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Practice Links

Issue 54, October 2013

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Next Edition - December 2013.

Kenneth, Kerry, Steve and Eavan

Continuing Professional Development

This Systemic Café is organised by members of the Cork Family Therapy Network.

We wish to welcome all to our first systemic evening. The theme for this evening is: Austerity and it's implications for everyday lives, relationships, home and work as well as our emotional wellbeing.

This systemic café will give us an opportunity to share ideas, enjoy conversation and reflect with those interested in how families can be supported through these challenging times.

Speakers include:

1. Declan Roche. Systemic Psychotherapist, Knockanrawley Family Resource Centre, Tipperary.
2. Lydia Sapouna. Lecturer Applied Social Studies, UCC.
3. Mairin O Donovan. Systemic Psychotherapist/ Principal Social Worker, West Cork CAMHS.

This event is funded by the Family Therapy Association of Ireland (FTAI) and refreshments are available.

No need to book,

2 CPD points awarded by FTAI.

Contact Joan. 021-4357447

Continuing Professional Development

Challenges and Opportunities in Working with Children in Care: Multidisciplinary Perspectives

Dublin City University, Monday 21st October, 2013

ıe-day symposium: Reflections from research and clinical practice. Fee €30

Speakers:

Prof. Michael Tarren-Sweeney, Clinical Psychologist, Epidemiologist and Child Developmental Theorist.;Associate Professor of Child and Family Psychology at Canterbury University, New Zealand

Dr. Caroline McKenna, Consultant Child and Adolescent Psychiatrist, Family Therapist and Associate Medical Director, Tavistock and Portman NHS Foundation Trust, London

Prof. Helen Buckley, Associate Professor, School of Social Work and Social Policy; Course Coordinator, Postgraduate Diploma in Child Protection and Welfare, Trinity College Dublin. Senior Research Fellow , Children's Research Centre, Trinity College Dublin

Dr. Liam Shine, Senior Clinical Psychologist, South Lee and West Cork CAMHS, Brothers of Charity, Cork

Dr. Rosaleen McElvaney, Clinical Psychologist , Lecturer in Psychotherapy, Dublin City University

Bookings: Audrey.leonard@dcu.ie Tel 01 7008778

One-day Training workshop: The Assessment Child Checklist

(ACC, Tarren-Sweeney, 2013), facilitated by Prof Tarren-Sweeney. Fee €50(Maximum capacity: 50 participants). Tuesday 22nd October, 2013, Fee €50

Bookings: http://www.psychologicalsociety.ie/page/all_events/199.

Information on Assessment Checklist for Children - http://www.childpsych.org.uk/

Child Protection Awareness Workshop

Saturday 16 November 2013
Barnardos, Christchurch Square, Dublin 8
10.00am – 4.00pm (registration from 9.30am)

This workshop will look at signs and symptoms of abuse; roles and responsibilities of staff and reporting procedures. Numbers are limited on both events. Advance booking required. Further details and online booking on Barnardos website http://www.barnardos.ie/what-we-do/training/training-events.html

Mentalizing the child-in-mind

Mentalization Based Treatment & its application to work with parents who pose risk to their children

9.00 – 9.30	Registration
9.30 – 10.45	***Introduction to Mentalizing & its development***
10.45 – 11.15	Tea/Coffee
11.15 – 12.45	***Confined in Mind*** *How failures in Mentalizing manifest in severe child abuse and its impact on the development of the child*
12.45 – 1.45	Lunch
1.45 – 3.00	***Contained in Mind – The Lighthouse Model©:*** *Promoting Mentalizing in high-risk families. An MBT-Parent Model*
3.00 – 3.45	Tea/Coffee
3.45-5.00	***The Mentalizing Stance:*** *Core components with Dr Evelyn McCabe*

Mentalization refers to our ability to attend to mental states in ourselves and others as we attempt to understand our own actions and those of others on the basis of intentional mental states. Peter Fonagy and Anthony Bateman developed Mentalization Based Treatment (MBT) for Borderline Personality Disorder and it is now applied in the treatment of a wide range of disorders.

GERRY BYRNE is a Consultant Nurse & Child and Adolescent Psychotherapist (Tavistock) and Clinical Lead for the Family Assessment and Safeguarding Service (FASS) and the Infant Parent Perinatal Service (IPPS) based in Oxford, UK. He has trained in Basic and Advanced MBT with Peter Fonagy and Anthony Bateman at the Anna Freud Centre and is a Mentalizing Skills trainer.

DR EVELYN MCCABE is a Consultant Psychiatrist in General Adult Psychiatry with a special interest in Psychotherapy, is based in Mayo Mental Health Services where she has commenced a Mentalization Based Therapy group. Prior to this Dr McCabe set up and ran the first MBT treatment programme in the Republic of Ireland in Galway. She has trained in Basic and Advanced MBT at The Anna Freud Centre with Anthony Bateman and Peter Fonagy and is a Mentalizing Skills trainer.

This presentation will be of particular relevance to clinicians interested in Mentalization and Mentalization Based Therapy and/or involved in assessment or treatment of high-risk families.

