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New look

Practice links

We have redesigned Practice Links over the summer. We hope you like the new design!

Kenneth, Kerry, Steve, Eavan and Robert
As part of its commitment to the UN Principles for Responsible Management Education (UN PRME), the Kemmy Business School's Centre for Project Management will host an International Conference on Managing Projects in the Non-Profit Sector on 20th / 21st October 2014 at the University of Limerick, Ireland. The conference theme is Delivering Social Good, and it will bring together academic and practitioner perspectives to discuss the challenges and opportunities faced by the non-profit sector. Areas covered will include international aid, disaster preparedness and recovery, development, poverty reduction, healthcare, education, environmental protection, human rights, community development, arts and culture. In each of these areas, non-profit organisations ranging from international non-governmental organisations, to nationally-focused advocacy and special interest groups, to community based organisations, are playing an increasingly important role in addressing societal needs, delivering services, and advocating or campaigning for change all around the world.

The conference will explore diverse stakeholder perspectives and share examples of project management practices in the sector, thereby enabling participants to learn from others' experiences. Key objectives of the conference are to develop a network of project management practitioners and academics working in the sector, to explore how cross-sectoral collaborations can help non-profit organisations achieve their objectives, and to develop opportunities for future collaboration between practitioners and academics. http://www.pm4good.net
Disseminating Your Research
Friday, 3rd October from 9.30 - 1
St Andrews Resource Centre, Pearse Street, Dublin 2
€5 members students and unemployed/ €10 non-members
This seminar is targeted at research-minded practitioners who would like to develop skills and knowledge in disseminating research. Click here for more details and to book your place.

Working with Adolescents in the Context of the Family: Roadmaps and Toolkits
Friday, 10th October from 9.30 - 1
St Andrews Resource Centre, Pearse Street, Dublin 2
€5 members students and unemployed/ €10 non-members
Topics include engaging adolescents, engaging adolescents & families, sharing resources for individual and family work and case examples/illustrations. Book online to secure your place.

Empowering People in Care - Advocacy in Action
Wednesday, 15th October from 9.30 - 1
St Andrews Resource Centre, Pearse Street, Dublin 2
€5 members students and unemployed/ €10 non-members
This seminar will be presented by Joanne Seery and Larissa Comiskey, advocacy officers with EPIC. To see more details and to book your place click here

Social Workers in Disability Conference & AGM
Friday, 17th October 2014
Ashling Hotel, Parkgate Street, Dublin
Details to be announced shortly
"Nine Men and an Inhaler: The Crisis of Provenance and Providence of Information in the Digital Age and Why We Need to Talk About It"

Social Sciences ConneXions at Limerick Institute of Technology cordially invites you to the "Autumn Series" of lunchtime lectures. These informal lunchtime talks are designed to encourage dialogue about new directions, issues and opportunities for collaboration within research. Researchers, teaching professionals, students, practitioners and anyone interested in joining the conversation are encouraged to attend; a light lunch will be provided.

Tues. October 21, 2014 - 1:00p.m. - Ms. Karen Sugrue - Psychotherapist and Lecturer in Sociology at Limerick Institute of Technology. Additional lectures in series on Tues. Nov. 4, 2014 - 1:00p.m. and Tues. Nov. 18 - 1:00p.m. - speakers and topics to be announced. The Autumn Series lectures will take place in room 3A01 at Limerick Institute of Technology, Moylish Campus. For further information please contact jennifer.stritch@lit.ie or call 061-293-488.

The New Capacity Bill

The New Capacity Bill, full day seminar, will be held in the Rochestown Park Hotel on the 12th November 2014. This will be lead by Dr Mary Keys, NUI Galway. It will focus on the challenges that the assisted decision making (Capacity) Bill will present to all health and social care workers. This bill will affect all areas of health and social care i.e. mental health, disabilities service, hospitals, nursing homes, care of the elderly and child protection. For further details contact www.capability.ie.
Presented by Dr Amanda Jones

This workshop will address the role of affective neuroscience as a theoretical framework for the practitioner working with clients experiencing mental and emotional difficulties.

Amanda will use Jaak Panksepp’s model which suggests that the ancient subcortical regions of mammalian brains contain at least 7 genetically driven instinctual emotional systems:

- **Seeking System**: companionship, consumption, comfort and curiosity
- **Care System**: the urge to nurture and protect
- **Panic/Grief System**: loss, separation and sadness
- **Fear System**: anxiety
- **Rage System**: anger
- **Play System**: social play and joy
- **Lust System**: sexual excitement

These primitive emotions are important throughout life but especially during certain points of the life cycle, in particular babyhood, when the brain is developing at a rapid rate and a baby is learning how ‘to be’ themselves within their core attachment relationships and parenthood, when an adult becomes a parent.

This workshop aims to integrate current research in affective neuroscience and clinical practice when working with infants and adults alike.

Dr Amanda Jones is a consultant perinatal psychotherapist and clinical lead of North East London NHS Foundation Trust’s Perinatal Parent Infant Mental Health Service, and Honorary Associate Professor of Warwick Medical School. In collaboration with the Anna Freud Centre, Amanda was the therapist in the Channel 4 documentaries ‘Help me love my baby’, winner of the 2007 Royal Society of Television’s best factual programmes award.

With the NSPCC and Warwick Medical School she has recently made 5 further documentaries called ‘Breakdown or Breakthrough: pregnancy, birth and the first 18 months of life’. Amanda speaks at national and international conferences on psychodynamic parent-baby treatment and contributes in several governmental policy groups to enhance understanding of perinatal breakdowns.

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**The MINDBRAIN and Parental Mental Health 01.11.2014 booking form - PLEASE WRITE CLEARLY!**

Name: _______________________________________________________________________

Email: _______________ Tel: _______________

Job title: ________________________ Organisation: ________________________________

**Fee: €70 (inclusive of refreshments).**

Return booking form by October 17th with payment to Regina Walsh, The Bessborough Centre, Blackrock, Cork.

