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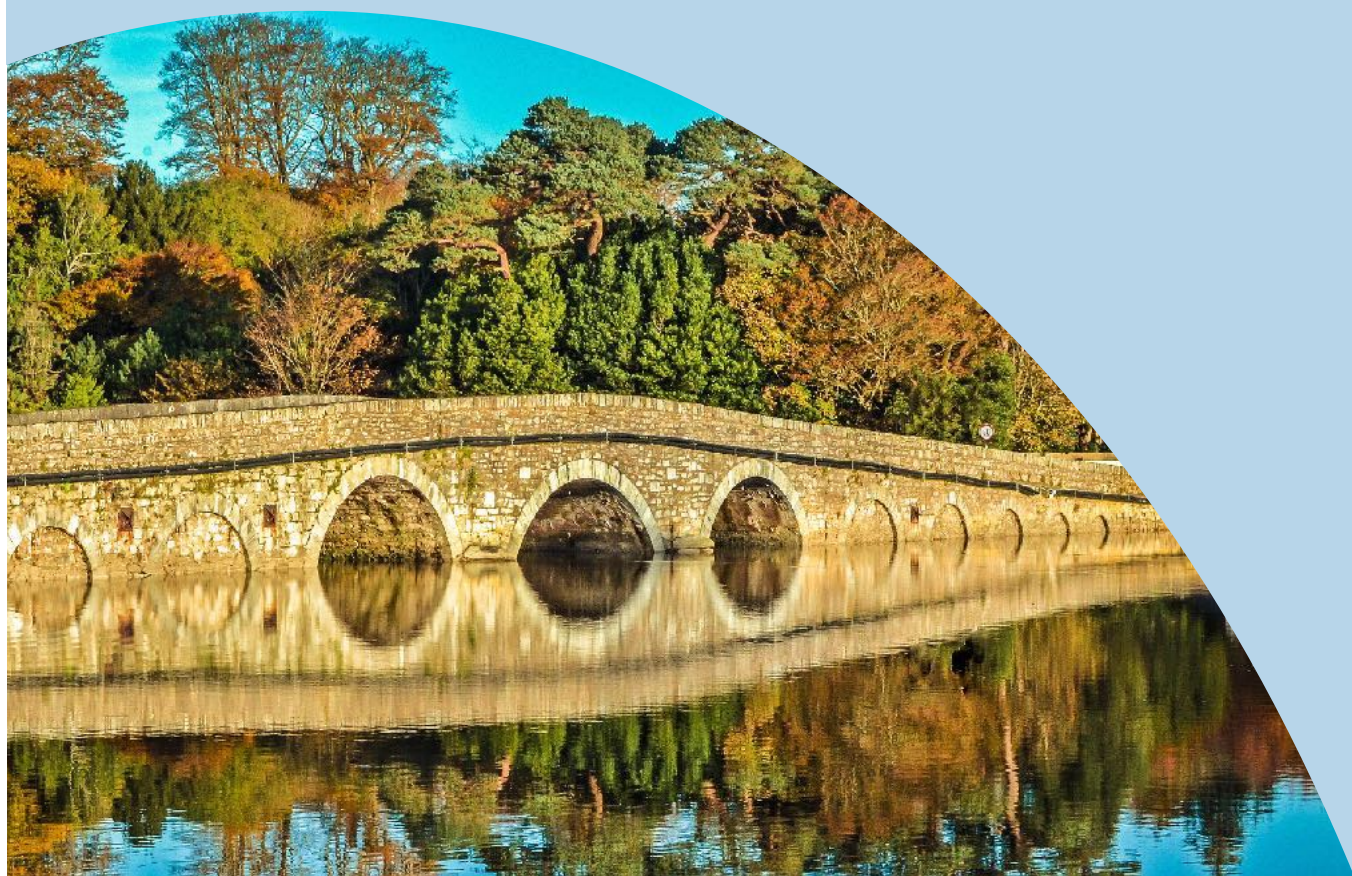


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practice

LINKS



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"Diversity in Practice" - First conference of the IASW Special Interest Group on Migration

Friday, 13th October, 2017, 10.00am.

University College Cork.

CPD points available. Click [here](#) to register

<https://www.iasw.ie/event.aspx?contentid=8450>

The aim of this conference is to promote best practice, policy and research in social work with migrant families.

Speakers include:

- Professor Claudia Bernard-Department of Social, Therapeutic and Community Studies, Goldsmiths, University of London.
- Professor Alastair Christie- Head of the School of Applied Social Studies, University College Cork.
- Panelists: Brian Davis, Social Work Practitioner, HSE Primary Care, Deborah Chemhere, Social Work Practitioner, Tusla Child and Family Agency: Social Work with Resettled Refugees. Service User Experience: A Migrant Young Person's Experience of Care and Aftercare Services, A Service User's Experience of Direct Provision and Pathways to Citizenship.
- Fiona Hurley, Legal Service Manager, Nasc Ireland: Immigration issues impacting social work with migrant families.
- Dr. Mary Phelan, Chairperson, Irish Translators and Interpreters Association: Interpreting with migrant service users.
- Jeannette Taku, New Communities Partnership: The Migrant Family Support Service - Supporting parents and families in child protection and welfare services.
- Ben Swan- Cross-cultural Communication Skills Trainer, The Mandelo Group.

The Irish Association of Social Workers (IASW) Migration Group consists of social workers from a wide variety of settings including child protection and welfare, disability, family support, medical, mental health, primary care, NGOs and academia.

5th Health & Social Care Professions Research Conference

Wednesday 14th November '18

The Conference Centre

Dublin Castle

Registration will open in June '18

Admission is free. Call for abstracts to issue October '17

The conference will include keynote speakers, oral & poster presentations and research workshops

Continuing professional development



Exploring Social Workers use of Surveys

Thursday, 19th October at the Carmelite Centre, Aungier Street, Dublin 2

Registration 1.30pm, Seminar 2.00 - 5.00pm

Price €10 IASW members/€25 non-members

Dr John Devaney from Queens University, Belfast will present on survey design & quantitative data analysis.

Non-Violent Resistance (NVR) – A Family & Community Based Response to Child to Parent Violence & Abuse

Friday, 20th October at St Andrew's Resource Centre, Dublin

Registration 9.30am, Event 10:00 - 4.00pm

Price €20 IASW members/€40 non-members

This one day introductory training programme in NVR is co-hosted by the IASW & NUI Galway and will be facilitated by Declan Coogan.

Disability, Sexuality and Relationships – Supporting service users to make choices

Tuesday 24th October, Radisson Blu Hotel, Athlone

Registration 9:30am, Event 10:00 – 4:00

Price €20 IASW members/€40 non-members

This Conference has been jointly run by Social Care Ireland & the Irish Association of Social workers. It was postponed earlier on in the year, it is now being held in Athlone.

Bookings: <https://www.socialcareireland.ie/event/disability-sexuality-relationships-supporting-service-users-make-choices-3/>

Promoting Excellence in Dementia Care

Friday, 10th November at the Ashling Hotel, Dublin

Registration 9.30, Conference 10.00 - 4.00

Price €30 IASW members/€60 non-members

(Price includes lunch and refreshments)

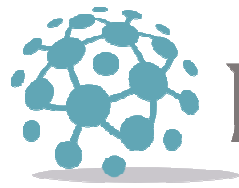
Conference organised by the IASW Special Interest Group on Ageing.

Psychosocial Interventions in Social Work – Championing our Therapeutic Skills

Friday, 24th November at the Ashling Hotel, Dublin

Price €20 IASW members/€30 non-members

SWAMH full day conference & AGM



Mindology

Mindology Training Workshop

Working with Asperger's Syndrome

- Eoin Stephens

Date: Saturday 14th October, 9.30 – 4.30

***Venue: Osprey Hotel, Devoy Quarter, Naas East, Naas, Co. Kildare
30 minutes from M50 Junction 9 (Red Cow)***

Cost: €90 (lunch not included)

This workshop will present a Cognitive Behavioural Case Formulation Approach to the problems of adult clients at the higher end of the Autism Spectrum.