The Marino Conference Centre, Griffith Avenue, Dublin 3.

Saturday 30th November – Registration from 9am

Name:

Address:

Occupation:

Email:

Telephone

I wish to attend the Conference €70.00 ☐ ***(lunch included)***

Closing date for receipt of booking form is 19th October 2013

Cheques/Postal Orders payable to: Mary Byrne, 65 Hermitage Drive, Rathfarnham, Dublin 16. (Contact @ 0871856831 / byrnemry@hotmail.com)
Website: http://gerry-byrne.squarespace.com

Continuing Professional Development

4th Biennial Child Protection and Welfare Social Work Conference:

New Agency, New Rights, New Systems: Are Children Any Safer?

University College Cork, Friday, 25th October 2013.

See our webpage http://swconf.ucc.ie for updates or follow us on Twitter: @SWCONFUCC.

Got a question for Gordon Jeyes for his interview with Senator Jillian van Turnhout? Tweet the question to @JillianvT and #swconfucc.

10th International Conference on Practice Teaching and Field Education in Health and Social Work: Creating connections, repairing disconnections and building relationships in practice learning and field education

Glasgow, April 7th-8th 2014. Call for papers open. Due date is 18th October 2013.

http://www.whitingbirch.net/cgi-bin/scribe?showinfo=ip005

The Free University of Bolzano/Bozen and the European Academy Bolzano are pleased to announce the

4th European Social Work Research Conference:
Private troubles or public issues? Challenges for social work research.

in Bolzano the 15-16-17 April 2014.
http://ecswr-2014.unibz.it

The organising committee invites submissions on the following themes:

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

Submission will be open from the 1st of June to the 30th of October.

2014 Signs of Safety Gathering

Loughborough, England, April 9-11, 2014.

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

the bessborough centre
expertise in family development

Working therapeutically with extreme states of mind

1-Day workshop, 28th September 2013, 10.00am - 4.00pm

Dr Amanda Jones, a leading UK Perinatal Psychotherapist, will facilitate a workshop on exploring how a mother's mind can become insane during the perinatal period. This workshop is designed particularly for perinatal psychiatrists, psychotherapists, midwives, infant mental health practitioners and family support workers.

This workshop will contribute to developing perinatal professional practice. You should expect to:

- Understand the impact of psychotic illnesses for the mother and child
- Recognise the influence of pre-existing conditions
- Understand the role of the practitioner and the impact on self
- Identify the care pathways available to help the mothers and babies

Detailed case examples will be explored to show how mothers can experience psychotic illnesses including the hard to pick up cases.

Biography: Dr Amanda Jones

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 Associate Professor of Warwick Medical School. Dr Jones is a well-known contributor to international research on psychodynamic parent-baby treatment and is an expert adviser on UK's government policy to enhance understanding of perinatal breakdowns.

Registration form: **Working therapeutically with extreme states of mind, 28th September, 2013**

Name: _____

Job title: _____

Organisation: _____

Email: _____

Telephone: _____

Fee: €70 (inclusive of lunch, tea/coffee and all handout materials).

10% discount for spaces booked before 31st July 2013. Return booking form with payment to Regina Walsh, The Bessborough Centre, Blackrock, Cork. Email: rwalsh@bessborough.ie Tel: 021 435 7730

Continuing Professional Development

the bessborough centre
expertise in family development

Attachment & Psychopathology

A 3 day course running from Friday 8th to Sunday 10th November 2013.
Led by **Dr Patricia McKinsey Crittenden Ph.D**, academic and practitioner in the fields of child abuse, attachment theory and family therapy.

Dr Patricia McKinsey Crittenden has published more than 100 scientific papers and several books and is well known for having developed the Dynamic Maturational Model (DMM) of attachment and adaptation. Dr Crittenden studied with Mary Ainsworth and John Bowlby, and is a founder of the International Association for the Study of Attachment (IASA).

This course examines development from infancy to adulthood and the process of adaptation and developmental pathways that carry risk for psychopathology. It focuses on development, prevention and treatment of psychological disorder. The evidence-based approach uses the DMM of attachment and adaptation which is highly relevant to individuals who are at-risk, have been exposed to danger, display disturbed or maladaptive behavior, or are diagnosed as having a psychiatric disorder.

The interactive course, led by Dr Crittenden, is intended for professionals, including psychiatrists, psychologists, social workers, therapists and nurses who work with troubled families or individuals.

Which new skills will you take away from this programme?