Please make cheques payable to The Bessborough Centre. Payments are non-refundable.

Email: training@bessborough.ie Tel: 021 435 7730 www.bessborough.ie
Continuing professional development

Unity through Relationship
Our Common Way of Being

REGENCY AIRPORT HOTEL, DUBLIN
10th - 14th NOVEMBER 2014

This ground-breaking international conference is aimed at drawing together the various approaches and contributions relating to social care and education, with champions from academia, social work, social care, youth work and other established disciplines, at one venue for a week-long event.

There will be three days of conference presentations followed by two days of certified trainings based on various approaches.

It is intended to commence a dialogue in pursuit of synergies and unified practice with recognition of the centrality of relationship as the core of all our work.

The aim of the conference is to promote best practice for children in care and aftercare as well as children and their families requiring home or community-based support both nationally and internationally.

The week commences on Monday 10th at 9.30am with a CYC Master Class.

The main conference will launch on Monday 10th at 2.00pm and finish on Tuesday 11th at 5pm.

This will be followed by the SPDN event on Tuesday commencing at 5.30pm and finishing on Wednesday at 5pm.

The event is being hosted by GATEWAY www.gateway.ie and TRANSFORMACTION INTERNATIONAL www.transformaction.com in association with EMPOWER IRELAND www.empowerireland.ie

For more details and a comprehensive brochure: http://www.unitythroughrelationship.com
The latest edition (2013) of the Diagnostic Statistical Manual (DSM) V has once again intensified the debate about the value of psychiatric diagnoses in understanding and responding to a wide range of human experiences of emotional distress. This conference, now in its 6th year, aims to explore critical perspectives on and creative responses beyond psychiatric diagnoses.

Confirmed Keynote Speakers:

Wilma Boevink, experiential expert, works as a social scientist at Trimbos-Institute, the Netherlands. She is a former Professor of Recovery and founder of Tree (towards Recovery, Empowerment and Experiential expertise). Currently finishing her thesis on recovery, empowerment and experiential expertise.

Stuart Neilson lectures and writes about the autism spectrum and mental health in Adult Continuing Education UCC, incorporating his personal perspective as a client. He feels that his own interactions with mental health services benefited immeasurably from a diagnosis of Aspergers syndrome in adulthood.

Pat Bracken, Consultant Psychiatrist and Clinical Director, West Cork Mental Health Service. One of the founders of the Critical Psychiatry Network (http://www.criticalpsychiatry.co.uk/) Author, with Phil Thomas, of Post psychiatry: Mental Health in a Postmodern World.

Olga Runciman, psychiatric survivor and chair of the Danish HVN, is today a psychologist working with and offering therapy to those who are often denied therapeutic help due to 'severe mental illness'. She sees the hearing voices movement as post-psychiatric, working towards the recognition of human rights while offering hope, empowerment and access to meaning making. She has worked extensively with trauma and abuse and is an international speaker as well as writer, campaigner and artist.

David Harper, Reader in Clinical Psychology, University of East London. Co-author of Deconstructing Psychopathology and co-author/editor of Psychology, Mental Health & Distress (the first undergraduate psychology mental health textbook to include a chapter by experts by experience: Peter Campbell, Jacqui Dillon & Eleanor Longden). D.harper@uel.ac.uk

www.uel.ac.uk/research/profiles/psychology/davidharper/

Jim Walsh is a self-proclaimed sceptic toward all that is accepted as certainty, or proclaimed to be 'truth'. Despite growing up in Northern Ireland at the height of the ‘troubles’, being subject to prolonged societal and environmental ‘stressors’ he still thinks himself lucky in life. He is grateful to have met some inspirational and principled individuals on his life journey, to be a father of two wonderful kids and partner to Ramune, who bakes the best cakes in the world.

http://www.iimhn.ie/critical-perspectives-on-and-beyond-psychiatric-diagnoses/ (registration)
Continuing professional development

Rights, Re-Structuring and Results: Global Reflections and Irish Realities
November 13th & 14th 2014

Annual Maynooth University Community Development Conference In association with The Community Workers Co-Operative

International Guests to include:

Marjorie Mayo, London, UK
Liz Weaver, Ontario, Canada,
Lena Dominelli, Durham, UK
Jane McAlevey, New York, USA (tbc)

This conference provides an annual space for reflection, analysis & discussion among practitioners, activists, leaders, agencies and officials. Places are limited so please reserve yours in advance by emailing to: communitywork@nuim.ie

A small contribution of €25 is welcomed from waged workers & organisations. Accommodation is available at Maynooth University: www.maynoothuniversity.ie/accommodation


LET’S TALK ABOUT LEAVING CARE

To celebrate the 2nd Annual National Care Leaver’s Day EPIC and Care Leaver’s Ireland are hosting an innovative conference aimed at young people moving towards Aftercare, in Aftercare and Aftercare Professionals.

The Conference will be opened by – Dr. James Reilly T.D., Minister for Children and Youth Affairs.

Date - 2nd October 2014
Time - 10.00 – 4.15
Venue - Dublin Castle
Booking Fee
Professionals €50.00; Students €25.00; Care Leavers/Young People in Care 16 + FREE

For online booking please visit
http://www.eventbrite.ie/e/lets-talk-about-leaving-care-tickets-12681792583?aff=es2&rank=1

or Contact info@epiconline.ie
Mentalizing Skills Workshop
with Gerry Byrne and Dr Evelyn McCabe

Suitable for practitioners with some knowledge of MBT*. Limited to 50 places

Friday November 14th 2014, 9.30 to 5.00pm

The Board Room, St Steven’s Hospital
Steven’s Lane, Dublin 8

This workshop will provide attendees with opportunities for the development of their mentalizing skills using modelling by tutors, role-play in small groups and one to one role-play with an actor under the supervision of Gerry Byrne and Evelyn McCabe. Skills will include maintaining the basic mentalizing stance, clarification, exploration, challenge and affect focus. Some attendees (depending on number of requests) will have the opportunity to work under supervision on challenging scenarios from their own clinical practice/workplace.