These problems (classified as either Asperger's Syndrome or Autism Spectrum Disorder Level 1), are being seen more and more commonly in the therapy room.

Topics will include:

- A Cognitive Behavioural Model of Autism/Asperger's
- The nature of the autistic personality, & the relevance of this for therapy
- Distorted Social Information Processing (poor social understanding/prediction etc)
- Secondary problems, especially anxiety, depression, anger & addiction
- The issue of Low Self-Esteem
- Client examples (from presenter & participants)

For more information about this and other upcoming workshops, email us at

info@mindology.ie



Co-dependency

Is it misunderstood and therefore not treated?

(7 CPD points)

“Co-dependency as a condition is often misunderstood - and its crucial link with narcissism, and addiction missed by many helping professionals. This is a detrimental loss.

However, experience shows that when the co-dependent understands their co-dependency and their unconscious perpetuation of conditioned patterns, they then fully understand how to take their power back! Our job as helping professionals is to help them to come to this awareness. Through my work I have developed a helpful model that addresses these issues and it is my client's experience (young and old) that the model works. Now, your clients can benefit too!”

Margaret Parkes

Programme

This interactive and experiential programme supports the professional to take an interactive role in their client's recovery. It addresses the following issues:

What is the definition and the characteristics of a co-dependent? Do we professionals have co-dependent tendencies and if so how might this impact on our work with individual or couple clients? How do we identify a co-dependent in the therapy room? Is co-dependency an addiction? Is there a value in naming this condition for our client? How would we know when a co-dependent client presents and how do we work with this client? Do we understand the thinking disorders that co-dependency can lead to and what history might have contributed to this conditioning for ourselves or the client? What is the link between co-dependency and those on the autism spectrum or those with ADHD? What is the link between co-dependency and narcissism? How do we support our co-dependent client in their recovery?

Facilitator:

Margaret Parkes (Dip. Psych., BA, MSc.) has practiced as a psychotherapist and systemic practitioner for over 15 years. She is a qualified and experienced facilitator and has experienced significant success with this model.

Course Dates & Time

Dublin	6 th & 7 th Oct 2017	Louis Fitzgerald Hotel, Naas Road, Exit 1A (2day)
Cork	13 rd Oct 2017	Vienna Woods Hotel, Glanmire, Cork (1 day)
Galway	3 rd Nov 2017	Connacht Hotel, Dublin Road, Galway (1 Day)
Dublin	9 th Nov 2017	Louis Fitzgerald Hotel, Naas Road, Exit 1A (1 day)

Course Fee: €100.00 Early Bird Price 90.00 10.00am – 5.00pm each day
Booking: Email: margaretparkes.ie OR [BOOK HERE](#)

<https://margaretparkes.ie/index.php/courses>



<http://www.ifca.ie/event/ifca-nation-conference/?eID=147>

Barnardos have launched a number of training events for Autumn 2017:

- Children First, Child Protection Training Dublin (14th Oct)
- Children First, Child Protection Training Cork (21st Oct)
- Giving Evidence in Court Proceedings Dublin (24th Oct)
- Designated Liaison Person Training for Early Years Professionals Dublin (2nd Nov),
- Reflective Practice for Early Years Professionals Dublin (11th Nov),
- Children First, Child Protection Training Limerick (17th Nov)
- Children First, Child Protection Training Dublin (21st Nov),
- Designated Liaison Person Training Cork (30th Nov)

<https://shop.barnardos.ie/28-public-training-events>



CHILDREN IN CARE RESEARCH FORUM

SHARING RESEARCH ON CHILDREN IN CARE, CARE LEAVERS, & CARERS

A new initiative convened by Professor Robbie Gilligan & Assistant Professor Eavan Brady (School of Social Work & Social Policy, Trinity College Dublin) to promote knowledge exchange among researchers and practitioners on the island of Ireland.



Speakers

Dr. Rosaleen McElvaney (Dublin City University): *Someone to care: Care leavers' and professionals' reflections on how the system responds to mental health needs.*

Dr. Montserrat Fargas Malet (Queen's University, Belfast): *The Care Pathways and Outcomes study: The Teens and Early Adulthood: Preliminary findings.*

Prof. Abbey Hyde (University College Dublin): *The sexual health and relationship and sexuality education (RSE) needs of young people in care.*

Natalie Glynn (PhD Candidate, Trinity College Dublin): *How the Little Things Add Up: A Qualitative Longitudinal Study of Leaving State Care in Ireland.*

Tuesday 31st October // 10.00am-1.00pm

The Long Room Hub, Trinity College Dublin ([map](#))

For further information contact Eavan Brady (bradye3@tcd.ie) brady3@tcd.ie

Admission is free and registration not required!



Trinity College Dublin
Coláiste na Tríonóide, Baile Átha Cliath
The University of Dublin

Trinity Long Room Hub
Arts & Humanities Research Institute

#childrenincarereseach

Continuing professional development

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.

Learning Outcomes

On completion of this course, participants should be able to:

- Critically discuss problem alcohol and drug use as it impacts on their current work or area of practice
- Demonstrate an enhanced knowledge and awareness of contemporary models of screening and brief intervention for problem alcohol and drug use
- Identify problem alcohol and drug users who present to health and social care settings
- Utilise the SAOR model of Screening & Brief Intervention (SBI) in practice based scenarios
- Discuss the application of the SAOR model of screening and brief intervention for problem alcohol and drug use into their practice

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 of Training

Dates: Wednesday 11 th October 2017	Time: 9.30 a.m. – 5.00 p.m.	Venue: Cork.
Dates: Thursday 9 th November 2017	Time: 9.30 a.m. – 5.00 p.m.	Venue: Cork.
Dates: Thursday 30 th November 2017	Time: 9.30 a.m. – 5.00 p.m.	Venue: Cork.

How to Apply - please see link below for Application Form which should be completed and returned to marwin.jagoe@hse.ie

<http://www.hse.ie/eng/services/list/1/LHO/CorkNorthLee/Inclusion/Screening-and-Brief-Interventions-Application-Form.docx>

Making work with perpetrators safe and effective Respect's Annual Networking Perpetrator Event

DATE: Wednesday 8th November 2017
TIME: 09:30-16:30
VENUE: Amnesty International, EC2A 3EA
TICKETS: Members: £120 | Non-Members: £156

Book your place by completing our [online booking form](#).

Do you work with domestic violence perpetrators, either directly in specialist services, or through frontline work?

Do you want to develop your practice and make sure that the service you provide is safe and effective?

We are delighted to announce that Dame Vera Baird, will chair Respect's annual event focused on work with perpetrators.

As part of the event we will be launching the Third Edition of Respect's Accreditation Standards for work with perpetrators, hearing why standards are important and what they mean for your work.

We will have a range of speakers from the voluntary and public sectors sharing the challenges and opportunities within their particular areas of work with perpetrators, and how an evidence based quality standard can be valuable in support of their work.

You will also have the opportunity to attend our broad selection of interactive, practice based workshops.

See Agenda attached for more detail. Please pass onto your networks.

Julia Hawkins, Membership, Training and Events Officer, Respect
Respect: men and women working together to end domestic violence
Tel: 020 7549 0585 www.respect.uk.net Please follow us on twitter @RespectUK

Become a [member of Respect](#) and [subscribe to our newsletter](#) today!

Book your place on the [Respect's Young People Services Event](#) 19th September 2017.

Check out our list of upcoming [Respect training courses](#).

AN INTEGRATIVE APPROACH TO TREATING COMPLEX PTSD AND DISSOCIATIVE DISORDERS

SPEAKER: KATHY STEELE, MN, CS, APRN

NOVEMBER 16 & 17, 2017

This two day workshop will offer an integrative approach to create safety, reduce and resolve symptoms, and stabilize clients who have complex PTSD and dissociative disorders.