- Functional formulation: moving beyond diagnosis to understanding behaviour
- Treatment planning: choosing efficient & effective treatment strategies
- Identifying false-positive affect: uncovering hidden problems in their early stages
- Differentiating symptoms and self–protective strategies specifying how symptoms function

Course Schedule

Day 1 Friday 8th November 2013

Morning	Evolution, danger & brain
Afternoon	CARE-Index videotapes Child abuse and neglect Psychosis and trauma in parents

Day 2 Saturday 9th November 2013

Morning	Pre-school development & the DMM The coercive & self–protection strategies Cross-generational transformations Treatment in the pre-school years
Afternoon	School-age: Peers, obsessive & deceptive strategies Culture: Gender development & parental roles Conduct problems and psychotic intrusions Treatment: Recommended & risky practices

Day 3 Sunday 10th November 2013

Morning	Adolescence: Integrating sexuality with attachment Sexual disorders & sexual offending Eating and personality disorders Transition to adulthood attachment interview Dangerous gaps in services & preventative opportunities
Afternoon	Differential treatment Violence and criminality Family drawings Adulthood attachment interview Summary & overview

This Attachment & Psychopatholgy course is foundational and is a pre-requisite for all DMM assessment courses such as:

The Adult Attachment Interview (AAI, 25 yrs & upwards), Infant CARE- Index (birth-24 months), Preschool and School-age Assessment of Attachment (PAA 2-5 years and SAA 6-13 years) and Transition to Adulthood Interview (TAAI 16-25yrs).

Attachment & Psychopathology booking form - PLEASE WRITE CLEARLY!

Name: _____ **Email:** _____

Job title: _____ **Organisation:** _____ **Tel:** _____

Fee: €380 (inclusive of lunch, tea/coffee and all materials).
A reduced fee of €340 will apply before 31st July 2013. With groups of 4 or more the fee is €300 per place.
Return booking form with payment to Regina Walsh, The Bessborough Centre, Blackrock, Cork. Email: rwalsh@bessborough.ie Tel: 021 435 7730

Continuing Professional Development

First conference announcement and call for workshop presentations for 'MEANINGS OF MADNESS; CRITICAL AND CREATIVE PERSPECTIVES' Conference

13 AND 14 NOVEMBER 2013, UNIVERSITY COLLEGE CORK, IRELAND

CATHERINE MCAULEY SCHOOL OF NURSING AND MIDWIFERY AND
SCHOOL OF APPLIED SOCIAL STUDIES, UNIVERSITY COLLEGE CORK, IRELAND

IN ASSOCIATION WITH CRITICAL VOICES NETWORK IRELAND

FIRST CONFERENCE ANNOUNCEMENT AND CALL FOR WORKSHOP PRESENTATIONS

Madness is a word that continues to invite controversy, with some perceiving it to be a derogatory term, others perceiving it as a celebration of human creativity and diversity, whilst others position themselves somewhere in the middle. This year's conference, now in its 5th year, aims to explore these various positions by focusing on critical perspectives on the meaning of madness as a human experience and on creative responses to such an experience.

The conference offers opportunities to consider:

- Meanings of madness
- Broadening understandings of expressions of madness
- Creative approaches to engaging with and responding to madness

Confirmed Keynote Speakers:

Gail A. Hornstein, Professor of Psychology, Mount Holyoke College (Massachusetts, USA), author of Agnes's Jacket: A Psychologist's Search for the Meanings of Madness (PCCS Books, 2012). Her research and writing – grounded in an understanding of the mind based on lived experience – challenges fundamental assumptions about 'mental illness' and treatment. www.gailhornstein.com

Liz Brosnan won a Government of Ireland scholarship to explore User Involvement in Irish Mental Health Services for her PhD research at University of Limerick. She has both personal and professional experience of dealing with "madness" (whatever that means!). Her philosophy on this and many other thorny life questions is that, what you see depends on where you stand!

Dr John Read, Professor of Clinical Psychology, University of Liverpool, UK. Editor of the Journal 'Psychosis: Psychological, Social and Integrative Approaches' and editor (with Jacqui Dillon) of Models of Madness: Psychological, Social and Biological Approaches to Psychosis.

Teresa Tuohy, PHD Candidate at Trinity College Dublin. Teresa's research 'Mothers' Voices: A study of mothering with women experiencing mental health problems' is funded by the Health Research Board. Teresa has many years' experience in mental health practice, education and recovery

Irene van de Giessen, Owner of the Convalescent Talent Agency, Expert by Experience employed at the Admiraal de Ruyter Hospital in Vlissingen, the Netherlands, http://www.convalescenttalent.nl/ @Hersteltalent

Doug Ross, artist, a founding member of Renew. Active member of CVNI and the hearing voices network in Ireland. Personal experience of sustained recovery from addiction and psycho-spiritual distress.

Call for Oral Presentations/Workshops (45 minutes' duration): Please submit an abstract (in Word - 250 words max) related to the conference theme and outlining the aims of and intentions by 6 September 2013. Please also submit a brief bio (in Word - 150 words max). Please email abstract and bio to l.sapouna@ucc.ie. Inquiries to h.gijbels@ucc.ie or l.sapouna@ucc.ie.

Registration: Registration details will be circulated in early September 2013.

The Conference organisers are Harry Gijbels, Catherine McAuley School of Nursing and Midwifery, and Lydia Sapouna, School of Applied Social Studies, University College Cork, Ireland.