*Attendees should have some knowledge of MBT, for instance, have already completed MBT Basic Training, MBT Skills Training or similar or be utilising MBT skills in practice.

Gerry Byrne is a Consultant Nurse and Child and Adolescent Psychotherapist (Tavistock) and Clinical Lead for the Family Assessment and Safeguarding Service (FASS), the ReConnect Service and the Infant Parent Perinatal Service (IPPS). He is based in Oxford, UK. He is a Mentalizing Skills trainer at the Anna Freud Centre. In April 2014, with Peter Fonagy and Anthony Bateman he ran the first MBT Basic Training in Ireland and has developed an MBT programme for parents which is currently underway in Buckinghamshire (ReConnect) and is being independently evaluated by the Anna Freud Centre/UCL.

Dr Evelyn McCabe is a Consultant Psychiatrist in General Adult Psychiatry with a special interest in Psychotherapy and is based in Galway Mental Health Services. Dr McCabe set up and ran the first Metallisation Based Therapy treatment programme in the Republic of Ireland in Galway. She has trained in Basic and Advanced Metallisation Based Therapy at The Anna Freud Centre with Anthony Bateman and Peter Fonagy and is a Mentalizing Skills trainer.

Mary Byrne
65 Hermitage Drive,
Rathfarnham,
Dublin 16
(Contact @ 0871856831 / byrnemry@hotmail.com)
Safeguarding infants from abuse and neglect
Monday 24th November, 9.30am - 4.30pm

Presented by Professor Harriet Ward

This one-day workshop will focus on the issues practitioners face in making appropriate decisions concerning permanency plans when babies and infants are suffering or likely to suffer significant harm. It will include presentations of research findings, discussions of their applicability and practical exercises using real life examples.

The following issues will be covered:

- The impact of neglect and abuse on early childhood development
- Risk and protective factors in families where children are likely to suffer significant harm
- Issues concerning identifying and responding to neglect
- Delayed decisions - their causes and consequences
- Assessing parental capacity to change, including during pregnancy


Harriet Ward is Professor of Children and Family Research at Loughborough University, UK. Professor Ward has over 20 years of experience as a social work practitioner, a researcher and policy advisor. Until recently Professor Ward directed Loughborough’s Centre for Child and Family Research and co-directed the Childhood Wellbeing Research Centre, UK.

Professor Ward’s current research studies include a seven year prospective longitudinal study of infants suffering, or likely to suffer significant harm, the development of a pre-birth risk assessment pathway (with University of Warwick), reviews of the evidence concerning timeframes for responding to indicators of abuse and neglect in early childhood and parental capacity to change and outcomes of open adoption in Australia.

Safeguarding infants from abuse & neglect 24.11.2014 booking form - PLEASE WRITE CLEARLY!

Name: __________________________________________
Email: ____________________ Tel: ____________________
Job title: ____________________ Organisation: __________

Fee: €75 (inclusive of refreshments).

Return booking form by 10th November with payment to The Training Department, The Bessborough Centre, Blackrock, Cork. Please make cheques payable to The Bessborough Centre. Payments are non-refundable.

For more information, email: training@bessborough.ie call: 021 435 7730 or visit www.bessborough.ie
Children whose parents have been incarcerated have often been referred to as “invisible victims of crime and the penal system”. It is well accepted that the absence of a parent for a prolonged period of time will affect the physical and mental wellbeing of all family members including children. Moreover, it can affect the academic performance of children and may trigger bullying and social exclusion. It will inevitably impact negatively on the family’s finances. At the same time, evidence shows that supporting prisoner’s families has positive outcomes for them as well as the wider community with prisoners being more likely to successfully reintegrate as a result.

UCC School of Law are hosting a one day international Conference of an interdisciplinary nature highlighting the rights of children affected by family imprisonment. The aim of this innovative event is to bring together key professionals, researchers as well as those actively working in this area to share best practice and knowledge. Key note speakers will include the world renowned Justice Albie Sachs, a former Judge from the South African Constitutional Court. Other international experts in this area will share their specialist expertise such as Ben Raikes, Senior Lecturer in Social Work, University of Huddersfield and Lucy Gampbell, Director of Children of Prisoners Europe. This event will also provide a platform for the NGO sector as well as those directly affected by family imprisonment. A unique Children’s Art exhibition, to be hosted in Jennings Art Gallery UCC, will provide attendees with a critical insight into the views of children and young people affected by imprisonment in Ireland.

The event is kindly supported by the Irish Research Council, UCC Strategic Research Fund, UCC College of Business and Law and the Centre for Criminal Justice and Human Rights, UCC.


For registration details: please contact School of Law, Events Manager: Noreen Delea n.delea@ucc.ie; 021 4903220.

For event information please contact the conference convenors: Dr Fiona Donson (f.donson@ucc.ie) / Dr Aisling Parkes (a.parkes@ucc.ie)
Continuing professional development

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 or call 023 80 487 592
Work with the Inner Critic
Introduction to the Development of the Competency to Work with the Client’s Inner Critic
Mick Devine MA, MACI

Saturday December 6th 2014, 9.30 am to 4.30 pm
St Dominic’s Meditation Centre, Montenotte, Cork
Cost €95     6 CPD Credits with Addiction Counsellors of Ireland

Aim
To foster a climate of trust so as to facilitate a process with a group of participants to empower them to become aware of the agency of the inner critic and its limiting effect on the helping process. Once this is achieved the aim is to teach the skills needed to support the client defending and disengaging from the inner critic.

For Whom?
Addiction Counsellors, Counsellors, Community and Outreach Workers and Carers with good personal development and experience working with those with addiction issues.