Cork International Hotel,
Cork Airport Business Park, Cork.
Contact: 087 109 1195
info@pcpsi.ie

To book your place visit:
www.pcpsi.ie/shop




PCPSI
Professional Counselling &
Psychotherapy Seminars Ireland

Continuing professional development

ADVANCED NOTICE

FAMILY LAW FOR SOCIAL PROFESSIONALS

CPD SHORT COURSE (5 WEEKS) INCLUDING A ONE-DAY COURTROOM SKILLS WORKSHOP

STARTING
FEBRUARY 2018



A blended-learning CPD course for social workers, social care workers, youth and community workers and other allied health professionals about Family Law in Ireland.

Weeks 1 - 4: Online presentations and discussion with supported readings and case studies.

Week 5: One day courtroom skills workshop held in UCC.

Certificates of Completion (CPD hours) will be provided.



Expressions of Interest:
fiachra.osuilleabhain@ucc.ie

School of Applied
Social Studies, UCC.

Thirteenth International Conference of the International Society for Third Sector Research (ISTR)

Vrije Universiteit Amsterdam
Amsterdam, The Netherlands
10 July – 13 July 2018

Fourth ISTR PhD Seminar
8 July – 10 July 2018

Conference Theme: Democracy and Legitimacy: The Role of the Third Sector in a Globalizing World

<http://www.istr.org/page/Amsterdam>



Guiding support for family carers

Family Carer Training - for Professionals

✿ Are you keen to work more effectively with Family Carers?

✿ Do you want to find out more about evidence based interventions, engaging Family Carers and measuring your impact?

If so, go to
[www.familycarertraining.ie/
Information-For-Organisations](http://www.familycarertraining.ie/Information-For-Organisations)

Comprehensive '*How to Guide*'
also available to download from the website.
Hard copies available on request.

Email: info@carealliance.ie



www.familycarertraining.ie

Family carers training resource also available: <http://familycarertraining.ie>



5th Biennial International Symposium

Decisions, Assessment, Risk and Evidence in Social Work

Monday 02 & Tuesday 03 July 2018

Templeton Hotel, Templepatrick, Northern Ireland
(convenient to Belfast International Airport)

Plenary Speakers:

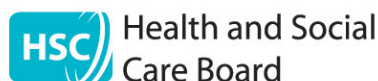
Professor Haluk Soydan, Research Professor of Social Work, University of Southern California School of Social Work, USA, who has undertaken extensive work on the implementation of best evidence at national level as well as by individual professionals.

Professor Rami Benbenishty, Louis and Gabi Weisfeld School of Social Work, Bar Ilan University, Israel, who is recognized internationally as a social work researcher specializing in child protection decision-making.

Professor Brian Littlechild, Research Lead, Department of Nursing & Social Work, University of Hertfordshire who has undertaken extensive research in mental health, resistant clients, youth offending & child protection social work and development of evidence-based guidelines.

Further information on DARE 2018 including a call for abstracts will be added to our website over the coming months, accessible through: ulster.ac.uk/dare If you would like your name to be added to mailing list please email: **Mrs Sharon Lucas** at: dare@ulster.ac.uk

This fifth DARE symposium builds on the fourth symposium in July 2016 which brought together over 120 delegates from 12 countries including senior practitioners, managers, policy makers, researchers, regulators and social workers in education and training.



Supported by the Institute for Research in
Social Science at Ulster University

Public Health (Alcohol) Bill - Background Info.

The Public Health (Alcohol) Bill will save lives, reduce harms, alleviate public services and release scarce public funds for greater socio-economic benefit.

For over 650 days the Public Health (Alcohol) Bill – a progressive piece of legislation designed to significantly and positively alter Ireland's harmful relationship with alcohol – has languished in the Oireachtas and faced inordinate delay.

The Bill contains a range of modest measures on price, labelling, advertising and separation of alcohol products, designed to work together to reduce alcohol consumption in Ireland, so lessening alcohol related harm. It will protect children, families and communities from alcohol related harms, and create an environment that supports a low risk approach to individual consumption.

Alcohol consumption in Ireland has grown threefold in two generations. In 2016, our consumption of alcohol rose by a further 4.8% to 11.46 litres of pure alcohol per capita, that's is equal to 46 bottles of vodka, 130 bottles of wine, or 498 pints of beer.

Today, we face a growing chronic disease crisis as cancer, heart disease, liver disease and diabetes now accounts for the most of our ill-health and premature deaths. This crisis places an extraordinary, and unnecessary, burden on our scarce health services and limited public resources.

Alcohol can contribute to the development of mental health problems as well as exacerbating pre-existing mental health difficulties. It can affect our ability to cope, manage and to overcome everyday stresses and significant life events.

The market will not resolve our problem with alcohol. The state must have the right to protect its citizens, especially its children. International agencies and evidence based research dictates that action must be taken to bolster Public Health initiatives that aim to curb high risk alcohol consumption, and that the rights of private economic interests may need to be rebalanced to allow for such a pragmatic public intervention.

An overview of the economic and social impact of alcohol consumption and related harms:

- The annual cost of alcohol related hospital discharges to the Irish exchequer: €1.5bn, that is 3% of all public current expenditure;
- €2.35bn, assessing a wider set of cost implications to other aspects of impact to current public expenditure in Justice, Children, Social Protection.
- The cost of excessive alcohol consumption is a major drain on current public expenditure: Health, Justice, Social Protection; it is estimated that for €100m of public monies spent, €4.6m will be deployed to mitigate the harmful outcomes of alcohol consumption.
- Over 12% of the health current expenditure budget is spend on alcohol related illnesses.
- Every day, 1,500 beds in our hospitals are occupied by patients with alcohol related problems.
- 283,866 work days were lost to alcohol related absenteeism in 2016
- Every day 3 people will die from alcohol related illnesses.
- Each year 60,000 children will inexcusably begin their, all too early, drinking careers.
- The life of one in every eleven children are being negatively impacted by parental drinking.
- Alcohol is a factor in half of all suicides, and one third of self-harm cases, in Ireland.

New publications and policy reports

Social Justice Ireland – A New Social Contract for a New Century – Socio-Economic Review 2017 (May 2017)

Social Justice Ireland's annual Socio-Economic Review is entitled 'A New Social Contract for a New Century'. This review argues that Ireland's present social contract is broken and that 2017 is the perfect opportunity to develop a new and radical social contract for Ireland's second century.

Link: <https://www.socialjustice.ie/sites/default/files/attach/publication/4784/socioeconomicreview.pdf>

Innovation in politics

The Innovation In Politics Awards are the first in a series of activities with the goal to improve politics in Europe. We recognise and support those politicians who have the courage to break new ground, who are creative and achieve real results - regardless of party affiliation and regional level, and based on our European values: social balance, democracy and human rights. We bring their innovative work to the fore, so that it may serve as a source of inspiration.

Link: <https://innovationinpolitics.eu/>

HSE – Best Practice Guidance for Mental Health Services (April 2017)

This Best Practice Guidance tells us what we need to do to make sure that children and adults in the care of our mental health services, receive a high quality, safe service that meets their needs.

Document: https://hse.ie/eng/services/list/4/Mental_Health_Services/mental-health-guidance/Best-Practice-Guidance/Documents/Best-Practice-Guidance-for-Mental-Health-Services.pdf

United Nations – Report of the Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health (June 2017)

Pursuant to Human Rights Council resolution 24/6, the secretariat has the honour to transmit to the Council the report of the Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health. In an attempt to contribute to the discussion around mental health as a global health priority, the Special Rapporteur focuses on the right of everyone to mental health and some of the core challenges and opportunities, urging that the promotion of mental health be addressed for all ages in all settings. He calls for a shift in the paradigm, based on the recurrence of human rights violations in mental health settings, all too often affecting persons with intellectual, cognitive and psychosocial disabilities.