Continuing Professional Development

Child to Parent Violence: Innovations in Practice, Policy & Research

International Conference

12-13 June 2014
NUI Galway

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

More information at
www.rcpv.eu

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

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

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

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

Who Will Attend: Social Workers* Child & Adolescent Mental Health Service Practitioners* Children, Youth and Family Services Practitioners* Counsellors* Psychologists* Family Therapists* Family Support Workers* Gardai* Probation Officers* Juvenile Liaison Officers* Juvenile Justice Service Providers* Women's Refuge and Advice Centres* Social Care Professionals* Academics and Researchers* Health Service Executive Managers* Parents/ Carers* Parent/Carers Support Groups* Children and Family NGO Networks* Women/Men's NGO Networks* Human Rights Groups* Government Departments and Agencies* Legal Professionals* Anyone who has an interest in the field of child to parent violence.

NUI Galway
OÉ Gaillimh

COPE Galway
Let's help together
WATERSIDE HOUSE

daphne

With financial support from the DAPHNE programme of the European Union

Social Work Action Network

Building Alliances in Social Work and Social Care

Calling all social workers, social care workers, students, academics, family members, service users, welfare claimants, activists, trade unionists, advocacy workers, care workers..JOIN SWAN!

Regional groups contact details:

SWAN Galway:
swangalway@gmail.com
SWAN Cork:
swancork@gmail.com
SWAN Dublin:
socialworkactionnetworkireland@gmail.com

Facebook pages:

SWAN Ireland:
Type 'SWAN Ireland'

SWAN Cork:
Type 'SWAN Cork'

International SWAN:

Website:
www.socialworkfuture.org

Building Alliances

We look to build alliances with grassroots groups in order to show solidarity but also to connect different groups together in order to have a united cross-sectional network which addresses issues on a structural level.

Who We Are

The Social Work Action Network Ireland is a growing grassroots network of people who are concerned about the increase in structural inequalities, marketisation and mangerialism in "social work". By "social work" we mean any work, paid or unpaid, that is geared towards social justice, human rights, community development, anti-oppressive, anti-racist, caring work, advocacy work etc.

Defending the Welfare State

We oppose the increasing bureaucratisation of society. We believe that the consistent and sustained welfare cuts and the blatant attacks on marginalised groups are increasing the stigmatisation of service users and ultimately seek to undermine the welfare state. We believe that good "social work" can help people to address the problems and difficulties in their lives, difficulties that are often rooted in inequality and oppression. Ethical "social work" necessarily involves confronting the structural and public causes of so many private ills.

New publications and policy reports

Social Justice Pre-Budget Policy *Special*

As the 2014 budget looms ahead, Practice Links are signposting you to the alternatives to austerity, proposed by social justice groups around Ireland and the world. As people who work in social services we know that decisions made in the government budget have a direct effect on the marginalised populations we work with. Read how further cuts to these groups could be avoided.

"Choosing an Equitable Route to Recovery in Budget 2014", TASC, September 2013

The overwhelming balance of international evidence shows that policy on addressing the public finances needs to change and that an alternative approach to closing the deficit and recovering the economy is urgently required. The window of opportunity from pushing out the promissory note repayments has opened up debate on the level of adjustment for 2014 to a much greater extent than in previous years' budgets.
TASC urges the government to take advantage of that opportunity by constructing a budget that meets our deficit reduction targets but that also puts the stimulation of growth and jobs at the top of its economic and social agenda for 2014, and begins to rectify the economic inequalities in our society.

The full report if available here: http://www.tascnet.ie/upload/file/TASC_Budget2014%281%29.pdf

"Briefing on Budget 2014", Social Justice Ireland, June 2013

This paper argues that:

- There should be no more cuts in expenditure in Budget 2014.
- A minimum effective corporate tax rate (6%) should be introduced.
- Tax credits and welfare rates should rise by €5 a week.
- Budget 2014 should provide a major investment programme and protect public services.
- All of this can be done while reducing borrowing by €3.1bn in 2014.

Read the full briefing here: http://www.socialjustice.ie/sites/default/files/file/Budget/2013-06%20-%20Budget%20Choices%202014%20-%20FINALFINAL.pdf

"Pre-Budget Submission", National Women's Council of Ireland, August 2013

National Women's Council of Ireland (NWCI) calls on the government to protect women and children from further cuts in Budget 2014 and invest into crucial supports, such as childcare.

You can view the full budget submission here: http://www.nwci.ie/download/pdf/nwci_pre_budget_submission_2014.pdf

New publications and policy reports

"A Cautionary Tale: The True Cost of Austerity and Inequality in Europe", Teresa Cavero and Krisnah Poinasamy (Oxfam), September 2013

Europe has often seen itself as a place where the social contract balances growth with development. A place where public services aim to ensure everyone has access to a high quality education and no one need live in fear of falling ill. A place where the rights of workers, and particularly of women, are respected and supported, and where societies care for the weakest and the poorest; where the market has been harnessed to benefit society, rather than the other way round.
However, this idyllic social model has been under threat for some time; income inequality was increasing in many countries even before the financial crisis began. Now, the European model is under attack from ill-conceived austerity policies sold to the public as the cost of a stable, growing economy, for which all are being asked to pay. Left unchecked, these measures will undermine Europe's social gains, creating divided countries and a divided continent, and entrenching poverty for a generation.

