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Next Edition - February 2014

Kerry Cuskelly will edit the Feb - June 2014 editions of PL and can be contacted by email at: kerry.cuskelly@gmail.com

Kenneth, Kerry, Steve and Eavan
The CES Lecture Series
Evidence at the heart of policy and practice

About the CES Lecture Series
Now, more than ever, knowing and understanding what works to improve child, family, and community programmes or services is crucial so that we can invest in, and make available the best services to get the best possible outcomes for service users.

The CES Lecture Series is a unique opportunity to watch, listen and learn from some of the leading international voices in evidence-informed approaches to practice and policy in child, family and community services. This online resource will provide you with the knowledge and know-how to support this approach in your work place.

The CES Lecture Series comprises of 8 online digitally filmed lectures, accompanied by downloadable materials and associated readings.

What is the aim of the lecture series?
• To build a shared understanding of the key principles of using evidence to inform practice and policy in child family and community services
• Create an online learning community to promote an evidence-informed approach to practice and policy in child family and community services
• To support the capacity of staff working in a multidisciplinary team environment
• To build participants knowledge on key concepts in prevention, early intervention practice and policy, and implementation science.

Who has this resource been produced for?
This online resource has been produced to support policy makers, service and programme managers, practitioners, programme evaluators and students. It will be of greatest interest to those who work in the area of children, family, community, and human services.

How much does it cost to access the lecture series?
A once off registration fee applies and the fee covers unlimited access.
Individual access: €50/£45/$65
Corporate access for organisations of 100 people or less: €500/£450/$650
For membership based and larger organisations, please contact lclancy@effectiveservices.org for pricing. http://www.effectiveservices.org/lectures
Two days of workshops at St Patrick's College, Maynooth 23rd & 24th January 2014 with the authors of 'Teaching Clients to Use Mindfulness Skills' (Routledge)

Teaching Clients to use Mindfulness Skills (day one)

23rd January 2014

€150 until 23rd December then €165

Please click [here](#) for more details

Further Steps in Teaching Clients to use Mindfulness Skills (second day, bookable separately)

24th January 2014

€150 until 24th December then €165

Please click [here](#) for more details

We return to Maynooth following our sell-out event in May. This is an excellent opportunity for anyone wishing to use mindfulness with clients in any therapeutic capacity. There are two days of events, and we would encourage newcomers to book both. 'Further Steps' is a follow up day, by popular demand, for people who have already completed the previous workshop. To date over 3000 delegates in the UK and Ireland have attended mindfulness training with us and the feedback has been outstanding.

When asked about the content and presentation previous delegates have said:-

'Perfectly pitched and balanced. A great combination of theory, practice and living examples'

'Best course I have been on in years, thank you'

'The training surpassed my expectations, very professional presentations and organisation'

'Very impressed by pacing of learning and use of experiential exercises'

'Truly superb'

The companion text to these workshops was published in July and the first print run sold out on Amazon within seven days. Books will be on sale at the event and delegates will be able to have copies signed by the authors if they wish. These courses are presented in partnership between Grayrock and Stanton Psychological Services. For further information, go to grayrock.co.uk

If you require any further information, please do not hesitate to email [info@grayrock.co.uk](mailto:info@grayrock.co.uk) or call 023 80 487 592
Continuing Professional Development

Social Care Ireland Annual Conference 2014
Theme: Social Care – Diversity in Practice
Moran Silver Springs Hotel, Cork
Tuesday, April 1st to Thursday April 3rd 2014. See here for more information: http://www.linkedin.com/groups/Irish-Association-Social-Care-Workers-4669806

10th International Conference on Practice Teaching and Field Education in Health and Social Work:
Creating connections, repairing disconnections and building relationships in practice learning and field education
Glasgow, April 7th-8th 2014. Call for papers open. Due date is 18th October 2013.
http://www.whitingbirch.net/cgi-bin/scribe?showinfo=ip005

2014 Signs of Safety Gathering
Keeping the rumour of good child protection practice alive! The 7th International Signs of Safety Gathering will be held next year in Loughborough, England April 9-11, 2014. This Gathering will have many international presentations and will also have a strong focus on presentations from the 34 local authorities across the UK that are implementing the Signs of Safety. Eileen Munro and Susie Essex will make special presentations to the Gathering. This event will fill quickly as there are only 200 places available. More information: http://www.signsofsafety.net/events/?ee=14

The Free University of Bolzano/Bozen and the European Academy Bolzano are pleased to announce the 4th European Social Work Research Conference:
Private troubles or public issues? Challenges for social work research.
in Bolzano the 15-16-17 April 2014.
http://ecswr-2014.unibz.it

The organising committee invites submissions on the following themes:

1) Knowledge production and public accountability in social work
2) Research in social work as participative learning process
3) Standing up to complexity - specific and universal issues in social work
4) Evidence and uncertainty - pathways to accountable social work research and practice
5) Social diversity: Promoting human rights and the role of research
6) Social work and political action: what has research to do with this?

Submission will be open from the 1st of June to the 30th of October.
Child Development, Attachment & Neurobiology with Graham Music
1-Day workshop, 7th April 2014, 9.30am - 4.30pm

Graham Music, PhD, is Consultant Child and Adolescent Psychotherapist at the Tavistock and Portman Clinics (London) and an adult psychotherapist in private practice. He has several decades of experience in working therapeutically with maltreated children. Until recently he was an Associate Clinical Director at the Tavistock, responsible for a range of clinical services. As well as numerous peer reviewed papers his published books include Nurturing Natures: Attachment and Children’s Emotional, Sociocultural and Brain Development (2010), Affect and Emotion (2001) and his forthcoming book is The Good Life: Wellbeing and the New Science of Altruism, Selfishness and Immorality (2014). He teaches and supervises on the Tavistock Child Psychotherapy Training and provides courses elsewhere in the UK and internationally.