Care Planning - With SMART Goals
Mick Devine MACI
Cost €95
Saturday November 15th 2014 9.30 am to 4.30 pm
St Dominic’s Meditation Centre, Montenotte, Cork
Approved for 6 Continued Professional Development Credits with Addiction Counsellors of Ireland

Aim: To foster a climate of learning so participants can develop competencies of facilitating clients in devising Care Plans with SMART Goals.

For Whom? Addiction Counsellors, Counsellors, Community and Outreach Workers, Carers wanting to develop helping skills and others engaged in roles where assessment and care planning is an integral part of the caring role.

Who is the Presenter for both courses?
Mick Devine MA, Advanced Diploma in Counselling, Certificate in Family Systems and is a MACI. He has 17 years’ experience in the field of addiction treatment as Counsellor, Administrator, Manager and Clinical Director. He is a student of the Diamond Approach to personal and spiritual development for over 12 years.

Booking
Contact Mick Devine at 087 4171422 and at mick.devine@hotmail.com.
Early booking advised. Closing date for booking Monday November 10th 2014
Send fee to secure booking to;
Mick Devine, Ait an Stóir, Rathnaroughy, Innishannon, Co. Cork
National Programme for Screening and Brief Interventions (SBI) for Problem Alcohol & Drug Use (One Day Course)

Aim
This course aims to prepare nurses, midwives, health and social care professionals to implement Screening and Brief Interventions (SBI) for problem substance misuse.

Course Content
The key course content which emerges from the course learning outcomes is outlined below:

- Evidence for the effectiveness of SBI.
- Alcohol and drug related presentations to health and social care settings.
- Contemporary models of SBI for problem alcohol and drug use.
- Overview of the SAOR model of intervention for problem alcohol and drug use.
- Establishing a supportive working relationship with the service users.
- Asking about alcohol and drug use and screening for alcohol and drug related problems.
- Delivering a structured brief intervention based upon the SAOR model.
- Developing appropriate care pathways for service users and arranging appropriate follow up.
- Accessing useful links and reference materials for further reading and research.

Target Groups
The primary target audience is nurses, midwives and allied health and social care professionals who are in a position to offer Screening and Brief Interventions to service users presenting with problem alcohol and drug use.

Dates: Thursday 18th September 2014 Time: 9.30 a.m. - 5.00 p.m. Venue: Killarney Co. Kerry
Dates: Thursday 9th October 2014 Time: 9.30 a.m. - 5.00 p.m. Venue: Cork City
Dates: Thursday 16th October 2014 Time: 9.30 a.m. - 5.00 p.m. Venue: Cork City
Dates: Tuesday 4th November 2014 Time: 9.30 a.m. - 5.00 p.m. Venue: Cork City
Dates: Thursday 13th November 2014 Time: 9.30 a.m. - 5.00 p.m. Venue: Cork City

Please click here to download the application form and return the completed form to marwin.jagoe@hse.ie
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 and follows a 30-year European tradition with similar initiatives on-going in some of the highest ranked Universities in Europe. CARL has produced impressive and important pieces of research that have generated 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 the CARL 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 at this time.

How long does this take?
The typical time-scale for projects would be a) proposals submitted by groups, b) review of proposals 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 or October.

Projects must be small enough to be completed within the academic year, roughly 9-12 months. 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 and read sample reports?
Please visit our website to watch brief videos about CARL, to find out what it is like to participate http://www.ucc.ie/en/scishop/, or to read past research project reports http://www.ucc.ie/en/scishop/rr/

Does it matter what the research topic is about?
Topics that are connected to any discipline at UCC are welcome (science, maths, engineering, social sciences, arts, humanities, business, law, etc.)

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

We look forward to hearing from you!
New publications and policy reports

Total Direct and Indirect Tax Contributions of Households in Ireland by Micheál L. Collins (August 2014)

New research on the total amount of tax Irish people pay finds that the poorest 10% of households pay a larger share of their income in tax than the richest 10%. When income tax and indirect taxes such as VAT are included in the calculations the study conducted by the Nevin Economic Research Institute finds that:

1. The poorest 10% of households pay just over 30% of their income in taxes - mostly in the form of indirect taxes levied on the things they spend money on.
2. The richest 10% spend 29.5% of their income on tax - mostly in the form of direct income tax.


Age Action for All Older People Pre - Budget Submission 2015 by Age Action (June 2014)

Age Actions pre-budget submission includes recommendations on the following areas:
Income - Related Supports
Health and Social Care
Access to Services
Ageing and Development
Employment, Lifelong Learning and Positive Ageing


Understanding Emotional, Psychological and Mental Health disability in Ireland: Factors Facilitating Social Inclusion by Dorothy Watson and Bertrand Maître (September 2014)

This report uses the data from the National Disability Survey 2006 to look at people with enduring emotional, psychological and mental health disability, and the extent to which those with this condition may have other forms of disability also. It highlights the interlinkages between physical disability and mental ill-health, illustrating the importance of physical disability services supporting people in relation to mental health, and of mental health services linking in with supports for physical disability. People with mental health conditions are less likely to be currently working than the population at large but, most have worked in the past. The research highlighted stigma as a significant barrier for those with mental health conditions.


Poverty and Income Distribution, Policy Briefing by Social Justice Ireland (July 2014)

Almost one in five children live in households with incomes below the poverty line (18.8%). Overall children represent one quarter of Irelands poor. Increasingly many of those who are living in poverty are actually in work. Social Welfare is the key instrument to lifting people out of poverty and the recession has led to a major increase in deprivation. Similarly we know that young people have been hit hardest by this current recession. Likewise our society is getting more unequal at this time.