A link to the full briefing paper can be found here: http://www.oxfam.org/sites/www.oxfam.org/files/bp174-cautionary-tale-austerity-inequality-europe-120913-en_1.pdf

"Pre-Budget Submission 2014", Disability Federation Ireland

DFI views the Budget as the Government's expression of its priorities for the coming year. In this regard, we are recommending that the Government:

- Protects the basic standard of living of people with disabilities. This means recognising the extra costs that people with disabilities incur living in one's home, in maintaining one's health, accessing education, and employment and in travel.
- Introduces no more cuts to disability services and prioritises investment in community living.
- Prioritises investment in public services to make them appropriate and accessible for people with disabilities including health, education, employment transport, and housing services.

A link to the budget submission can be found here: http://www.disability-federation.ie/userfiles/file/DFI%20Pre%20Budget%20Submission%202014_merged.pdf

"Do What Works: Submission for Budget 2014", Mental Health Reform, August 2013

Mental Health Reform recently launched an eight-week pre-budget campaign calling on the Government to "Do What Works" for mental health, by investing in measures that are known to be both effective and cost-effective for improving mental health. Orla Barry, Director of Mental Health Reform, said: "We know what works for mental health. We need to have mental health services based in the community, with a range of multidisciplinary staff who offer a range of treatment options. People need easy access to mental health support through their GP and access to talking therapies. People with a mental health difficulty need support to get into and maintain employment and secure accommodation. These are things that work for people's mental health"

"While we have had promises in the last two Budgets that the Government would invest €35million each year in community mental health services, the follow through on these promises has been frustratingly slow. We now need a firm commitment in Budget 2014 that the €35million promised in the Programme for Government will be delivered and spent in a timely manner in 2014", Ms. Barry concluded.

A link to the full submission can be found here: http://www.mentalhealthreform.ie/wp-content/uploads/2013/07/MHR-prebudget-2014-submission.pdf

New publications and policy reports

"Do What Works" Campaign, Mental Health Reform, August 2013

The "Do What Works" petition, which runs until Budget Day on 15th October 2013, can be accessed via www.mentalhealthreform.ie/petition2013 and will be sent to the Taoiseach, Minister for Finance, Minister for Health, Minister of State for Mental Health and Minister of State for Primary Care ahead of Budget Day.

"Valuing direct experience: a basis for renewing research" Paper given at ARVAC Annual Lecture, Peter Beresford, London, 6th June 2013

This paper, by a well-known social work educator in the UK, is primarily about first hand experience and its potential role and central importance in the construction of knowledge. The underlying point is that we must engage with the diversity of experience if we are to address diversity in research, otherwise all we are likely to do is to mirror prevailing exclusions. This includes diversity in all its senses, addressing equality issues, differences in communication and people's access issues.

A link to the full speech can be found here: http://www.shapingourlives.org.uk/documents/PeterBeresfordARVACAnnualLecture06June2013.pdf

Critical and Radical Social Work , An International Journal

Critical and Radical Social Work is a new journal launched in 2013 by Policy Press.

Co-editors: Michael Lavalette, Professor of Social Work and Social Policy, Liverpool Hope University, and Iain Ferguson, Professor of Social Work and Social Policy, University of the West of Scotland

Two issues per annum: April and November
Print ISSN 2049-8608
Online ISSN 2049-8675

Critical and Radical Social Work is now on Facebook

*** Sign up for free access in 2013 ***

See more at: http://www.policypress.co.uk/journals_crsw.asp#sthash.Ogq7o7Bn.dpuf

Practice signposts: data sources to support practice

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

Campbell Collaboration

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

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/

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/

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, 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, 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

Research briefs

Supported employment for adults with severe mental illness (September 2013) by

Yoshihiro Kinoshita, Toshi A Furukawa, Kuni Kinoshita, Mina Honyashiki, Ichiro M Omori, Max Marshall, Gary R Bond, Peter Huxley, Naoji Amano, David Kingdon

THE COCHRANE COLLABORATION®

Background

People who suffer from severe mental disorder experience high rates of unemployment. Supported employment is an approach to vocational rehabilitation that involves trying to place clients in competitive jobs without any extended preparation. The Individual placement and support (IPS) model is a carefully specified form of supported employment.

Objectives

1. To review the effectiveness of supported employment compared with other approaches to vocational rehabilitation or treatment as usual.
2. Secondary objectives were to establish how far:
(a) fidelity to the IPS model affects the effectiveness of supported employment,
(b) the effectiveness of supported employment can be augmented by the addition of other interventions.

Search methods

We searched the Cochrane Schizophrenia Group Trials Register (February 2010), which is compiled by systematic searches of major databases, hand searches and conference proceedings.

Selection criteria

All relevant randomised clinical trials focusing on people with severe mental illness, of working age (normally 16 to 70 years), where supported employment was compared with other vocational approaches or treatment as usual. Outcomes such as days in employment, job stability, global state, social functioning, mental state, quality of life, satisfaction and costs were sought.

Data collection and analysis

Two review authors (YK and KK) independently extracted data. For binary outcomes, we calculated risk ratio (RR) and its 95% confidence interval (CI), on an intention-to-treat basis. For continuous data, we estimated mean difference (MD) between groups and its 95% (CI). We employed a fixed-effect model for analyses. A random-effects model was also employed where heterogeneity was present.