At this workshop you should expect to:
• Review the impact of early experience on a child’s developing hormonal systems, neural architecture and wider psychobiological processes.
• Revisit some key areas of recent research in attachment, child development and neurobiology to think about common but worrying issues that parents, infants & young children often present with.
• Focus both on ordinary early development & compare this to what happens in abuse, trauma or neglect.
• Think about what builds resilience in the face of stress and severe psychic challenges.

The training workshop will be partly taught, including extensive use of video material, but will also allow ample time for discussion. This workshop is particularly suited to professionals working with infants and parents within a community or clinical setting.

Registration form: Child Development, Attachment & Neurobiology with Graham Music
7th April, 2014

PLEASE PRINT CLEARLY

Name: ________________________________
Job title: ________________________________
Organisation: ________________________________
Email: ________________________________
Telephone: ________________________________

Fee: €70 (inclusive of lunch, tea/coffee and all handout materials).
A reduced fee of €60 will apply before 31st January 2014. Return booking form with payment to Regina Walsh, The Bessborough Centre, Blackrock, Cork. Email: rwalsh@bessborough.ie Tel: 021 435 7730
Child to Parent Violence: Innovations in Practice, Policy & Research
International Conference
12-13 June 2014
NUI Galway

ADVANCED NOTICE TO SAVE DATE
Registration and Abstract due dates to follow

More information at www.rcpv.eu

Keynote Speakers include: Dr. Peter Jakob, Family Therapist, Clinical Psychologist, Partnership Projects, England.
Eddie Gallagher, Social Worker, Family Therapist & creator of ‘Who’s in Charge?’ programme Melbourne, Australia.
Dr. Paula Wilcox, Principal Lecturer in Criminology, School of Applied Social Science, University of Brighton.
Michelle Pooley, Community Engagement Coordinator, Brighton & Hove City Council, England.
Rita O’Reilly, CEO, Parentline Ireland.
Professor Caroline McGregor, School of Political Science & Sociology, NUI Galway, Ireland.

This ground-breaking international conference will cover the emerging problem of child to parent violence (CPV) in the family home for practitioners, researchers, policy makers and families.

More and more parents are talking about their experiences of abuse at the hands of their children and adolescents. The abuse comes in the form of intimidation, aggression, verbal abuse, financial abuse and physical violence. Practitioners, researchers and policy makers are increasingly faced with the challenges of responding to CPV.

This conference will give you the opportunity to explore the subject in a relevant and innovative way, hearing from a range of both international and national speakers.

Decisions, Assessment, Risk and Evidence in Social Work

Tue 01 & Wed 02 July 2014
Templeton Hotel, Templepatrick, Northern Ireland
(convenient to Belfast International Airport)

Plenary Speakers:

• Professor Eileen Gambrill, Hutto Patterson Professor of Child and Family Studies, University of California at Berkeley, USA, internationally recognized for her work on critical thinking, decision making and related ethical issues, and evidence based practice.

• Dr Martin Webber, Reader in Social Work, University of York, UK, well-known for his passion for rigorous research in mental health social work, including application of evidence to practice decisions and professional knowledge-creation process.

• Mr David Carson, currently Reader, Institute of Criminal Justice Studies, University of Portsmouth, UK, an international speaker on the interface between law and risk in human services including the management of risk and professional decisions in organizations.

This third DARE symposium builds on the second symposium in July 2012 which brought together 110 delegates from nine countries including senior practitioners, managers, policy makers, researchers and those in education and training.

Further information: www.socsci.ulster.ac.uk/irss/dare2012/programme.html

Further information on DARE 2014 including a call for abstracts for oral presentations and posters will be added to our website over the coming months: www.socsci.ulster.ac.uk/irss/dare2014

If you would like your name to be added to the list for publicity email:
Mrs Sharon Lucas at: dare@ulster.ac.uk
Irish Branch of BAPSCAN / Practice Teaching

The BASPCAN Board of Trustees has now approved the establishment of this new Branch and the Steering Group are progressing with plans for the formation of the branch – we plan to meet again in early December 2013.

In order that we have an accurate database of names, we would be pleased if you could kindly express or reconfirm your interest in receiving further information from the Steering Group in light of this recent progress by responding to this mail.

It would be very useful to have the full details of those interested – your post/position, address and email and telephone details – to help with the initial planning of events for the branch. As part of this – please will you kindly cascade this email to colleagues and any parties you feel may be interested in this initiative within your own circulation list. Many thanks in anticipation of your assistance with this.

Please send your email responses to Judy Sanderson, National Office Manager at BASPCAN on email: baspcan@baspcan.org.uk. She will co-ordinate the responses and feed back to the Steering Committee.

Invitation to Practice Teachers

Have you thought about practice teaching/ having a student on placement? Have you been a practice teacher before and not done it for a while? If any of these questions apply to you and you want to discuss at further, please contact the Fieldwork Co-ordinator at the School of Applied Social Studies, UCC. Ruth Murray would be very interested in discussing what is entailed with you. The main times placements are required by UCC are for 14 weeks from January -April and September-December. Very occasionally they are required over the summer period also.

One of the innovations Ruth and some colleagues have been involved in is visiting social work teams and running training sessions with social workers there interested in practice teaching. Ruth would be happy to factor this in for a team if social workers express an interest in this. She is also willing to visit social work teams, at their request. One of the times that have proven most suitable for social workers is at the end of their own team meetings, and with notice, Ruth is willing to travel and meet with people at these times.