Link: <https://documents-dds-ny.un.org/doc/UNDOC/GEN/G17/076/04/PDF/G1707604.pdf?OpenElement>

Social Work Action Network Ireland – Frontline Bulletin 4 (Summer 2017)

Link: <https://socialworkactionnetworkireland.files.wordpress.com/2017/08/frontline-4-summer-2017.pdf>

New publications and policy reports

Free Legal Advice Centre – Annual Report 2016 (July 2017)

More than 25,700 people received free legal information or advice from FLAC in 2016, from our telephone information and referral line and the network of legal advice clinics at 67 locations around the country. Consistent with previous years, around a third of all queries related to family law, demonstrating that year in, year out, this is the area where people most need information and advice. The focus on services as a way of enabling people to assert their rights is a fundamental aspect of FLAC's work in promoting access to justice. It is then complemented by training, research, advocacy, campaigning and casework, as set out in this report.

Link: https://www.flac.ie/download/pdf/flac_ar_2016_final.pdf?issuusi=ignore

Social Platform – VulnerABLE Project: Health inequalities are unnecessary, avoidable, and unjust – Findings of literature review (September 2017)

Unmet needs in healthcare still very much exist across the European Union for people living in vulnerable and isolated situations. The VulnerABLE pilot project assessed their health challenges by analysing relevant literature, data, and policy documents. It found that although there has been an increase in health across the EU in recent years, this has not been experienced equally between and within Member States. Life expectancy, the prevalence of ill health, and the level of unmet needs vary across different population subgroups, according to the latest data.

Link: https://ec.europa.eu/health/sites/health/files/social_determinants/docs/2017_vulnerable_literaturereview_en.pdf

Mental Health Reform – Submission on Review of A Vision for Change (September 2017)

Launching its submission to the Dept. of Health on their review of the national mental health policy, A Vision for Change, Mental Health Reform, the national coalition for mental health, has today called for a rights-based approach to review of Ireland's mental health policy. The submission, based on in-depth consultation with the coalition's 60 member organisations, its advisory groups and other mental health experts, outlines the coalition's vision for reform of the Irish mental health system.

Link: <https://www.mentalhealthreform.ie/wp-content/uploads/2017/09/Submission-on-review-of-A-Vision-for-Change.pdf>

Mental Health Reform and the Dublin Simon Community Joint Report – 'Homelessness and Mental Health: Voices of Experience' (June 2017)

New research report highlighting the personal stories of people who experience both homelessness and mental health difficulties.

Link: <https://www.mentalhealthreform.ie/wp-content/uploads/2017/06/Homelessness-and-mental-health-report.pdf>

New publications and policy reports

Transgender Employees in the Workplace: A Guide for Employers

This guide equips employers to respect and support transgender employees, clarifying employers' legal responsibilities and providing advice on the social, emotional and medical aspects of transitioning. Accessible and essential, the book enables companies to promote an inclusive, diverse culture that will benefit the whole work force.

Link: <http://www.jkp.com/uk/transgender-employees-in-the-workplace-2.html/>

Transgender Employees in the Workplace A Guide for Employers

Jennie Kermode

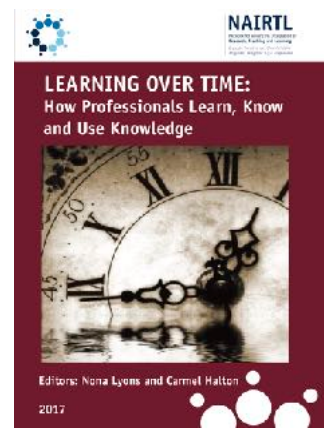


LEARNING OVER TIME: How Professionals Learn, Know and Use Knowledge

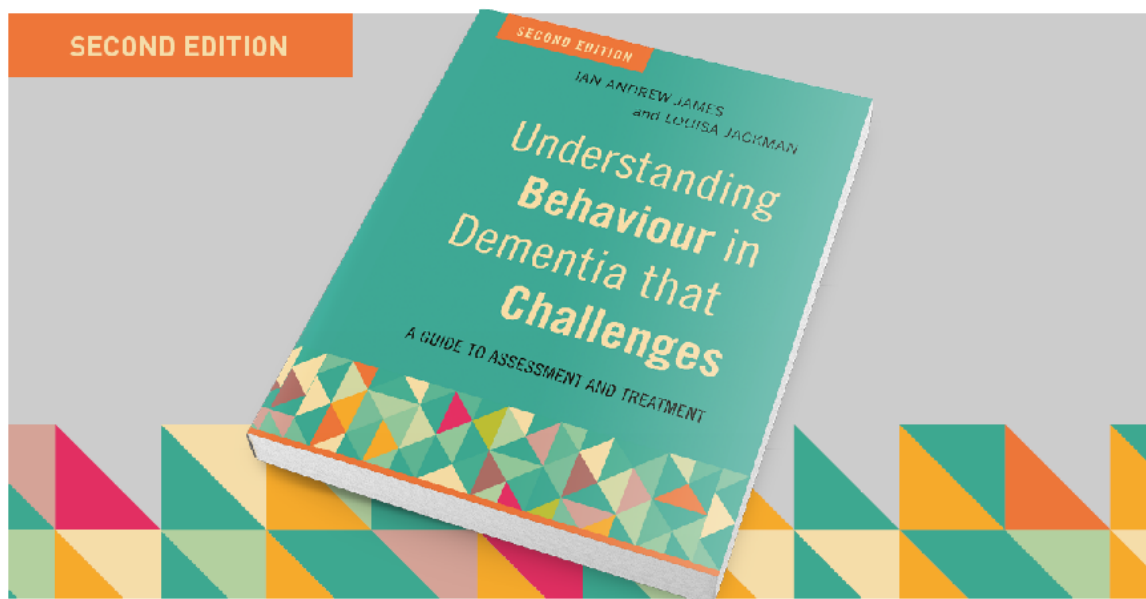
Nona Lyons and Carmel Halton is available for reading on-line. The 77 page e-publication was launched at University College Cork, Ireland by the Network for advancing Integration of Research, Teaching and Learning on September 20, 2017 at the UNESCO International Conference on Learning Cities at University College Cork.

"This elegant volume fills a longstanding void in the general reading section of bookstores and in the academic literature." Cheryl J. Craig, Ph.D. Professor Endowed Chair, Texas A&M University.

The book addresses the intriguing, often overlooked question of how people learn along the continuum of life through formal and informal education. This learning, undertaken alone and/or with others, becomes interwoven over time to create rich tapestries of life whose contours deeply etched with experience. James Pellegrino of the National Research Council argues, knowing what people learn is especially critical" to determining what people know, how they know it, and how they are able to use that knowledge to answer questions, solve problems, and engage in additional learning" for themselves or others. Learning is at the heart of this book.



The book can be downloaded here: http://www.nairtl.ie/documents/LearningOverTime_2017.



<http://www.jkp.com/uk/understanding-behaviour-in-dementia-that-challenges-second-edition-2.html/>

Adult disclosures of childhood sexual abuse and section 3 of the child care act 1991: past offences, current risk.

