen' and the 'Good-enough student': Where is Children's Participation Agenda Moving to in Brazil? *Childhood*, Vol. 19 (1), pp. 52-68.

Fleming, J. (2013) Young People's Participation, Where Next? *Children and Society*, Vol. 27 (6), pp. 484-495.

Harris, N. (2009) Playing Catch Up in the Schoolyard? Children and Young People's 'Voice' and Education Rights in the UK, *International Journal of Law, Policy and the Family*, Vol. 23, pp. 331-366.

Pople, L. (2009) *The Good Childhood Inquiry. Learning: A Summary of Themes Emerging from Children and Young People's Evidence*, London: Children's Society. Available online at http://www.childrenssociety.org.uk/resources/documents/goodchildhood/14621_ful.pdf

Horgan, D., Forde, C., Parkes, A., Martin, S., Mages, L. and O'Connell, A. (2015) *Children and Young People's Experiences of Participation in Decision-making in their Homes, Schools*

and Communities, Dublin: Department of Children and Youth Affairs.

Lundy, L. (2007) "Voice" is not enough: Conceptualising Article 12 of the United Nations Convention on the Rights of the Child. *British Educational Research Journal*, Vol. 33(6), pp. 927-942.

Martin, S., Forde, C., Dunn Galvin, A. and O'Connell, A. (2015) *Young People as Social Actors: An examination of young people's perspectives on the impact of participation in DCYA initiatives*, Dublin: Department of Children and Youth Affairs.

Percy Smith, B. (2010) Councils, Consultations and Community: Rethinking the Spaces for Children and Young People's Participation, *Children's Geographies*, Vol. 2, pp.107-122.

Smith, A. B. (2007) Children and Young People's Participation: Rights in Education, *International Journal of Children's Rights*, Vol. 15 (1), pp. 47-164.

Vromen, A. and Collin, P. (2010) Everyday Youth Participation? Contrasting Views from Australian Policymakers and Young People, *Young: Nordic Journal of Youth research*, Vol. 18 (1), pp. 97-112.

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The Children's Research Network for Ireland and Northern Ireland

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

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

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

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

12 month membership is currently:

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

You can join or renew at www.childrensresearchnetwork.org

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