Ruth can be contacted at (021) 4903954 or by email at r.murray@ucc.ie
CALL FOR RESEARCH PROJECTS

What is this about?
Community-Academic Research Links (CARL) invites non-profit voluntary or community organisations to suggest potential research topics that are important to them and could be collaboratively worked on with students as part of their course work. CARL is an initiative in UCC based on the “Science Shop” model and follows a 30 year European tradition with similar initiatives ongoing in some of the highest ranked Universities in Europe. CARL has produced impressive and important pieces of research that have generated a huge interest outside the university walls and the project reports have even had an impact at government policy level.

We are seeking expressions of interest from groups who have ideas for a research project and would like to collaborate on their research idea with a UCC student.

How does it work?
As part of their academic course, students undertake a minor dissertation (between 10,000-30,000 words). In past years, students designed their own study and then contacted groups for permission to collect data. These projects serve to develop the research skills of the students; however, the research may not always answer the needs of community and voluntary groups.

In our model, the students undertake their studies, learn about research methods, data collection, ethics, literature reviews as usual; however, the major difference is that the research projects undertaken are explicitly studies of issues identified by the community. These are studies/research which the community identifies as important and need to be undertaken, but they cannot pay for it and/or do not have the expertise themselves to undertake the study.

How long does this take?
The typical time-scale for projects would be a) proposals submitted by groups by early February, b) review of proposals in early March by the CARL advisory group (comprised of UCC staff, students and representatives from the community and voluntary sector) to see which proposals are sufficiently developed and feasible for a student to undertake, and c) students begin their research in May (Master of Social Work) or October (other courses).

Projects must be small enough to be completed within the academic year, roughly 9-12 months. Groups normally receive their research report in July. Large research projects which require longer than a year to complete may be broken up into one or more smaller one-year projects for multiple students.

Where can I get more information?
Please visit our website to watch brief videos about CARL, to find out what it is like to participate, or to read past research project reports.

What if we have already completed a research project with CARL?
Community groups that have are currently involved, or previously completed a project, are welcome to apply again.

We look forward to hearing from you!

Contact Anna to discuss your idea further and to receive a copy of the application form.

Closing date is the 10th February 2014.

We are seeking proposals from groups who are interested in working collaboratively with UCC students on research projects that are important to them. If you have ideas for a research project that could benefit your community, we would like to hear from you.

To apply, please review the information on our website and contact Anna to discuss your idea further. The typical time-scale for projects is 9-12 months, with proposals due by early February.

For more information, please visit our website at carl.ucc.ie.
Profile of the Sandwich Generation and Intergenerational Transfer in Ireland by Christine McGarrigle and Rose Anne Kennedy (October 2013)

Global population changes in the more developed world have occurred from increased life expectancy and delayed fertility with women having their children later in life. These population changes have led to an increase in the intermediate population, or the “sandwich generation” those who have both living parents and younger dependent children. Previous studies in Northern European, Southern European and the United States of America (US) have shown that women, being the intermediate between elderly parents and young adult children have borne the burden of care for both generations (Attias-Donfut, Ogg & Wolff, 2005; Grundy & Henretta, 2006; Roll & Litwin, 2010). The patterns of intergenerational transfers vary geographically and while in Northern Europe middle-aged children support their parents financially, in Southern Europe, the parents are supported through co-residence and time (Bonsang, 2007). However, in the context of this ‘sandwich generation’, most transfers are not in the direction of children to parents but rather from parents to children.

Link: http://www.tcd.ie/tilda/assets/pdf/intergenerational_transfers.pdf

Review of social determinants and the health divide in the WHO European Region: final report by UCL Institute of Health Equity (October 2013)

The WHO European Region has seen remarkable health gains in populations that have experienced progressive improvements in the conditions in which people are born, grow, live and work. Inequities persist, however, both between and within countries. This review of inequities in health between and within countries across the 53 Member States of the Region was commissioned to support the development of the new European policy framework for health and well-being, Health 2020. Much more is understood now about the extent and social causes of these inequities. The European review builds on the global evidence and recommends policies to ensure that progress can be made in reducing health inequities and the health divide across all countries, including those with low incomes. Action is needed on the social determinants of health, across the life-course and in wider social and economic spheres to achieve greater health equity and protect future generations.


Equality Rights Alliance, Seminar: A New Departure for Human Rights. (September 2013)

Seminar aims:
• Explore the potential of a merged Irish Human Rights and Equality Commission, what is needed to realise this potential, and the issues that it should be addressing.
• Examine how people experiencing inequality, discrimination and human rights abuses and their organisations might best work with the Irish Human Rights and Equality Commission.
• Build an agenda for consideration by the IHREC

Link: http://www.eracampaign.org/uploads/summary%20of%20event%20in%20colour%20%281%29.pdf
OECD Skills Outlook 2013 First results from the Survey of Adult Skills by the OECD (October 2013)

The technological revolution that began in the last decades of the 20th century has affected nearly every aspect of life in the 21st: from how we “talk” with our friends and loved ones, to how we shop, and how and where we work. Quicker and more efficient transportation and communication services have made it easier for people, goods, services and capital to move around the world, leading to the globalisation of economies. These social and economic transformations have, in turn, changed the demand for skills as well. With manufacturing and certain low-skill tasks increasingly becoming automated, the need for routine cognitive and craft skills is declining, while the demand for information-processing and other high-level cognitive and interpersonal skills is growing. In addition to mastering occupation-specific skills, workers in the 21st century must also have a stock of information-processing skills and various “generic” skills, including interpersonal communication, self-management, and the ability to learn, to help them weather the uncertainties of a rapidly changing labour market.