In the Republic of Ireland Section 3(1) of the Child Care Act 1991 places an obligation and legal duty upon the State child protection services "to promote the welfare of children in its area who are not receiving adequate care and protection." This article focuses on a specific element of this duty; the social worker's responsibility to accept and assess retrospective reports of childhood sexual abuse. Retrospective disclosures of abuse are referrals made by adults of experiences they encountered as children. This article argues that current social work practice in this area lacks clarity and cohesion and while new policy and practice approaches are emerging ultimately there is a sense of confusion for both social workers and those adults affected by childhood abuse who come forward to disclose. This article presents an examination of the key judgement of Justice Barr in *M.Q. v. Robert Gleeson and Ors* [1998] 4 IR 85 and subsequent, related, precedents and how they relate to current Irish social work policy in this area. Adult disclosures of childhood abuse have the potential to bring alleged abusers to justice and thereby protect current and future children from harm. This article seeks to provide clarity, to social workers and those working with adults affected by abuse, regarding the Irish legal framework relating to adult disclosures of abuse as it stands. The article ultimately argues that further research and policy guidance is required. Note: This paper has been accepted for presentation at the forthcoming UCC National Child Protection and Welfare Social Work Conference, 2017

Author:

Joseph Mooney is Research and Evaluation Project Worker with Barnardos Ireland and a Doctoral Fellow with the UNESCO Child and Family Research Centre. Joseph is also a Teaching Assistant on the MA Social Work Programme at NUI Galway. j.mooney4@nuigalway.ie

To cite this article:

Joseph Mooney (2017) Adult disclosures of childhood sexual abuse and section 3 of the child care act 1991: past offences, current risk, *Child Care in Practice*, DOI: 10.1080/13575279.2017.1347145

Link:

<http://dx.doi.org/10.1080/13575279.2017.1347145>

Acknowledgements:

With special thanks to One in Four and the Rape Crisis Network Ireland. This work is conducted as part of a UNESCO Child and Family Research Centre Structured PhD in Child and Youth Research under the Supervision of Professor Caroline McGregor.

Open Access (Free) Journals (Google Journal Title to access Journal website)

- Journal of Early and Intensive Behaviour Intervention
- International Journal of Child and Adolescent Resilience (IJCAR)
- Journal of Global Social Work Practice
- International Journal of High Risk Behaviours and Addictions
- Journal of Indigenous Social Development
- Critical Social Work
- International Journal of Child, Youth & Family Studies
- The Irish Journal of Applied Social Studies
- Comparative Migration Studies

Research Archives/Institutional Repositories

- Trinity Access Research Archive (TARA) - <http://www.tara.tcd.ie>
- Cork Open Research Archive (CORA) - <https://cora.ucc.ie>

Data Archives

- Irish Social Science Data Archive (ISSDA): <https://www.ucd.ie/issda/>
- Irish Qualitative Data Archive (IQDA): <https://www.maynoothuniversity.ie/iqda>

Marcia Gibson, Hilary Thomson, Kasia Banas, Vittoria Lutje, Martin J McKee, Susan P Martin, Candida Fenton, Clare Bamba, Lyndal Bond



Abstract

Background

Lone parents in high-income countries have high rates of poverty (including in-work poverty) and poor health. Employment requirements for these parents are increasingly common. 'Welfare-to-work' (WtW) interventions involving financial sanctions and incentives, training, childcare subsidies and lifetime limits on benefit receipt have been used to support or mandate employment among lone parents. These and other interventions that affect employment and income may also affect people's health, and it is important to understand the available evidence on these effects in lone parents.

Objectives

To assess the effects of WtW interventions on mental and physical health in lone parents and their children living in high-income countries. The secondary objective is to assess the effects of welfare-to-work interventions on employment and income.

Search methods

We searched the Cochrane Central Register of Controlled Trials (CENTRAL), MEDLINE Ovid, Embase Ovid, PsycINFO EBSCO, ERIC EBSCO, SocINDEX EBSCO, CINAHL EBSCO, Econlit EBSCO, Web of Science ISI, Applied Social Sciences Index and Abstracts (ASSIA) via Proquest, International Bibliography of the Social Sciences (IBSS) via ProQuest, Social Services Abstracts via Proquest, Sociological Abstracts via Proquest, Campbell Library, NHS Economic Evaluation Database (NHS EED) (CRD York), Turning Research into Practice (TRIP), OpenGrey and Planex. We also searched bibliographies of included publications and relevant reviews, in addition to many relevant websites. We identified many included publications by handsearching. We performed the searches in 2011, 2013 and April 2016.

Selection criteria

Randomised controlled trials (RCTs) of mandatory or voluntary WtW interventions for lone parents in high-income countries, reporting impacts on parental mental health, parental physical health, child mental health or child physical health.

Data collection and analysis

One review author extracted data using a standardised extraction form, and another checked them. Two authors independently assessed risk of bias and the quality of the evidence. We contacted study authors to obtain measures of variance and conducted meta-analyses where possible. We synthesised data at three time points: 18 to 24 months (T1), 25 to 48 months (T2) and 49 to 72 months (T3).

Main results

Twelve studies involving 27,482 participants met the inclusion criteria. Interventions were either mandatory or voluntary and included up to 10 discrete components in varying combinations.

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All but one study took place in North America. Although we searched for parental health outcomes, the vast majority of the sample in all included studies were female. Therefore, we describe adult health outcomes as 'maternal' throughout the results section. We downgraded the quality of all evidence at least one level because outcome assessors were not blinded. Follow-up ranged from 18 months to six years. The effects of welfare-to-work interventions on health were generally positive but of a magnitude unlikely to have any tangible effects.

At T1 there was moderate-quality evidence of a very small negative impact on maternal mental health (standardised mean difference (SMD) 0.07, 95% Confidence Interval (CI) 0.00 to 0.14; N = 3352; studies = 2)); at T2, moderate-quality evidence of no effect (SMD 0.00, 95% CI 0.05 to 0.05; N = 7091; studies = 3); and at T3, low-quality evidence of a very small positive effect (SMD -0.07, 95% CI -0.15 to 0.00; N = 8873; studies = 4). There was evidence of very small positive effects on maternal physical health at T1 (risk ratio (RR) 0.85, 95% CI 0.54 to 1.36; N = 311; 1 study, low quality) and T2 (RR 1.06, 95% CI 0.95 to 1.18; N = 2551; 2 studies, moderate quality), and of a very small negative effect at T3 (RR 0.97, 95% CI 0.91 to 1.04; N = 1854; 1 study, low quality).

At T1, there was moderate-quality evidence of a very small negative impact on child mental health (SMD 0.01, 95% CI -0.06 to 0.09; N = 2762; studies = 1); at T2, of a very small positive effect (SMD -0.04, 95% CI -0.08 to 0.01; N = 7560; studies = 5), and at T3, there was low-quality evidence of a very small positive effect (SMD -0.05, 95% CI -0.16 to 0.05; N = 3643; studies = 3). Moderate-quality evidence for effects on child physical health showed a very small negative effect at T1 (SMD -0.05, 95% CI -0.12 to 0.03; N = 2762; studies = 1), a very small positive effect at T2 (SMD 0.07, 95% CI 0.01 to 0.12; N = 7195; studies = 3), and a very small positive effect at T3 (SMD 0.01, 95% CI -0.04 to 0.06; N = 8083; studies = 5). There was some evidence of larger negative effects on health, but this was of low or very low quality.

There were small positive effects on employment and income at 18 to 48 months (moderate-quality evidence), but these were largely absent at 49 to 72 months (very low to moderate-quality evidence), often due to control group members moving into work independently. Since the majority of the studies were conducted in North America before the year 2000, generalisability may be limited. However, all study sites were similar in that they were high-income countries with developed social welfare systems.

Authors' conclusions

The effects of WtW on health are largely of a magnitude that is unlikely to have tangible impacts. Since income and employment are hypothesised to mediate effects on health, it is possible that these negligible health impacts result from the small effects on economic outcomes. Even where employment and income were higher for the lone parents in WtW, poverty was still high for the majority of the lone parents in many of the studies. Perhaps because of this, depression also remained very high for lone parents whether they were in WtW or not. There is a lack of robust evidence on the health effects of WtW for lone parents outside North America.

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Plain language summary

How do welfare-to-work interventions for lone parents affect adult and child health?

Lone parents in wealthy countries have disproportionately high levels of poverty and ill health. Governments argue that both poverty and health might improve if lone parents started working or worked more, while some researchers think that working at the same time as raising children alone could be stressful and make health worse.