Main results

A total of 14 randomised controlled trials were included in this review (total 2265 people). In terms of our primary outcome (employment: days in competitive employment, over one year follow-up), supported employment seems to significantly increase levels of any employment obtained during the course of studies (7 RCTs, n = 951, RR 3.24 CI 2.17 to 4.82, very low quality of evidence). Supported employment also seems to increase length of competitive employment when compared with other vocational approaches (1 RCT, n = 204, MD 70.63 CI 43.22 to 94.04, very low quality evidence). Supported employment also showed some advantages in other secondary outcomes. It appears to increase length (in days) of any form of paid employment (2 RCTs, n = 510, MD 84.94 CI 51.99 to 117.89, very low quality evidence) and job tenure (weeks) for competitive employment (1 RCT, n = 204, MD 9.86 CI 5.36 to 14.36, very low quality evidence) and any paid employment (3 RCTs, n = 735, MD 3.86 CI -2.94 to 22.17, very low quality evidence). Furthermore, one study indicated a decreased time to first competitive employment in the long term for people in supported employment (1 RCT, n = 204, MD -161.60 CI -225.73 to -97.47, very low quality evidence). A

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large amount of data were considerably skewed, and therefore not included in meta-analysis, which makes any meaningful interpretation of the vast amount of data very difficult.

Authors' conclusions

The limited available evidence suggests that supported employment is effective in improving a number of vocational outcomes relevant to people with severe mental illness, though there appears to exist some overall risk of bias in terms of the quality of individual studies. All studies should report a standard set of vocational and non-vocational outcomes that are relevant to the consumers and policy-makers. Studies with longer follow-up should be conducted to answer or address the critical question about durability of effects.

Plain language summary

Supported employment for adults with severe mental illness

People with mental health problems experience high rates of unemployment. There are various schemes delivering support to people with mental health problems who are trying to find employment. Supported employment tries to place people into competitive jobs. People are placed quickly in normal work settings where they receive intensive support and training from 'job coaches'.

Individual placement and support (IPS) is a more specified scheme that includes: finding local jobs; a rapid job search; customer choice in what they want from the employment service; close working between employment and mental health teams; attention to people's preferred job, their strengths and work experience; ongoing and, if necessary, long-term individual support; and the benefits of counselling. Employment specialists act to identify people's job interests, assist with job finding, give job support and engage other support services. IPS uses assertive outreach to deliver training, advice and vocational support in the community. Augmented supported employment is where employment support is given with other supplementary techniques, such as social skills training, motivational classes and various types of rehabilitation. Other approaches are many and varied, including: job workshops; job counselling; peer support; partnerships with business; and the Clubhouse model, which involves training, work experience, peer support and transitional employment and IPS because they do not search for immediate and competitive employment. However, all approaches involve periods of preparation, education and on-the-job training.

This review compares supported employment and IPS with other approaches for finding employment. Drawing from a total of 2259 people with mental health problems in 14 studies, the review has two main findings: 1) Supported employment increases the length and time of people's employment; 2) People on supported employment find jobs quicker. Supported employment and IPS are better than other approaches in these two respects, but there is limited information or measurable differences on other important issues for service users.

For example, there is little information on issues such as improving quality of life, impact on people's mental health, days in hospital and costs. Furthermore, the review built its main findings on limited statistical evidence drawn mainly from studies carried out in North America and Europe. Future studies should address a fuller range of information and outcomes. Longer studies are needed to see how long the effects of supported employment last.
This plain language summary has been written by a consumer Ben Gray from RETHINK.

A link to the full review can be found here: http://onlinelibrary.wiley.com/doi/10.1002/14651858.CD008297.pub2/full

Research briefs

Brief Strategic Family Therapy (BSFT) for Young People in Treatment for Non-Opioid Drug Use: A Systematic Review, (September 2013), Maia Lindstrøm, Pernille Skovbo Rasmussen, Krystyna Kowalski, Trine Filges, Anne-Marie Klint Jørgensen

BACKGROUND: Youth drug use is a severe problem worldwide. This review focuses on a treatment for non-opioid drugs such as cannabis, amphetamines, ecstasy and cocaine, which are strongly associated with a range of health and social problems. Brief Strategic Family Therapy (BSFT) is a manual-based family therapy approach concerned with identifying and ameliorating patterns of interaction in the family system that are presumed to be directly related to the youth's drug usage. BSFT relies primarily on structural family theory (i.e. how the structure of the family influences the youth's behavior) and strategic family theory (i.e. treatment methods are problem-focused and pragmatic).

OBJECTIVES: The main objectives of this review are to evaluate the current evidence on the effects of BSFT on drug use reduction for young people in treatment for non-opioid drug use and, if possible, to examine moderators of drug use reduction effects to determine whether BSFT works better for particular types of participants.