The Survey of Adult Skills (PIAAC) was designed to provide insights into the availability of some of these key skills in society and how they are used at work and at home. It directly measures proficiency in several information-processing skills – namely literacy, numeracy and problem solving in technology-rich environments. Link: [http://www.socialjustice.ie/sites/default/files/file/Policy%20Issues/Education/2013-10-08%20-%20PIAAC%20OECD_Skills_Outlook_2013.pdf](http://www.socialjustice.ie/sites/default/files/file/Policy%20Issues/Education/2013-10-08%20-%20PIAAC%20OECD_Skills_Outlook_2013.pdf)

About the Regulation of Residential Services for Children and Adults with Disabilities. Guidebook 2013, by HIQA (November 2013)

HIQA is responsible for the regulation of residential and residential respite services for children and adults with disabilities provided by the Health Service Executive (HSE), private organisations or voluntary bodies. This guidebook aims to provide you with information about what is involved in this new process of regulation, inspection and monitoring. It sets out how the new system will work to improve standards for people with disabilities in residential services across Ireland. Link: [http://www.hiqa.ie/system/files/Guide-on-Regulation-Disability-Services.pdf](http://www.hiqa.ie/system/files/Guide-on-Regulation-Disability-Services.pdf)

National Standard Demographic Dataset and Guidance for use in Health and Social Care Settings by HIQA (October 2013)

The purpose of this document is to remove the duplication and variation within and between service providers when collecting patients' and service users' demographic data. It will also assist all service providers to collect standard core data about patients and service users. Link: [http://www.hiqa.ie/system/files/National-Standard-Demographic-Dataset-2013.pdf](http://www.hiqa.ie/system/files/National-Standard-Demographic-Dataset-2013.pdf)

Constructing the Other: Considerations about Study on Asian Issues

PATHWAYS FOR CHANGE: 10 Theories to Inform Advocacy and Policy Change Efforts by Sarah Stachowiak, ORS Impact (October 2013)

Advocates of all stripes seek changes in policy as a way to achieve impact at a scale and degree of sustainability that differs from what can be achieved through direct services or programs alone. Advocates and funders each come to policy work with a set of beliefs and assumptions about how change will happen, and these beliefs shape their thinking about what conditions are necessary for success, which tactics to undertake in which situations, and what changes need to be achieved along the way. These worldviews are, in actuality, theories of change, whether or not they have been explicitly stated or documented as such. When articulated as theories of change, these strategy and belief system roadmaps can clarify expectations internally and externally, and they can facilitate more effective planning and evaluation. This brief lays out 10 theories grounded in diverse disciplines and worldviews that have relevance to the world of advocacy and policy change. These theories can help to untangle beliefs and assumptions about the inner workings of the policy making process and identify causal connections supported by research to explain how and why a change may or may not occur. This piece is not meant to be comprehensive of all possible relevant theories and approaches; rather, it introduces and illustrates a handful of theories that may be useful to advocates, funders, and evaluators.

Link: [http://www.evaluationinnovation.org/sites/default/files/Pathways%20for%20Change.pdf](http://www.evaluationinnovation.org/sites/default/files/Pathways%20for%20Change.pdf)

Continuing Professional Development in Social Work

Continuing professional development (CPD) has become a defining issue in twenty-first century social work. There is widespread consensus in favour of CPD. But what is it? Are there discernible international trends? What are the barriers to participating in CPD? What do social workers think about and want from CPD? This book seeks to answer these questions. Based on a survey and interviews with social work practitioners, CPD in social work offers a unique insight into the possibilities and challenges of CPD and the issues it presents for newly qualified and experienced social workers in practice. Combining the perspectives of social workers and their managers with international research, assures its global appeal. It offers possible directions for the future of post qualifying social work education, making it essential reading for practitioners, educators, managers and policy-makers. - See more at: [http://www.policypress.co.uk/display.asp?k=9781447307372](http://www.policypress.co.uk/display.asp?k=9781447307372)

ECO-WISE – Social Enterprises as Sustainable Actors: Concepts, Performances, Impacts

Peter Herrmann delivers a critical perspective on “green growth” and third-sector development. Green growth seems to be a central catchword that not only claims a fundamental shift of awareness in matters related to economic development, but also shows a concern for different aspects of societal organisation. In his view, the conditions for a fundamental shift require a methodologically different approach for analysing features of ECO-WISE developments in developing societal wisdom. Regarding critical theory, he discusses “growth” in general and “green growth” in particular, and questions third-sector targets in a growth driven time. Further, he links the challenges of green growth with the potential of the third sector by providing tentative analytical schemes that a) can help determine an “eco-wise status” (in the sense of eco-wisdom) of third-sector organisations and b) intend to provide an integrated view that allows for a cross-cutting understanding of the elaborated dimensions of “eco-wisdom” along with the categories of a realist social science approach combining economic, social, political and environmental pillars of society. The author concludes that ECO-WISE – in the sense of ecologically oriented work-integration social enterprises – can play a decisive role in “awakening the spectre”; they have the serious potential to contribute to a fundamental shift towards an eco-wise society, and he therefore asserts their adaptability and responsiveness.

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© Europäischer Hochschulverlag GmbH & Co. KG, Bremen, 2013. [www.eh-verlag.de](http://www.eh-verlag.de)
Practice signposts: data sources to support practice

Practice signposts are permanent pages that will appear in every edition of Practice Links. The aim of this page is to provide signposts to high quality research-informed databases. Some of the databases at a quick glance may seem too medical/health orientated, but also contain great resources to support social work and social care practice also.