Welfare-to-work interventions (WtW) are designed to either encourage or require lone parents to look for work. Earnings top-ups, stopping or reducing benefits, training, helping to pay for child care and limits on how long benefits are paid have all been used to try to increase lone parent employment. In order to understand how requiring lone parents to take part in WtW programmes affects their and their children's health, we systematically reviewed studies that collected information on these effects.

We found 12 studies involving 27,482 participants that compared groups of lone parents in WtW interventions with lone parents who continued to receive welfare benefits in the normal way. All of the studies were at high risk of bias because the staff who collected the data knew when respondents were in the intervention group. In some studies, lone parents who were not in the intervention group were affected by similar changes to welfare policy that applied to all lone parents. We used statistical techniques to combine the results of different studies. These analyses suggest that WtW does not have important effects on health. Employment and income were slightly higher 18 to 48 months after the start of the intervention, but there was little difference 49 to 72 months after the studies began. In a number of studies, lone parents who were not in WtW interventions found jobs by themselves over time. It is possible that effects on health were small because there was not much change in employment or income. Even when employment and income were higher for the lone parents in WtW, most participants continued to be poor. Perhaps because of this, depression also remained very high for lone parents whether they were in WtW or not.

All but one of the studies took place in the United States or Canada before the year 2000. This means it is difficult to be sure whether WtW would have the same effects in different countries at other times.

Link: <http://onlinelibrary.wiley.com/doi/10.1002/14651858.CD009820.pub2/full>

Brandy R. Maynard, Michael R. Solis, Veronica L. Miller, and
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MBIs have a small, positive effect on cognitive and socio-emotional outcomes, but not a significant effect on behavioural and academic outcomes.

The review in brief

The use of mindfulness-based interventions (MBIs) in schools has been on the rise. Schools are using MBI's to reduce student stress and anxiety and improve socio-emotional competencies, student behaviour and academic achievement.

MBIs have small, positive effects on cognitive and socio-emotional processes but these effects were not seen for behavioural or academic outcomes. The studies are mostly of moderate to low quality. Therefore, further evidence from independent evaluators is needed to be able to evaluate the effectiveness of this type of intervention.

What did this review study?

With the diverse application and findings of positive effects of mindfulness practices with adults, as well as the growing popularity with the public, MBIs are increasingly being used with youth. Over the past several years, MBIs have received growing interest for use in schools to support socio-emotional development and improve behaviour and academic achievement. This review examines the effects of school-based MBIs on cognitive, behavioural, socio-emotional and academic achievement outcomes with youth in a primary or secondary school setting. MBIs are interventions that use a mindfulness component, broadly defined as "paying attention in a particularly way: on purpose, in the present moment, non-judgmentally", often with other components, such as yoga, cognitive-behavioural strategies, or relaxation skills training.

What studies are included?

Included studies used a randomised controlled trial, quasi-experimental, single group pre-post test or single subject design and reported at least one of these outcomes: cognition, academic performance, behaviour, socio-emotional, and physiological. Study populations include preschool, primary and secondary school students.

A total of 61 studies are included in the review, but only the 35 randomised or quasi-experimental studies are used in the meta-analysis. Most of the studies were carried out in North America, and others in Asia, Europe and Canada. All interventions were conducted in a group format. Interventions ranged in duration (4-28 weeks) and number of sessions (6-125 sessions) and frequency of meetings (once every two weeks to five times a week).

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What is the aim of this review?

This Campbell systematic review examines the effectiveness of school-based MBIs on cognition, behaviour, socio-emotional outcomes and academic achievement. The review summarises 61 studies and synthesises 35 studies, with a total of 6,207 student participants.

What are the main results in this review?

MBIs have a small, statistically significant positive effect on cognitive and socio-emotional outcomes. But there is not a significant effect on behavioural and academic outcomes. There was little heterogeneity for all outcomes, besides behavioural outcomes, suggesting that the interventions produced similar results across studies on cognitive, socio-emotional and academic outcomes despite the interventions being quite diverse.

What do the findings in this review mean?

Findings from this review indicate mixed effects of MBIs in schools. There is some indication that MBIs can improve cognitive and socio-emotional outcomes, but no support for improvement in behaviour or academic achievement. Despite the growing support of MBIs for adults, youth may not benefit in the same ways or to the same extent as adults.

While not well studied, anecdotal evidence indicates costs and adverse effects of these types of interventions that should be better studied and weighed against the small to no effects on different types of outcomes when considering adoption of MBIs in schools. These findings should be read with caution given the weakness of the evidence produced by the studies. The high risk of bias present in the studies means that further evidence is needed to evaluate the effectiveness of this type of intervention. The evidence from this review urges caution in the widespread adoption of MBIs and encourages rigorous evaluation of the practice should schools choose to implement it.

How up-to-date is this review?

The review authors searched for studies published until May 2015. This Campbell systematic review was published in March 2017.

Link: <https://www.campbellcollaboration.org/library/mindfulness-based-interventions-primary-and-secondary-school-students.html>

Client Trauma, Secondary Traumatic Stress, and the Health of Clinical Social Workers

Lee, J. J., Gottfried, R., & Bride, B. E. (2017). Exposure to Client Trauma, Secondary Traumatic Stress, and the Health of Clinical Social Workers: A Mediation Analysis. *Clinical Social Work Journal*, 1-8.

What is this article about?

- ♣ This article reports findings of a quantitative study documenting the prevalence of secondary traumatic stress (STS) in a US sample of 539 clinical social workers, most of whom (70.8%) worked in the fields of mental health or substance abuse.
- ♣ The study also examined the relationships between exposure to client trauma, STS, and perceived health of clinical social workers.

What are the critical findings?

- ♣ After controlling for age, gender, professional experience, and hours worked per week, exposure to traumatised clients has an indirect effect on the general health of social workers that operates via secondary traumatic stress.
- ♣ Increased secondary exposure to trauma is associated with higher levels of STS and higher levels of STS are associated with lower health perceptions.
- ♣ No evidence was found to support the notion that secondary exposure to trauma influenced health perceptions independent of its effect on STS.

What are some of the key implications for practice?

- ♣ Efforts should be directed towards minimising the impact that said secondary exposure to trauma has on clinical social workers' health and well-being. This is particularly important in light of the finding that work with traumatised clients has an indirect effect through STS on the health.
- ♣ Development of prevention programmes focused specifically on holistic health and self-care may be promising at both individual and organisational levels.
- ♣ Efforts to prioritise professional self-care, i.e. engagement in practices that encourage effectiveness in the professional role and personal wellbeing, may prove beneficial in helping practitioners identify specific, measurable steps in self-care.

Methodological Considerations

- ♣ Causality cannot be inferred from this cross-sectional study i.e. we are only able to deduce that there are *relationships* and *associations* between exposure to trauma and STS and health perceptions
- ♣ The response rate in this study was low (29%) which while consistent with other studies among this population is too low to confidently extrapolate that the prevalence of STS found here is representative of the entire population of clinical social workers.

Morriss, L. (2016). Being seconded to a Mental Health Trust: The (in) visibility of mental health social work. *The British Journal of Social Work*, 47, 1344-1360.

What is this article about?

- ♣ This article reports the findings of a small-scale qualitative study based on interviews with 13 mental health social workers from across England.
- ♣ All participants had been seconded to a Mental Health Trust in which they were the only social worker, their experience of being seconded to this context was the focus of their interviews.

What are the critical findings?

- ♣ All 13 participants could not readily define what 'mental health social work' is
- ♣ All 13 participants remained employed by their Local Authority while on secondment to Mental Health Trusts. This was problematic for some participants as they felt the 'dual pressures' from both employers
- ♣ For the majority of participants their colleagues were health professionals e.g. nurses, doctors, psychologists, occupational therapists which sometimes led to difficulties in making social work 'visible'
- ♣ Social workers were unable to make social work 'visible' through supervision as they often did not have supervisors who were social workers
- ♣ The research interview emerged as 'surrogate supervision' for some participants

What are the implications for practice?