New publications and policy reports

It’s a lonely journey: A Rapid Evidence Assessment on Child Sexual Abuse within the Family Environment (children and young people’s version) Children’s Commissioner (UK)

Link: http://www.childrenscommissionergov.uk/content/publications/content_822

It’s a lonely journey: A Rapid Evidence Assessment on Child Sexual Abuse within the Family Environment (full version) Children’s Commissioner (UK)

Excellent, up-to-date literature review on CSA within the family environment.
Link: http://www.childrenscommissionergov.uk/content/publications/content_821

Spaces to be Me: Quality Environments in Early Years Services

ISBN 978-1-906004-29-3

Price: €25.00

Spaces to Be Me supports early years educators with the ideas, knowledge and resources needed to provide quality environments for the children with whom they work.

ChildLinks - Issue 1, 2014 Children's Health

This latest edition of ChildLinks contains articles from the Growing Up in Ireland Study; the Cork Children’s Lifestyle Study; Barnardos; Child and Health Screening, HSE; The Children’s Sports Participation and Physical Activity Study; and two early years educators.

Irish Youth Work - Scene Magazine

Quarterly magazine aimed at youth work practitioners:
http://www.youthworkireland.ie/youth-work-centre/overview/iywc
New publications and policy reports

**What’s Food Got to Do With It? Food Experiences of Asylum Seekers in Direct Provision** by Keelin Barry for NASC (May 2014)

What’s Food Got to Do With It? documents the food issues asylum seekers experience living in direct provision, the accommodation system set up to house asylum seekers while their applications for refugee status are pending. The report is based on a research study which was conducted by Keelin Barry for a Masters in Public Health thesis in 2011 with the support of Nasc. As part of the research, Keelin interviewed asylum seekers living in direct provision accommodation centres in Cork City about their experiences with food. Main finding include: asylum seekers describe the food in direct provision as inedible, monotonous, too strictly regulated and culturally inappropriate; it does not represent the cultural and religious needs of residents; and it has a negative impact on the health and well-being families and children particularly.


**Review of Elder Abuse Services 2013** by the HSE(September 2014)

The Health Service Executive, Republic of Ireland, recently published its 6th review of the HSE’s Elder Abuse Services for 2013. In 2013, the HSE received 2,437 referrals of elder abuse to its service. This represented a marginal decline of 1% in referrals in 2012. However, this should be viewed in the context of a 30% increase in the number of referrals since 2008.


**Tracing Leaflets for adopted adults, birth parents and adoptive parents:**

[http://councilofirishadoptionagencies.com](http://councilofirishadoptionagencies.com)

**Quality Adult-Child Interactions in Early Years Services**

Price: €25.00. ISBN 978-1-906004-30-9 This book aims to support early childhood practitioners to explore current theory and best practice on the central core role of their profession: relationships and interactions, quite simply on ‘being with’ young children. It will guide practitioners in their day-to-day practice and can be used as a tool for continuing professional development.

**The Psychology of Emotion in Restorative Practice**

How and why does restorative practice (RP) work? This book presents the biological theory, affect script psychology (ASP), behind RP, and shows how it works in practice in different settings. ASP explains how the central nervous system triggers ‘affects’ which are the basis of all human motivation and emotion. The book presents a clear explanation of what ASP is, how it relates to RP, and how ASP helps practitioners to understand relationships, emotions and dynamics in their work. The chapters are based around case studies which demonstrate RP in criminal justice, organisational and education settings. They show how theory links to practice, and how having a deep understanding of the theory has helped practitioners to be successful in their work. Providing an accessible explanation of how RP works, this book will be invaluable to all RP practitioners in any setting, as well as RP students and academics. [http://www.jkp.com/catalogue/book/9781849059749](http://www.jkp.com/catalogue/book/9781849059749)
Helping Adolescents and Adults to Build Self-Esteem (2nd Edition)
Packed with activities and helpful advice, this resource is designed for professionals working to help adolescents and adults break the destructive cycle of low self-esteem.

This fully updated new edition of Deborah M. Plummer’s popular resource is filled with practical ideas for building healthy self-esteem. Easy-to-use photocopiable activity sheets encourage participants to use existing skills and develop new techniques to nurture confidence and feelings of self-worth. These are complemented by relaxation and breath control exercises, and expanded theoretical chapters that explains what healthy self-esteem is, why people may have low self-esteem and the consequences that can result from it.

Suitable for work with individuals and groups in a wide range of educational and therapeutic settings, this resource will prove indispensable to teachers, speech and language therapists, professionals working in adult education centres, counsellors at schools and universities, social workers and other individuals working with young people. [http://www.jkp.com/catalogue/book/9781849054256](http://www.jkp.com/catalogue/book/9781849054256)

Social Care: Learning From Practice
(1 free copy available for a book review - email k.burns@ucc.ie)
Written by social care workers, this unique multi-contributory book draws on insightful stories of practice to discuss the key issues that impact on social care today.

- Provides a wealth of practical knowledge from the experiences of social care workers who have worked with different groups in diverse settings.
- Goes behind the rhetoric and theory to examine the unpredictable, difficult and challenging aspects of social care work.
- Draws from real-life case studies illustrating both positive and negative experiences and outcomes, and examines the tasks and core competencies of social care work.
- Reflects on the professionalisation of social care as a vital service utilised by Tusla (Child and Family Agency), the Health Service Executive and other stakeholders.
- Discusses the evolution of social care from residential child care to an expanded, multifaceted and integrated practice.
- Details the establishment of the representative body Social Care Ireland (SCI) in 2011, which is made up of the Irish Association of Social Care Workers (IASCW), the Irish Association of Social Care Management (IASC) and the Irish Association of Social Care Educators (IASCE).