**Campbell Collaboration**
The Campbell Collaboration (C2) helps people make well-informed decisions by preparing, maintaining and disseminating systematic reviews in education, crime and justice, and social welfare. Access to the database in the Republic of Ireland is free as the government of Ireland has purchased a license. [http://www.campbellcollaboration.org/](http://www.campbellcollaboration.org/)

**Cochrane Collaboration**
The Cochrane Collaboration, established in 1993, is an international network of more than 28,000 dedicated people from over 100 countries. We work together to help health care providers, policy makers, patients, their advocates and carers, make well-informed decisions about health care, based on the best available research evidence, by preparing, updating and promoting the accessibility of Cochrane Reviews. Our work is internationally recognised as the benchmark for high quality information about the effectiveness of health care. [http://www.cochrane.org/](http://www.cochrane.org/)

**National Institute for Health and Clinical Excellence (NICE) - NHS UK**

**Health Intelligence Unit (HSE)**
Health Intelligence is part of the Quality and Clinical Care Directorate within the Health Service Executive and is responsible for capturing and utilising knowledge to support decision-making to improve the health of the population. Website has links to HSE research, databases, facts (census etc.), publications and using evidence effectively. [http://www.hse.ie/eng/about/Who/Population_Health/Health_Intelligence/](http://www.hse.ie/eng/about/Who/Population_Health/Health_Intelligence/)

**Evidence in Health and Social Care (NHS)**
NHS Evidence is a service that enables access to authoritative clinical and non-clinical evidence and best practice through a web-based portal. It helps people from across the NHS, public health and social care sectors to make better decisions as a result. NHS Evidence is managed by the National Institute for Health and Clinical Excellence (NICE). [http://www.evidence.nhs.uk/](http://www.evidence.nhs.uk/)
Social Care Institute for Excellence (SCIE)
The Social Care Institute for Excellence (SCIE) improves the lives of people who use care services by sharing knowledge about what works. We are an independent charity working with adults, families and children’s social care and social work services across the UK. We also work closely with related services such as health care and housing. We gather and analyse knowledge about what works and translate that knowledge into practical resources, learning materials and services. Our work helps to improve the knowledge and skills of those working in care services. This includes managers, frontline staff, commissioners and trainers. People and their families who use these services also use our resources. All of our work is developed in collaboration with experts - including people who use care services and their carers. [http://www.scie.org.uk/](http://www.scie.org.uk/)

Decision Map.ie
DecisionMap.ie, the new online decision-support tool developed by Ordnance Survey Ireland and Twelve Horses. DecisionMap, currently in beta test release, combines digital mapping from Ordnance Survey Ireland, with visualisation and web delivery tools developed by Twelve Horses, and statistical data provided by the Central Statistics Office and others. It aims to provide decision makers in the public and private sectors instant access to easily-consuming, spatially-referenced data about Ireland. [http://decisionmap.ie/](http://decisionmap.ie/)

Growing Up in Ireland
Growing Up in Ireland is a national study of children. It is the most significant of its kind ever to take place in this country and will help us to improve our understanding of all aspects of children and their development.

The study will take place over seven years and follow the progress of two groups of children; 8500 nine-year-olds and 11,000 nine-month-olds. During this time we will carry out two rounds of research with each group of children.

The main aim of the study is to paint a full picture of children in Ireland and how they are developing in the current social, economic and cultural environment. This information will be used to assist in policy formulation and in the provision of services which will ensure all children will have the best possible start in life. [http://www.growingup.ie/](http://www.growingup.ie/)

Irish Qualitative Data Archive
The Irish Qualitative Data Archive (IQDA) is a central access point for qualitative social science data and provides online access to all new qualitative data generated within the Irish Social Science Platform, and to selected existing data. [http://www.iqda.ie/content/welcome-iqda](http://www.iqda.ie/content/welcome-iqda)

North South Child Protection Hub
This hub available for use by child protection professionals (policy makers, practitioners, researchers and educators) in Northern Ireland and the Republic of Ireland.

The Hub brings together research, policy and practice guidance, inspection reports, serious case reviews, court judgements, news articles and other material relevant to child protection published in Northern Ireland and the Republic of Ireland together with material from Great Britain and other countries. Staff in the Health and Social Care Board and Trusts in Northern Ireland and in the Health Service Executive in the Republic of Ireland, will have access to the Hub but it will also be an important resource for all organisations concerned with child protection. [http://www.nscph.com](http://www.nscph.com)

RIAN - Irish Open Access Research Archive (free)
RIAN is the outcome of a sectoral higher education project supported by the Irish Government’s Strategic Innovation Fund. Project planning was carried out by the seven Irish university libraries, DCU, NUIG, NUIM, TCD, UCC, UCD, UL and was supported by the Irish Universities Association (IUA). The project aim is to harvest to one portal the contents of the Institutional Repositories of the seven university libraries, in order to make Irish research material more freely accessible, and to increase the research profiles of individual researchers and their institutions. It is intended to extend the harvest to other Irish research institutions as RIAN develops. [http://rian.ie/en](http://rian.ie/en)
Behavioural therapies versus other psychological therapies for depression
Kiyomi Shinohara, Mina Honyashiki, Hissei Imai, Vivien Hunot, Deborah M Caldwell, Philippa Davies, Theresa HM Moore, Toshi A Furukawa, Rachel Churchill (October 2013)

Background
Behavioural therapies represent one of several categories of psychological therapies that are currently used in the treatment of depression. However, the effectiveness and acceptability of behavioural therapies for depression compared with other psychological therapies remain unclear.

Objectives
1. To examine the effects of all BT approaches compared with all other psychological therapy approaches for acute depression.
2. To examine the effects of different BT approaches (behavioural therapy, behavioural activation, social skills training and relaxation training) compared with all other psychological therapy approaches for acute depression.
3. To examine the effects of all BT approaches compared with different psychological therapy approaches (CBT, third wave CBT, psychodynamic, humanistic and integrative psychological therapies) for acute depression.

Search methods
We searched the Cochrane Depression Anxiety and Neurosis Group Trials Specialised Register (CCDANCTR, 31/07/2013), which includes relevant randomised controlled trials from The Cochrane Library (all years), EMBASE, (1974-), MEDLINE (1950-) and PsycINFO (1967-). We also searched CINAHL (May 2010) and PSYNDEX (June 2010) and reference lists of the included studies and relevant reviews for additional published and unpublished studies.