SEARCH STRATEGY: An extensive search strategy was used to identify qualifying studies. A wide range of electronic bibliographic databases were searched in June 2011, along with government and policy databanks, grey literature databases, and citations in other reviews. We additionally searched the reference lists of primary studies, hand-searched relevant journals, and searched the Internet using Google. We also maintained a correspondence with researchers within in the field of BSFT. Neither language nor date restrictions were applied to the searches.

SELECTION CRITERIA: Studies were required to meet several criteria to be eligible for inclusion. Studies must:
- have involved a manual-based outpatient BSFT treatment for young people aged 11-21 years enrolled for non-opioid drug use.
- have used experimental, quasi-randomized or non-randomized controlled designs.
- have reported on at least one of the following eligible outcome variables: drug use frequency, family functioning, education or vocational involvement, treatment retention, risk behavior or any other adverse effect.
- not have focused exclusively on treating mental disorders.
- have had BSFT as the primary intervention.

DATA COLLECTION AND ANALYSIS: The literature search yielded a total of 2100 references, of which 58 studies were deemed potentially relevant and retrieved for eligibility determination. Six papers were data-extracted, two of which were subsequently excluded for not focusing on treatment effect. Four papers describing three unique studies were included in the final review. Meta-analysis was used to examine the effects of BSFT on drug use reduction, family functioning and treatment retention compared to Treatment as Usual (TAU) in the included studies, where TAU encompassed a range of conditions and interventions .

RESULTS: The results of the review should be interpreted with great caution, given the extremely small amount of data available and thus the low statistical power to detect the effects of BSFT.
For drug use reduction, there is no evidence that BSFT has an effect on drug use frequency at the end of treatment compared to community treatment programs, group treatment, and minimum contact comparisons3. The random effects standardized mean difference was -0.04 (95% CI -0.25, 0.34), based on three studies with 520 participants.
For family functioning, there is no evidence that BSFT has an effect on family functioning at the end of treatment compared to control conditions3. The random effects standardized mean difference was 0.06 (95% CI -0.13, 0.25) for family functioning as reported by parents, based on three studies with 568 participants. The random effects

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The Campbell Collaboration Library of Systematic Reviews
The Campbell Library

standardized mean difference for family functioning reported by the youth themselves was 0.16 (95% CI -0.19, 0.51), based on two studies with 416 participants.

For treatment retention, we found evidence that BSFT may improve treatment retention in young drug users compared to control conditions. The random effects standardized mean difference was 0.55 (95% CI 0.39, 0.76), based on two studies with 606 participants.

Meta-analysis was not feasible for the outcome of risk behavior due to differences in the measures used in the individual studies. Horigian et al. (2010) did not report significant effects on risk behavior. Santisteban et al. (2003) used the socialized aggression scale of RBPC, and reported that youth in BSFT intervention showed greater reduction in peer-based delinquency. The random effects standardized mean difference at end of treatment was -0.27 (95% CI -0.72, 0.18).

Only Horigian et al. (2010) reported on adverse effects; here more than 50 percent of the young people in the study experienced risk behavior or other adverse events during the trial. The most common event noted was arrest, followed by suspension from or dropping out of school, and absconding from home. However, the distribution of events in both BSFT and control conditions does not indicate clear differences between BSFT and the control conditions.

No studies reported on the outcome of education or vocational involvement. We found that the methodological rigor and the adequacy of reporting in the included studies were generally insufficient to allow confident assessment of the effects of BSFT for young drug users. Two of the three included studies provided insufficient information on core issues to allow us to assess the risk of bias (e.g. methods of sequence generation, allocation concealment, and completeness of outcome data). These flaws in methodology have forced us to question the validity of the two studies. Correspondingly, caution should also be placed on any interpretation of the results. Due to the small number of studies included in the review, it was not possible to assess possible moderators of drug use reduction effects.

AUTHORS' CONCLUSIONS: There is insufficient firm evidence to allow conclusions to be drawn on the effect of BSFT on non-opioid drug use in young people. While additional research is needed, there is currently no evidence that BSFT treatment reduces the drug use or improves family functioning for young non-opioid drug users compared to other treatments.

The review provides us with mixed findings: on one hand, BSFT does not seem to have better or worse effects on drug use frequency and family functioning than community treatment programs, group treatment, or minimum contact comparisons, but has positive effects on treatment retention compared to control conditions4, and longer retention in treatment has been identified as a consistent predictor of a favorable outcome from drug use treatment. Although the possibility remains that the length of follow up in the included studies was insufficient to detect significant changes, it should be noted that the evidence we found was limited, both in terms of the number of studies and in their quality.

The aim of this systematic review was to explore what is known about the effectiveness of BSFT for reducing drug use in young people who use non-opioid drugs. The information currently available does not provide a sufficient basis for drawing conclusions about actual outcomes and impacts. Consequently, no substantive conclusion about the effectiveness of BSFT can be made, and we can neither support nor reject the BSFT treatment approach examined in this review. There is a need for well-designed randomized controlled trials in this area. New trials should report their results clearly and include long-term follow-up to allow the tracking of effects after treatment cessation.

A link to the full report can be found here: http://www.campbellcollaboration.org/lib/project/209/ (Click "review", click "save binary file", then open the pdf of the review on your "downloads" tab).