- ♣ Social work is not perceived as a routine orderly event in mental health teams and so remains invisible
- ♣ Peer supervision, particularly for those who do not have a supervisor who is also a social worker, may be a useful source of support and may also help in making mental health social work more visible
- ♣ The emotional labour of mental health social workers is considerable. It is therefore critical that these practitioners are supported in their work. Formal support that is fundamental to management structures in Trusts is crucial.

Methodological Considerations

- ♣ This study was small in scale and therefore generalisations cannot be made from this study alone.

Are you wondering how to begin a conversation around using evidence in your practice with your team/supervisor/clients? Why not try one of the following ideas:

- 1) Read a relevant research article and discuss it with your Supervisor.
- 2) Recommend that your team read a relevant research article and discuss it at your next team meeting.
- 3) Provide a relevant research article/research summary to the families you are working with. Use it to start a discussion around issues clients are facing at your next meeting.

4) Think critically about the research article(s) you have read and the research it contains. Some questions to consider include:

- ♣ What additional questions do you have after reading it?
- ♣ What more do you want to know?
- ♣ What methodology was used in this study?
- ♣ What are the limitations and strengths of this type of methodology?
- ♣ What are the key characteristics of the population involved in the study?
- ♣ Are there similarities and/or differences between this population and the children and families I am working with?
- ♣ How might this impact the relevance and applicability of this research to my practice?
- ♣ Where was this research carried out? E.g. in a rural/urban setting? In Ireland? Europe?
- ♣ Are issues of culture and ethnicity considered in this research?
- ♣ What do the results indicate?
- ♣ What do these statistics really mean?
- ♣ Can I apply these findings to my practice? What do I need to consider before doing so?

5) Consider the findings of relevant research in the context of client preferences and values, case circumstances and your organisational context, and practitioner knowledge and experience.

Remember: Using evidence in your practice will look different in every organisational context, for every practitioner, and with each client you work with.

Practice signposts: data sources to support practice



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/>

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.

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

The National Institute for Health and Clinical Excellence (NICE) provides guidance, sets quality standards and manages a national database to improve people's health and prevent and treat ill health. <http://www.nice.org.uk/>. Videocasts: <http://www.nice.org.uk/newsroom/videocasts/videocasts.jsp>. Podcasts: <http://www.nice.org.uk/newsroom/podcasts/index.jsp>

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/

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/>

HRB National Drugs Library

The HRB National Drugs Library is an information resource that supports those working to develop the knowledge base around drug, alcohol and tobacco use in Ireland. The library is funded by the Department of Health, and based within the Health Research Board. We have a range of services and resources designed to provide the evidence needed for practice and CPD. In particular, see the social worker page on our online practitioner resource.

<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/>

Practice signposts: data sources to support practice



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/>

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/>

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 formation and in the provision of services which will ensure all children will have the best possible start in life. <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](http://www.irishtopics.ie/), 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.

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/>

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](http://www.dcu.ie/), [NUIG](http://www.nuigalway.ie/), [NUIM](http://www.nuim.ie/), [TCD](http://www.tcd.ie/), [UCC](http://www.ucc.ie/), [UCD](http://www.ucd.ie/), [UL](http://www.ul.ie/) and was supported by the [Irish Universities Association \(IUA\)](http://www.iau.ie/). 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>

Practice signposts: data sources to support practice



Resource on Marijuana

Marijuana LIT is a source of fact based information to assist professionals in providing accurate information to those affected by the use of cannabis. There are lots of confusing messages regarding the use of cannabis, the harm it causes and whether it should be legalised or not. This makes it difficult sometimes to determine facts from urban myth or popular opinion. The Addiction Technology Transfer Centre Network Co-ordinating Office in the United States has a user friendly package of resources to assist those who provide services to substance users. It has information and infographics on how cannabis affects the body, using cannabis while pregnant and the potential complications for unborn children and newborns and how cannabis impacts on young people and families. Dr. Thomas E. Freese explains in-depth what is meant by "Medical Marijuana Use". Who uses it and why, and the difference between medical marijuana and Tetrahydrocannabinol (THC) medications. He also discusses the legal issues around the debate on the legal use of marijuana. <http://attcnetwork.org/marijuana/index.aspx#infographic>

The DCYA Children's Participation Hub Database

The DCYA Children's Participation Hub Database is now online. Please click on this link: <http://www.dcy.gov.ie/Participation-Database/default.asp> . The database includes a wide range of national and international practice and research publications and articles on children and young people's participation in decision-making. This database is the first stage of development of the Children and Young People's Participation Hub, which is one of the key actions for DCYA under the *National Strategy on Children and Young People's Participation in Decision-making* (2015-2020).

The Hub will become the national centre for excellence on children and young people's participation in decision-making and will be fully functioning by the end of 2016. The Hub will support implementation of the strategy through the provision of information, training and advice for Government departments and agencies and the non-statutory sector.

Mindfulness Based Relapse Prevention Audio Recordings

Please click on the links to these MP3s for your personal use or to share with clients.

[Body Scan](#) (female voice)
[Body Scan](#) (male voice)

[SOBER space](#) (female voice)
[SOBER space](#) (male voice)

[Urge Surfing](#) (female voice)

[Brief Sitting Meditation](#) (female voice)
[Brief Sitting Meditation](#) (male voice)
[Sitting - sound meditation](#) (male voice)
[Sitting - breath meditation](#) (male voice)

[Longer Sitting Meditation](#) (female voice)
[Longer Sitting Meditation](#) (male voice)

[Kindness](#) (male voice)
[Kindness](#) (version 2, male voice)

[Mindful Movement](#) (male voice)
[Mindful Stretching](#) (male voice)
[Mindful Walking](#) (male voice)

[Mountain Meditation](#) (female voice)
[Mountain Meditation](#) (male voice)

HRB National Drugs Library

HRB National drugs library resource for social workers and social care workers



The HRB National Drugs Library is an information resource that supports those working to develop the knowledge base around drug, alcohol and tobacco use in Ireland. The library is funded by the Department of Health, and based within the Health Research Board. We have a range of services and resources designed to provide the evidence needed for practice and CPD. In particular, see the social worker page on our online practitioner resource.

<http://www.drugsandalcohol.ie/>

You can view Irish and international research and policy material on legal and illegal drugs, alcohol and tobacco. Because these issues affect so many aspects of daily life, we also have publications on related subjects such as poverty, suicide, prisons, homelessness, social care, and health.

Every year we add hundreds of new articles and reports to our library collection. In order to help relieve information overload we have a number of summarised aids, such as *Drugnet Ireland*, *NDC newsletter*, and factsheets.

We recognise that those working in health and social care need access to research in a way that suits your busy work life. In order to facilitate this, the NDC librarians, with the wonderful help of advisors working in the social work and social care work areas, have developed a 'practitioner' resource. The homepage <http://www.drugsandalcohol.ie/practitioners> has links to a number of subject areas. The 'key Irish data' link and those on the bottom row are relevant to most workers. Clicking on a link will show you recent Irish and international articles and reports on that subject.

We have also developed pages for specific professions including social workers and social care workers. Each of these pages list key documents and have links to subjects of particular interest to that profession.

The resource includes a page called 'doing research' which has links to useful online tools providing help on finding and using information for research. We are interested in collecting and making available local Irish drug or alcohol research done by those working in the area. If you are doing any such research, even a small piece in their organisation, you can submit it to us.

We would like to express a special word of thanks to all of those who helped with the design of the resource. We welcome ongoing feedback with recommendations for key documents, subject areas and anything else workers would like to see in your resource.



CALL FOR RESEARCH PROJECTS

Are you a member of a community group,
voluntary organisation, resident's association,
NGO?