Selection criteria
Randomised controlled trials that compared behavioural therapies with other psychological therapies for acute depression in adults.

Data collection and analysis
Two or more review authors independently identified studies, assessed trial quality and extracted data. We contacted study authors for additional information.

Main results
Twenty-five trials involving 955 participants compared behavioural therapies with one or more of five other major categories of psychological therapies (cognitive-behavioural, third wave cognitive-behavioural, psychodynamic, humanistic and integrative therapies). Most studies had a small sample size and were assessed as being at unclear or high risk of bias. Compared with all other psychological therapies together, behavioural therapies showed no significant difference in response rate (18 studies, 690 participants, risk ratio (RR) 0.97, 95% confidence interval (CI) 0.86 to 1.09) or in acceptability (15 studies, 495 participants, RR of total dropout rate 1.02, 95% CI 0.65 to 1.61). Similarly, in comparison with each of the other classes of psychological therapies, low-quality evidence showed better response to cognitive-behavioural therapies than to behavioural therapies (15 studies, 544 participants, RR 0.93, 95% CI 0.83 to 1.05) and low-quality evidence of better response to behavioural therapies over psychodynamic therapies (2 studies, 110 participants, RR 1.24, 95% CI 0.84 to 1.82).

When compared with integrative therapies and humanistic therapies, only one study was included in each comparison, and the analysis showed no significant difference between behavioural therapies and integrative or humanistic therapies.
Authors’ conclusions
We found low- to moderate-quality evidence that behavioural therapies and other psychological therapies are equally effective. The current evidence base that evaluates the relative benefits and harms of behavioural therapies is very weak. This limits our confidence in both the size of the effect and its precision for our key outcomes related to response and withdrawal. Studies recruiting larger samples with improved reporting of design and fidelity to treatment would improve the quality of evidence in this review.

Plain language summary
Behavioural therapies versus other psychological therapies for depression

Major depression is one of the common mental illnesses characterised by persistent low mood and loss of interest in pleasurable activities, accompanied by a range of symptoms, including weight loss, insomnia, fatigue, loss of energy, inappropriate guilt, poor concentration and morbid thoughts of death. Whilst antidepressants remain the mainstay of treatment for depression in healthcare settings, psychological therapies are still important alternative or additional interventions for depressive disorders. Nowadays, a diverse range of psychological therapies are available (such as cognitive-behavioural therapies, behavioural therapies, psychodynamic therapies, humanistic therapies and integrative therapies). It is very important to know whether one type of psychological therapy is more effective than another, and to know which psychological therapy is the most effective treatment for depression. In this review, we focused on one of these—behavioural therapies (BT)—because they are relatively simple to deliver, and interest in them has recently been renewed. Behavioural therapies are usually based purely on operant and respondent principles, aimed to change the patient's depressive mood by changing his or her behaviour patterns. Whilst a number of BT models have been developed, we categorised the following approaches as behavioural therapies in this review: behavioural therapy (based on Lewinsohn's model, which focused on increasing pleasant activities), behavioural activation (originated from behavioural component of cognitive-behavioural therapy and based on Jacobson's work in 1996), social skills training/assertiveness training and relaxation therapy.

In this review, we assessed the efficacy and acceptability of behavioural therapies compared with all other psychological therapies in the treatment of acute phase depression (neither long-term nor treatment-resistant depression) in adults. Twenty-five randomised controlled trials were included in this review. The quality of evidence in our review is low because of issues with the design of the studies that we found and lack of precision in our results. Although we found that behavioural therapies and all other psychological therapies are equally effective and acceptable, more research is needed to confirm this finding.

BACKGROUND: Educational and skills-based interventions are often used to prevent relationship and dating violence among young people.

OBJECTIVES: To assess the efficacy of educational and skills-based interventions designed to prevent relationship and dating violence in adolescents and young adults.

SEARCH METHODS: We searched the Cochrane Central Register of Controlled Trials (CENTRAL), MEDLINE, EMBASE, CINAHL, PsycINFO, six other databases and a trials register on 7 May 2012. We hand searched the references lists of key articles and two journals (Journal of Interpersonal Violence and Child Abuse and Neglect). We also contacted researchers in the field.

SELECTION CRITERIA: Randomised, cluster-randomised and quasi-randomised studies comparing an educational or skills-based intervention to prevent relationship or dating violence among adolescents and young adults with a control.

DATA COLLECTION AND ANALYSIS: Two review authors independently assessed study eligibility and risk of bias. For each study included in the meta-analysis, data were extracted independently by GF and one other review author (either CH, JN, SH or DS). We conducted meta-analyses for the following outcomes: episodes of relationship violence, behaviours, attitudes, knowledge and skills.

RESULTS: We included 38 studies (15,903 participants) in this review, 18 of which were cluster-randomised trials (11,995 participants) and two were quasi-randomised trials (399 participants). We included 33 studies in the meta-analyses. We included eight studies (3405 participants) in the meta-analysis assessing episodes of relationship violence. There was substantial heterogeneity (I² = 57%) for this outcome. The risk ratio was 0.77 (95% confidence interval (CI) 0.53 to 1.13). We included 22 studies (5256 participants) in the meta-analysis assessing attitudes towards relationship violence. The standardised mean difference (SMD) was 0.06 (95% CI -0.01 to 0.15). We included four studies (887 participants) in the meta-analysis assessing behaviour related to relationship violence; the SMD was -0.07 (95% CI -0.31 to 0.16). We included 10 studies (6206 participants) in the meta-analysis assessing knowledge related to relationship violence; the results showed an increase in knowledge in favour of the intervention (SMD 0.44, 95% CI 0.28 to 0.60) but there was substantial heterogeneity (I² = 52%). We included seven studies (1369 participants) in the meta-analysis assessing skills related to relationship violence. The SMD was 0.03 (95% CI -0.11 to 0.17). None of the included studies assessed physical health, psychosocial health or adverse outcomes. Subgroup analyses showed no statistically significant differences by intervention setting or type of participants. The quality of evidence for all outcomes included in our meta-analysis was moderate due to an unclear risk of selection and detection bias and a high risk of performance bias in most studies.