Written For:
- Students of Social Care
- Social care workers preparing for continuing professional development (CPD), and allied health and social care professionals
- Those interested in a career in social care educators, managers and policy-makers. [http://www.gillmacmillan.ie/social-studies-uni/social-studies-uni/social-care](http://www.gillmacmillan.ie/social-studies-uni/social-studies-uni/social-care)
The Community Reinforcement Approach (CRA) and Community Reinforcement Approach and Family Training (CRAFT)

Substance abuse is one of the most prevalent health and social care dilemmas in Irish society. This is noted increasingly at a policy level. Documents such as: the Irish National Substance Misuse Strategy 2009-2016 (Interim) (Department of Community, Rural and Gaeltacht Affairs, 2009), the National Drug Rehabilitation Framework (Doyle & Ivanovic, 2010) and Healthy Ireland - A Framework for Improved Health and Wellbeing 2013-2025 (Department. of Health, 2012) indicate that there is a need to use Evidence Based Practice (EBP) to address public health and social care issues and in particular to treat problem substance use.

The Community Reinforcement Approach (CRA); Community Reinforcement Approach and Family Training (CRAFT) and the Adolescent Community Reinforcement Approach (A/CRA) are empirically-supported behavioural substance abuse programmes. CRA is a treatment for the substance abuser; CRAFT is an intervention for the concerned family members or friends of treatment-refusing individuals with alcohol or drug problems and A/CRA is the adapted version of CRA for young adults and adolescents. All versions of this programme have demonstrated efficacy in treating substance abuse in a number of randomised control trials. These models of substance abuse treatment were transported to Ireland in 2010 for nation wide dissemination in line with national policy for implementing evidence-based practices (EBP) in addiction treatment. These treatments are based on the belief that a person’s ‘community’ (family, friends, job, and social activities) must reinforce and support a clean and sober lifestyle.

In Ireland, CRA has been adopted as one element of a national approach to providing evidence based addiction treatment and prevention across health and social care services in the statutory, community and voluntary sectors. The Blanchardstown Local Drugs Task Force (BLDTF) located in county Dublin, commissioned Professor Bob Meyers, one of the CRA programme promoters from the University of New Mexico (United States), to train 180 service providers during 2010/2011 in Dublin. The introduction of CRA by BLDTF in an effort to implement EBP to address substance abuse was considered to be hugely successful. Since then CRA is being implemented across the country in Local and Regional Drug and Alcohol Task Force areas in an effort to treat those involved in problematic alcohol and drug use.


Department of Community, Rural and Gaeltacht Affairs, (2009), National Drugs Strategy (Interim) 2009-2016, Department of Community, Rural and Gaeltacht Affairs, Dublin.

Godley, S. H., Smith, J. E., Meyers, R. J., and Godley, M. D. (2009), ‘Adolescent community reinforcement approach (A-CRA)’, in Springer, W. D. and Rubin, A. (Eds.), Substance Abuse Treatment for Youth and Adults:
Practice signposts are permanent pages that will appear in every edition of Practice Links. The aim of these pages 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.

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/)

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 Documentation Centre on Drug Use
The National Documentation Centre on Drug Use (NDC) is an information resource that supports researchers, policy makers, educators and practitioners working to develop the knowledge base around drug, alcohol and tobacco use in Ireland. The NDC is funded by the Department of Health, and based within the Health Research Board, which is the lead agency in Ireland supporting and funding health research. [http://www.drugsandalcohol.ie/](http://www.drugsandalcohol.ie/)

Drugs.ie
Drugs.ie is an independent website managed by The Ana Liffey Drug Project. Drugs.ie’s mission is to help individuals, families and communities prevent and/or address problems arising from drug and alcohol use. [http://www.drugs.ie/](http://www.drugs.ie/)
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-consumable, spatially-referenced data about Ireland. http://decisionmap.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

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.

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; 8,500 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 formation and in the provision of services which will ensure all children will have the best possible start in life. http://www.growingup.ie/

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
Interventions for improving the adoption of shared decision making by healthcare professionals

France Légaré, Dawn Stacey, Stéphane Turcotte, Marie-Joëlle Cossi, Jennifer Kryworuchko, Ian D Graham, Anne Lydiatt, Mary C Politi, Richard Thomson, Glyn Elwyn, Norbert Donner-Banzhoff (September 2014)

Background

Shared decision making (SDM) can reduce overuse of options not associated with benefits for all and respects patient rights, but has not yet been widely adopted in practice.

Objectives

To determine the effectiveness of interventions to improve healthcare professionals’ adoption of SDM.

Search methods

For this update we searched for primary studies in The Cochrane Library, MEDLINE, EMBASE, CINAHL, the Cochrane Effective Practice and Organisation of Care (EPOC) Specialised Register and PsycINFO for the period March 2009 to August 2012. We searched the Clinical Trials.gov registry and the proceedings of the International Shared Decision Making Conference. We scanned the bibliographies of relevant papers and studies. We contacted experts in the field to identify papers published after August 2012.

Selection criteria

Randomised and non-randomised controlled trials, controlled before-and-after studies and interrupted time series studies evaluating interventions to improve healthcare professionals' adoption of SDM where the primary outcomes were evaluated using observer-based outcome measures (OBOM) or patient-reported outcome measures (PROM).

Data collection and analysis

The three overall categories of intervention were: interventions targeting patients, interventions targeting healthcare professionals, and interventions targeting both. Studies in each category were compared to studies in the same category, to studies in the other two categories, and to usual care, resulting in nine comparison groups. Statistical analysis considered categorical and continuous primary outcomes separately. We calculated the median of the standardised mean difference (SMD), or risk difference, and range of effect across studies and categories of intervention. We assessed risk of bias.

Main results

Thirty-nine studies were included, 38 randomised and one non-randomised controlled trial. Categorical measures did not show any effect for any of the interventions. In OBOM studies, interventions targeting both patients and healthcare professionals had a positive effect compared to usual care (SMD of 2.83) and compared to interventions targeting patients alone (SMD of 1.42). Studies comparing interventions targeting patients with other interventions targeting patients had a positive effect, as did studies comparing interventions targeting healthcare professionals with usual care (SDM of 1.13 and 1.08 respectively). In PROM studies, only three comparisons showed any effect, patient compared to usual care (SMD of 0.21), patient compared to another patient (SDM of 0.29) and healthcare professional compared to another healthcare professional (SDM of 0.20). For all comparisons, interpretation of the results needs to consider the small number of studies, the heterogeneity, and some methodological issues. Overall quality of the evidence for the outcomes, assessed with the GRADE tool, ranged from low to very low.
Interventions for improving the adoption of shared decision making by healthcare professionals

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Authors' conclusions

It is uncertain whether interventions to improve adoption of SDM are effective given the low quality of the evidence. However, any intervention that actively targets patients, healthcare professionals, or both, is better than none. Also, interventions targeting patients and healthcare professionals together show more promise than those targeting only one or the other.