Do you need a small piece of research done,
but don't have enough money or resources to

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!



Before you make contact ...

1. Is your proposed project small enough to be undertaken as part of a student project?
2. Does your group come under the definition of a not-for-profit community and voluntary group?
3. Do you have a clear idea for a research project that, if undertaken, will have a wider benefit to society?
4. Read some completed research reports on our website.
5. Groups that have funding should consider commissioning research, rather than applying to CARL.
6. Contact Anna to discuss your idea further and to receive a copy of the application form.
7. We are accepting proposals all year round.

CONTACT US

Anna Kingston a.kingston@ucc.ie /



Three videos from the Irish Probation Service



Introduction to the Probation Service

This short video offers an introduction to the Probation Service, one which provides people who come before the Court with an opportunity, a “second chance”, to change their behaviour and turn their lives around.

Link: [Video 1 - Introduction to the Probation Service - Length 4:57](#)

Criminal Justice Working in Partnership

A short video explaining the way in which the Probation Service works together with its criminal justice partners in helping to reduce crime and increase public safety.

Link: [Video 2 - Criminal Justice Working in Partnership - Length 3:47](#)

Restorative Justice - Reparation Panel, Case Enactment

This video by the Irish Probation Service, is an enactment of the case of a man who has pleaded guilty to assault causing harm and agreed to participate in a reparation panel.

Link: [Video 3 - Restorative Justice - Reparation Panel, Case Enactment - Length 27:02](#)

Best Practice Guidance for the HSE Mental Health Services



A video outlining the newly launched Best Practice Guidance for the HSE Mental Services.

Link: [Best Practice Guidance video - Length 2:10](#)

Breaking The Silence (Mental Health Documentary) – Real Stories

This documentary gets to the heart of suicide in Northern Ireland and examines the human debris of the family and friends left behind. Breaking The Silence is a sensitive and powerful portrait of the trauma faced by families in the aftermath of suicide, and the journey towards coming to terms with this deep, personal tragedy.

Link: [Breaking the Silence documentary - Length 58:42](#)

It's Not About The Nail

A brief video clip that uses humour to illustrate the difference between empathetic listening and trying to fix things for the other person. You could say it hits the nail on the head!

Link: [It's not about the nail video - Length 1:41](#)

Websites and articles



DISCOVER IRISH HEALTH RESEARCH



Lenus is the Irish health repository - Ireland's leading source of health-related research and grey literature. Journal articles, dissertations, HSE publications and the collected output of more than 130 health organisations past and present are all freely accessible.

Link: <http://www.lenus.ie/hse/>



The **Tusla** website provides a comprehensive list of links pertinent to child and family work at: <http://www.tusla.ie/links> in addition to an extensive range of research and policy reports and practice guidelines at: <http://www.tusla.ie/publications>

Hearing Voices Network Ireland (HVNI) is one of over 20 nationally-based networks around the world joined by shared goals and values, incorporating a fundamental belief that there are many ways to understand the experience of hearing voices and other unusual or extreme experiences. It provides information and resources, as well as support for people who have had these experiences, their families, friends, workers and the wider community.

Link: <http://hearingvoicesnetworkireland.ie>

Mental Health Reform is Ireland's leading national coalition of organisations campaigning to transform mental health and well-being supports in Ireland.

Link: <https://www.mentalhealthreform.ie/resources/>



Richie Sadler: Talking with teenage boys about porn, drink and suicide

"Some schools don't have the resources or the inclination to go near a topic like this, but the short- and long-term benefits are obvious to those that do". Richie Sadler, psychotherapist and former pro soccer player, talks about mental health with Transition Year students.

Link: <https://www.irishtimes.com/life-and-style/health-family/richie-sadler-talking-with-teenage-boys-about-porn-drink-and-suicide-1.3222291>

Our 15-year-old son has us living in fear

An article by Declan Coogan of NUI Galway on the realities of child-to-parent violence and abuse, a phenomenon that appears to be relatively new in Ireland, and which is cloaked in feelings of shame and hopelessness. He offers hope in managing conflict through the implementation of the Non Violent Resistance (NVR) model, recently adapted to suit the Irish context.

Link: <https://www.irishtimes.com/life-and-style/health-family/parenting/our-15-year-old-son-has-us-living-in-fear-1.3161259?mode=amp>. **Declan Coogan** is a Social Work Lecturer, National University of Ireland Galway; social worker, therapist, interests in child to parent violence & abuse, practice/

Social media pages



FACEBOOK

Mental Health Reform Facebook page: <https://www.facebook.com/mentalhealthreform/>

Facebook page for Social Workers for Choice: "**Social Workers 4 Choice**"

Link: <https://www.facebook.com/SW4Choice/>

New Facebook page for Health and Social Care Professionals in Ireland: "**Health and Social Care Professionals (HSCP) Ireland**"

Link: <https://www.facebook.com/groups/606966893024987/>



TWITTER

Mental Health Reform is the national coalition on mental health in Ireland:

[@MHReform](#)

GROW is a Mental Health Organisation which helps people who have suffered, or are suffering, from mental health problems: [@GROW_Ireland](#)

See Change is Ireland's movement to change minds about mental health problems & end stigma, one conversation at a time: [@SeeChangeIRL](#)

Social Workers for reproductive choice in Ireland: [@SW4Choice](#)

The **National Child Protection and Welfare Social Work Conference** is run by the Tusla child protection teams (south), IASW Southern Branch and Social Work Development Unit at UCC:

[@SWCONFUCC](#)

The **Ombudsman For Children** is the independent human rights body responsible for promoting and monitoring children's rights in Ireland. Directly accountable to the Houses of Oireachtas:

[@OCO_ireland](#)

The **UCC Child Law Clinic** offers student-led research to those litigating children's rights, engage in public information & legal education: [@childlawucc](#)

The **Children's Rights Alliance** has 100+ members working to make Ireland one of the best places in the world to be a child: [@ChildRightsIRL](#)

Foróige is Ireland's leading Youth Development Organisation: [@Foroige](#)

Youth Work Ireland works to develop the potential of young people and strengthen communities in Ireland through the provision of quality youth services: [@ywirl](#)

Research Digest by the British Psychological Society

Since 2003, the British Psychological Society's Research Digest has been digesting new research in psychology. Supporting the blog at <http://www.bps.org.uk/digest> this app will digest a new journal article in psychology each weekday, aiming to demonstrate that psychological science is fascinating and useful while also casting a critical eye over its methods.

Links:

[Research Digest for iOS](#)

[Research Digest for Android](#)

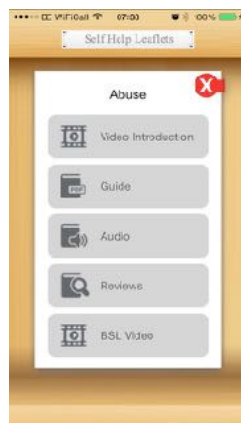


Self Help – Northumberland, Tyne and Wear NHS Foundation Trust.

NTW's Self Help app gives you access to the full range of 23 mental health self-help guides. These guides, three of which have been commended at the British Medical Association Patient Information Award, have been written by NHS clinical psychologists with contributions from service users and healthcare staff.

Covering common mental health issues like abuse, alcohol, anxiety, bereavement, anger, depression, domestic violence, eating disorders, health anxiety, hearing voices, panic to anger, domestic violence, obsessions and compulsions, panic, post traumatic stress, postnatal depression, self harm, shyness and social anxiety, sleeping problems and stress. The guides contain useful tips and hints as well as self-help techniques.

Each guide has an introductory video as well as a choice of male and female recorded audio versions available to stream. Guides can also be downloaded free of charge for offline reading. A PDF viewer is required to read the guides.



Links:

[Self Help for iOS](#)

[Self Help for Android](#)

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* and CORA websites <http://www.ucc.ie/en/appsoc/aboutus/activities/pl/>.

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