AUTHORS’ CONCLUSIONS: Studies included in this review showed no evidence of effectiveness of interventions on episodes of relationship violence or on attitudes, behaviours and skills related to relationship violence. We found a small increase in knowledge but there was evidence of substantial heterogeneity among studies. Further studies with longer-term follow-up are required, and study authors should use standardised and validated measurement instruments to maximise comparability of results.

Link: http://www.campbellcollaboration.org/lib/project/65/
What is this article about?

This article aims to orient social workers to have greater familiarity, insight, and practical knowledge for understanding and managing self-injurious behaviour (SIB) in older adults with intellectual disabilities (ID). An overview of the following is provided:

- Self-injurious behaviour (SIB) in individuals with intellectual disabilities (IDs);
- Underlying causes and functions of SIB;
- Key issues and ageing-related risks relating to older adults with IDs.

What are the critical findings?

1) SIB in people with IDs is a non-suicidal, repetitive, and deliberate condition, whereby an individual causes physical injury, tissue damage, or both to his/her body; compared with the general population, individuals with IDs are more likely to develop SIB.

2) Explanations for why SIB manifests include pain/discomfort response (i.e. SIB appears an outward expression of pain, often in those with limited expressive/verbal communication skills) and social learning theory (i.e. SIB is the result of what has been learned by watching others).

3) In recent decades there has been a substantial increase in life expectancy for people with IDs as a result of advances in medical care, assistive technology, and public health programs.

4) SIB in ageing adults may result from age-related risk factors including increasing and unresolved health issues, physical changes, declining physical abilities, transitions to new residential environments, and the potential for experiencing loss and bereavement.

What are the implications for practice?

1) There is an increasing likelihood that social workers in health care settings and social service agencies will encounter older adults with IDs.

2) Social workers need to be aware of sporadic, episodic, and ageing-related chronic health issues that may escape detection and diagnosis in older adults with SIB.

3) A systems-based theoretical approach that considers the role of bio-psychosocial factors to determine the cause/function of SIB is advocated.

4) As social workers may often be able to see the “bigger picture,” they may be in a position to make connections between an individual’s personal and social circumstances.

The Protective Nature of Sibling Relationships of Youth in Foster Care


What is this article about?

1) Reports the findings of a US-based quantitative research study exploring sibling relationships among youth in foster care.

2) Addresses the potential protective nature of sibling relationships of those who have experienced trauma on the expression of internalising symptoms (i.e. withdrawal, somatic complaints, and anxious/depressive symptoms).

What are the critical findings?

1) Among youth in foster care, the majority were likely to be separated from their siblings, and wanted more contact with their siblings from whom they were separated.

2) Youth who had more contact with siblings reported they “get along” better with their sibling than those with less frequent contact.

3) Perceptions of sibling relationships mediated the association between trauma and internalising problems, i.e. having a positive perception of sibling relationship including perceiving the relationship as positive, having a desire for more contact, and seeing their siblings more frequently mediated the relationship between trauma and internalising problems.

What are the implications for practice?

1) Barring safety or child welfare concerns, it is vital that child welfare practitioners maintain relationships with siblings when placed in foster care.

2) When siblings are not placed together, regular contact with siblings is critical to maintaining the sibling relationship.

3) Providing training about the importance of sibling ties to practitioners and foster parents may promote greater investment in sibling access and visitation.

4) Sibling relationships may be the only biological support youth have. It is possible that this type of support may offset some of the negative outcomes that youth who age out of the foster care system often face such as homelessness.

5) Promoting positive sibling relationships for youth in foster care may be important for youth who age out of the foster care system. If sibling relationships are not nurtured while in care, there is a chance these connections and potential sources of support may be lost.

6) Having an awareness and understanding of the potential protective nature of a positive sibling relationship in mitigating the likelihood of mental health problems is paramount.
What is this article about?

1) Reports the findings of a US-based quantitative research study of former foster youth examining father-child contact between fathers who aged out of foster care and their children.

2) Explores the effect of remaining in foster care after age 18 on father-child contact when fathers are aged 26.

What are the critical findings?

1) Fathers who remained in care after age 18 had more contact with their children at age 26.

2) Time in care was positively associated with daily father-child contact and co-residence with child.

3) A negative association was found between time in care and having a criminal record, while a positive association was found between time in care and employment.

4) Many participants were found to be living with mental health issues, particularly PTSD. Such problems were negatively associated with father-child contact.

What are the implications for practice?

1) Policy and practice must pay more attention to the needs of foster youth who become fathers before and after age 18. Their status as parents can influence their own well-being during the transition to adulthood.

2) Efforts directed toward reducing young men’s involvement with the criminal justice system and assisting young men with obtaining and maintaining employment may improve their prospects for sustaining relationships with their children.

3) That so many young men were found to be living with mental health issues and these problems were negatively associated with father-child contact emphasises the need to attend to the mental health of male foster youth.

4) Findings suggest that allowing young men to remain in care past 18 may facilitate greater contact between young fathers and their children, partially by reducing conviction, facilitating employment, and increasing co-residence with their children’s mother.