Plain language summary

When there are several treatments possible, healthcare professionals can involve patients in the process of making decisions about their care so that the patients can choose care that meets their needs and reflects what is important to them. We call this 'shared decision making'. Although the results are better when patients are involved, healthcare professionals often do not involve their patients in these decisions. We wanted to know more about what can be done to encourage healthcare professionals to share decision making with their patients. In our review we identified 39 studies that tested what activities work in helping healthcare professionals involve their patients more in the decision-making process. We learned that any such activity was better than none, and that activities for healthcare professionals and patients together worked somewhat better than activities just for patients or just for healthcare professionals. However, given the small number of studies and the differences across the studies, it was difficult to know which activities worked best. This review suggested ways to better evaluate how much healthcare professionals involve patients in healthcare decisions so that we can understand this process better in the future.

Link: http://onlinelibrary.wiley.com/doi/10.1002/14651858.CD006732.pub3/abstract;jsessionid=645A998497AB9CDCA7250C64C1E6F76A.f04t02
BACKGROUND:
Home visits by health and social care professionals aim to prevent cognitive and functional impairment, thus reducing institutionalisation and prolonging life. Visitors may provide health information, investigate untreated or sub-optimally treated problems, encourage compliance with medical care, and provide referrals to services. Previous reviews have reached varying conclusions about their effectiveness. This review sought to assess the effectiveness of preventive home visits for older adults (65+ years) and to identify factors that may moderate effects.

OBJECTIVES:
To systematically review evidence on the effectiveness of preventive home visits for older adults, and to identify factors that may moderate effects.

SEARCH STRATEGY:
We searched the following electronic databases through December 2012 without language restrictions: British Nursing Index and Archive, C2-SPECTR, CINAHL, CENTRAL, EMBASE, IBSS, Medline, Nursing Full Text Plus, PsycINFO, and Sociological Abstracts. Reference lists from previous reviews and from included studies were also examined.

SELECTION CRITERIA:
We included randomised controlled trials enrolling persons without dementia aged over 65 years and living at home. Interventions included visits at home by a health or social care professional that were not directly related to recent hospital discharge. Interventions were compared to usual care, wait-list, or attention controls.

DATA COLLECTION AND ANALYSIS:
Two authors independently extracted data from included studies in pre-specified domains, assessed risk of bias using the Cochrane Risk of Bias tool, and rated the quality of evidence using GRADE criteria. Outcomes were pooled using random effects models. We analysed effects on mortality, institutionalisation, hospitalisation, falls, injuries, physical functioning, cognitive functioning, quality of life, and psychiatric illness.

RESULTS:
Sixty-four studies with 28642 participants were included. There was high quality evidence that home visits did not reduce absolute mortality at longest follow-up (Risk ratio=0.93 [0.87 to 0.99]; Risk difference=0.00 [-0.01 to 0.00]). There was moderate quality evidence of no clinically or statistically significant overall effect on the number of people who were institutionalised (Risk ratio=1.02 [0.88, 1.18]) or hospitalised (Risk ratio=0.96 [0.91, 1.01]) during the studies. There was high quality evidence of no statistically significant effect on the number of people who fell (Odds ratio=0.86 [0.73, 1.01]). There was low quality evidence of statistically significant effects for quality of life (Standardised mean difference=-0.06 [-0.11, -0.01]) and very low quality evidence of statistically significant effects for functioning (SMD=-0.10 [-0.17, -0.03]), but these overall effects may not be clinically significant. However, there was heterogeneity in settings, types of visitor, focus of visits, and control groups. We cannot exclude the possibility that some programmes were associated with meaningful benefits.

AUTHORS’ CONCLUSIONS:
We were unable to identify reliable effects of home visits overall or in any subset of the studies in this review. It is possible that some home visiting programmes have beneficial effects for community-dwelling older adults, but poor reporting of how interventions and comparisons were implemented prevents more robust conclusions. While it is difficult to draw firm conclusions given these limitations, estimates of treatment effects are statistically precise, and further small studies of multi-component interventions compared with usual care would be unlikely to change the conclusions of this review. If researchers continue to evaluate these types of interventions, they should begin with a clear theory of change, clearly describe the programme theory of change and implementation, and report all outcomes measured.

Link: http://www.campbellcollaboration.org/lib/project/68/
What is this article about?

♦ This article highlights the primary role of relationships when conducting social work research and implementing research findings in practice

♦ A researcher-practitioner continuum is outlined in order to examine the role of relationships in the research process.

♦ Strategies for cultivating genuine relationships with stakeholders that are critical to the use of evidence-based practice (EBP) in social work are also provided

The Researcher-Practitioner Continuum

♦ The level of involvement between scholars and stakeholders strongly influences the implementation of social work research with practitioners.

♦ The researcher-practitioner continuum consists of four types of interaction that can influence the implementation of findings:

  i. Stakeholders as subjects: The purpose of relationships is to simply expedite the process from concept to manuscript. Communication flow one-way from researchers to practitioners.

  ii. Stakeholder engaged research: Involves researchers purposively interacting with community members to develop ideas for studies. Researchers recognise the importance of synthesising past research within the actual context of practice.

  iii. Stakeholder involved research: From the outset of any project, researchers intend to involve stakeholders as active participants. Active participation creates a feedback loop that benefits researchers and community members.

  iv. Community-derived and implemented research: Based on the premise that relationships continue after interpreting findings to carry out follow-up studies focused on translating and implementing results into practice.

Strategies for Cultivating Genuine Relationships in Social Work Research

♦ Diplomacy precedes methodology: Early work involves using relationship skills to build trust so that researchers can learn the different needs of stakeholders. The emphasis is on reciprocal working relationships.

♦ Use stakeholder-centred language: Tailor communication so that the widest spectrum of stakeholders can benefit from the research findings.

♦ Embrace the naturalistic process: Recognise that method selection is an emerging process that occurs through relationships with stakeholders to match appropriate research designs with the unique contexts of specific settings.

♦ Include content on relationships in peer-reviewed journals: Inclusion of this in the methodology or discussion sections of journal articles will provide social context and inform the reader of how authors made decisions.

♦ Relationships as scholarship: Researchers should be afforded the necessary time (by their institution) to cultivate relationships and continue their work beyond publication into practice.
Perceptions of Aftercare Supports


**What is this article about?**

♣ This article reports on a US-based study of youth (n = 48) discharging from a residential treatment family home (TFH) and their parents/caregivers (n = 48) perceptions of aftercare needs, specifically:
   i. Transition planning, family preparedness and aftercare;
   ii. Youth preparedness for the transition period across major life domains (e.g. education, health care, relationships);
   iii. The importance of specific aftercare supports and services.

**What are the critical findings?**

♣ Youth and parent perceptions were compared across the above three areas.

♣ Results indicate differences between youth and parents on perceptions of:
   i. Need for continued supports;
   ii. Likelihood of participation in aftercare programs;
   iii. Youth preparedness for success in relationships, family and independent living domains.

♣ Similarities were found on youth and parent ratings regarding the importance of specific services and supports. Both groups indicated that supports in education were most important and supports in mental health were least important.

**What are the implications for practice?**

♣ The authors note that these findings have potential implications for youth and their parents/caregivers, educators, service providers, researchers, and programme developers.

♣ Youth and parents may benefit from developing resource catalogues to identify the commonly used services that are available in their home community.

♣ Appointments with current health providers prior to leaving care may also help youth and their parents to better understand their current mental health needs, and to identify how to access and obtain medical care upon discharge.

♣ Findings highlight the needs and desires of youth and parents for continued broad services and supports, particularly in domains such as education, relationships and physical health; factors central to the overall wellbeing of youth.

**Methodological Considerations:**

♣ Generalisation of these results is limited as the youth perceptions and the needs of their parents may not be representative of children and families in other residential facilities both within and outside the US.

♣ Scales used to measure the importance of various aftercare domains were each found to be internally reliable but would benefit from additional psychometric information.

♣ As some youth could not be approached by a member of the research team and had to be mailed a survey packet because of an unplanned discharge, it is possible that there could be some response bias within the youth sample.
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
The Rees Centre for Research in Fostering and Education

Who are they? The Rees Centre for Research in Fostering and Education is in the University of Oxford, Department of Education. It receives core funding from the Core Assets Group. It aims to make a difference, through research and its application, to the life chances of children and young people in foster care and those who have experienced care.

What do they do? The Rees Centre aims to identify what works to improve the outcomes and life chances of children and young people in foster care. At the Centre, staff review existing research in order to make better use of current evidence and conduct new research in order to address gaps in knowledge around fostering and education.

Key Principles of Research at the Rees Centre:
- Focus on fostering not adoption;
- User engagement throughout the research process: established consultation groups of LA/independent providers, carers, young people;
- Synthesis of existing international evidence;
- New projects including trials, secondary data analysis & mixed method;
- Provide accessible findings & inviting debate about them - blog, twitter, two-monthly newsletters, regular meetings with key organisations etc.

Publications:
- What works in preventing and treating poor mental health in looked after children?
- The role of the supervising social worker in foster care.
- The impact of fostering on foster carers’ children: An International Literature Review.
- Supporting each other: An international literature review on peer contact between foster carers.
- Why do people become foster carers? An international review on the motivation to foster.

Research Projects:
- Investigating people’s motivation to foster.
- Increasing benefits of foster carer peer support.
- Factors contributing to educational outcomes.
- Siblings together.

Where can I find out more? http://reescentre.education.ox.ac.uk
Living with Dementia Video (11 mins - SCIE).
Click titles to watch the videos (not the image above)

A better way to win the war on drugs
Bart de Koning discusses the War on Drugs and looks at the way we treat addicts. What does his talk contribute to the way we respond to drug use as a society?

Addiction and Trust
A former drug addict himself, Marc Lewis now researches addiction. In order to get over ones addiction, he explains, self-trust is necessary. Unfortunately, self-trust is extremely difficult for an addict to achieve. There are two factors that make it so difficult to get over an addiction: lack of self-control and an inability to put off reward.

The Power of Addiction and Addiction to Power
Canadian physician Gabor Maté is a specialist in terminal illnesses, chemical dependents, and HIV positive patients. Dr. Maté is a renowned author of books and columnist known for his knowledge about attention deficit disorder, stress, chronic illness and parental relations. His theme at TEDxRio+20 was addiction – from drugs to power. From the lack of love to the desire to escape oneself, from susceptibility of the being to interior power – nothing escapes. escape oneself, from susceptibility of the being to interior power – nothing escapes.
About Practice Links

Practice Links is a free e-publication for practitioners working in Irish social services, voluntary and non-governmental sectors. Practice Links was created to help practitioners in these areas to keep up-to-date with new publications, conferences and continuing professional development opportunities. Practice Links is published every other month in Adobe Acrobat (.pdf file). Distribution is by email, Twitter and on the Practice Links website http://www.ucc.ie/en/appsoc/aboutus/activities/pl/.

Submissions

Submission for publication should be received two weeks prior to the next publication date. Please forward submissions by email to k.burns@ucc.ie.

SWDU

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