5) Through providing services to young at-risk fathers, the child welfare system may potentially lessen the intergenerational transmission of disadvantage.
Organisational Profile

Who are they?
The Children and Youth Programme (CYP) is an academic, independent research programme, focusing on the well-being of children and youth in Ireland and Northern Ireland, using a rights-based approach. The guiding principles of the CYP are:
- To adopt a rights-based approach;
- To retain academic independence;
- To develop an all-island focus;
- To ensure that the voice of children and youth is present.

What do they do?
During the period 2013 to 2015 CYP will maintain a focus on policy impact through collaborative relationships with policy makers, practitioners, researchers, children and youth and other stakeholders. It will work towards achieving a series of outcomes in five key areas:
- Thematic Policy Reports
- Child Rights Indicators
- Children and Youth Influencing Policy
- Child Rights Based Training and Professional Development
- International Programmes on Children and Youth

Reports completed to date include (available on the CYP website):
- Education for Civic Engagement in Post-primary Schools in Ireland and Northern Ireland: A Rights Perspective. (2013)

Where can I find out more?
http://childrenandyouthprogramme.info
Practice Links

Podcasts/Videos

Reading Social Work Blogs
What is a Blog? A blog is a personal web page written by an individual or organisation. Usually it incorporates personal views, opinions and comment on topic issues. The best blogs are read by thousands of people everyday.

How do I find them?
Just search for the word “blog” and any topic you are interested in. It may take some time to find a site you are happy with. Once you find the right one you might want to access it everyday. The best blogs include links to other sites of interest. To start you off check out: http://www.socialworkblogs.info/

How do I write my own blog?
It is simple to right your own blog – use sites like Wordpress.com, Simplesite.com or Blogspot.com – there are a range of simple guides available. The secret is to link to other sites, get people interested.

Warning: as Social Workers we need to be mindful of what we write about our work and in particular our clients. If you do write your own blog or contribute to an online debate then make sure you do not mention names, places or anything that could identify anyone you work with.

Audio & Video Podcasts
What is a Podcast? A multi-media file made available by the internet which can be viewed or listened to on a computer, tablet, MP3 player or CD player.

How do I listen to a Podcast? You can listen to a Podcast straightaway on any PC which has speaker or a headphones or you can download it to listen to later. The file can also be saved to an MP3 player or USB memory stick. Some modern CD players can play Podcasts just like a music CD. Some Podcasts are updated regularly – how do I get the latest version? You can use iTunes or other services to check regularly to see if the Podcast has been updated. You can also subscribe using an RSS feed which will inform you when the new edition is ready. Some Smartphones can also download and update Podcasts. For more information go to: http://www.bbc.co.uk/podcasts/help.

Video: Getting to know the person with dementia - the impact of diagnosis
Key messages for practice:
1. Understanding the person with dementia helps to provide person centred care and support.
2. Sometimes people with dementia are upset about the changes they are experiencing; they need support to deal with how they feel, different people have different emotions.
3. Getting to know the person with dementia will help them to maintain their independence and dignity. It will help to ensure they are treated as an individual; this is really important to the person with dementia.
4. People with dementia still have interesting lives; we need to look past their dementia.

What is the video about? This film introduces 6 people who have been diagnosed with dementia. Understanding the person with dementia helps to provide person centred care and support. http://www.scie.org.uk/socialcaretv/video-player.asp?v=gettingtoknowthepersonwithdementia&dm_i=4O5,lZXNG,1ZOD2,76QT0,1

The videos of keynote presentations are now available to watch back on: http://swconf.ucc.ie/videos/2013/vids/ . PowerPoint slides from presenters at this conference can be downloaded here: http://swconf.ucc.ie/slides/slides13/
Podcasts

Audio: Talking About Suicide
Podsocs, the podcast for social workers on the run, brings you topics of interest for all human services practitioners, students and academics. Available at:
http://podgallery.org/podsocs-social-work-podcasts/

Audio: Introduction to DBT
Dialectic Behaviour Therapy is about learning how to deal with the opposites in life. It’s both a way of viewing the world and a method of persuasion. In a clinical setting, it means coming to terms with the idea that the world is made up of all sorts of opposites. You have to learn how to juggle the demands of two different, opposing forces in your life. Available at: http://socialwork.columbia.edu/news-events/swm-004-dialectical-behavior-therapy-clinical-social-work-tony-dubose-0#sthash.0Y81n1El.dpuf

Blogs: Social Work
A wide list of social work blogs from the US and worldwide. these blogs cover a wide range (though certainly not all) of the opportunities available in the social work field and will hopefully give social workers of all levels, especially students and those recently graduated, the perspective they need to find their passion - check them out to see what fellow professionals are saying: http://www.socialworksearch.com/webring/?start=15 or at http://www.bestsocialworkprograms.com/top-30-blogs-for-social-workers-2012/

Podcast: Elder Abuse
The term "elder abuse" is one of those that can raise hackles the moment you hear it. Yes, there are examples of physical and emotional abuse. But often, the abuse of senior citizens has a financial component, as friends and even relatives take advantage of ageing people, and mess with their finances. Explore the topic further at: http://www.oregon.gov/dhs/spwpd/pages/abuse/index.aspx

Video: Community Engagement
How to get your community engaged around local resilience building projects. Inspired by the work of Transition Towns. A wide variety of tips which can be used in a variety of settings. Available at: http://www.youtube.com/watch?v=aEC0A9xkgU and also at http://www.youtube.com/watch?v=MtZMEFiFDeI

Video: Teenage Suicide
In this video created by Mayo Clinic, teens describe common signs that a teen is considering suicide and provide encouragement for communicating directly and immediately for support and safety. It also includes suggestions for what to say to a teen who may be at risk for suicide and ways to keep them safe. Available at: http://www.youtube.com/watch?v=3BByqa7bhto

Video: Let’s Talk Film Series. Irish resources addressing dying and loss
http://www.compassionatecommunities.ie/lets-talk-series Videos created by Compassionate Communities.
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