Research briefs

Youth Mental Health & Parental Loss & Grief

Richardson, M., Cobham, V., McDermott, B., & Murray, J. (2013) 'Youth mental illness and the family: Parents' loss and grief' in *Journal of Child and Family Studies, 22*(5), 719-736.

What is this article about?

Reports the findings of an Australian-based qualitative research study which aimed to:

1) Explore the loss and grief of parents engaged with a Child and Adolescent Mental Health Service (CAMHS) because their youth has significant psychological problems;

2) Determine the therapeutic needs of parents engaged with the CAMHS with a view to assisting clinicians in supporting their patients' parents.

What are the critical findings?

1) Participants reported numerous losses associated with their child's mental health conditions including:
    - Loss of their child's former idealised personality,
    - Loss of certainty about their youth's future
    - Loss of feelings of parental confidence and control
    - Loss of financial stability
    - Missed opportunities to socialise
    - Loss of their sense of self

2) Symptoms described by participants were consistent with conceptualisations of grief including cognitions around self-blame, hopelessness, guilt, anger, disappointment, sadness, crying, shock, and denial.

3) Participants' grief persisted over time and was exacerbated by various milestones and circumstances.

4) Parents' mechanisms for coping with their experience were also highlighted suggesting that in addition to loss and grief, parents frequently endure caregiving challenges and waning support.

5) Participants' loss and grief adjustment is similar to the experience of older family members whose adult relative has a mental illness.

What are the implications for practice?

1) Parents are likely to benefit from having the opportunity to share their story (and reflect on its significance) with clinician(s) coordinating their child's care.

2) Parents reported experiencing complex loss in relation to their youth's mental health condition and therefore may benefit from assistance in naming what has gone or changed, while also making efforts to normalise their sense of loss.

3) Clinicians may encourage parents to express their grief (including difficult and conflicting emotions e.g. love and resentment) and address parents' cognitions around self blame.

4) Findings relating to parental coping mechanisms indicate that support around self care and coping may be beneficial.

5) Clinicians may be well placed to support parents in navigating their child's school or treating system; particularly facilitating parents' ability to assertively communicate questions and concerns.

Research briefs

Culturally Competent Practice with Bisexual Individuals

Scherrer, K. (2013) 'Culturally competent practice with bisexual individuals' in *Clinical Social Work Journal, 41*(3), 238-248.

What is this article about?

1) Explicates culturally competent practice strategies for working with bisexual clients.
2) Five prominent themes from research on practice with this population are identified:
    - Biphobia (negative attitudes toward and stereotypes about bisexual people)
    - Practitioner attitudes about bisexuality
    - Identity development
    - Social relationships
    - Sexual Health
3) These themes are used to analyse qualitative data with bisexual individuals in order to illustrate how these issues may emerge in clinical social workers' practice relationships.

What are the implications for practice related to each theme?

1) **Biphobia**: Given the potential to internalise the of negative messages that exist about their sexual orientation clients may benefit from being able to explore stereotypes about bisexuality and having the opportunity to describe experiences of support as well as marginalisation.
2) **Practitioner attitudes about bisexuality**: Clinical social workers in all settings would benefit from opportunities to assess their own unconscious biases about bisexuality, perhaps through continuing education on this topic, and supervision.
3) **Identity development**: Clinical social workers can help clients to contextualise their feelings of confusion or uncertainty as a result of living in a biphobic social environment. Clients' attractions should be normalised and bisexual identities taken as healthy, stable, and unproblematic, unless otherwise indicated.
4) **Social relationships**: Understanding the relationships that bisexual clients have with family, friends, and others is important to clinical work with bisexual people. Clinical social workers may help to strategise with bisexual clients about how to manage their identity in various social contexts.
5) **Sexual health**: Clinicians must be prepared to help clients examine their relationship ideals and expectations of these relationships.

Additional implications for practice:

- Clinical social workers are encouraged to develop comfort with the ambiguity associated with sexual orientation as clients' relationships and identity labels may change across time and social context.
- Clinicians are encouraged to ask about the meaning of a bisexual identity, as well as other identities (e.g. race, gender, age) in order to promote conversations and not categories.

Research briefs

Child Welfare Workers who Experience the Death of a Child Client

Douglas, E.M. (2013) 'Child welfare workers who experience the death of a child client' in *Administration in Social Work, 37*(1), 59-72.

What is this article about?

1) Reports the findings of a US-based quantitative research study of child welfare workers (CWW) who experienced a child maltreatment fatality (CMF) on their caseload.

2) Addresses 1) the characteristics of workers, 2) how workers approached the case, and 3) the fallout after the fatality.

What are the critical findings?

1) CWWs who suffered the fatality of a child client were in their 30s, well trained (almost half reported having a college degree and another half held a master's degree), had a median of 25 cases on their caseload, and had worked as a CWW for a median of six years.

2) A majority of the sample (78%-84%) felt confident in their handling of the case before the CMF.

3) CWWs reported feeling that they received appropriate guidance regarding their handling of the case prior to the fatality, felt confident, had not worried about the child/family, and a minority (10%-12%) reported wanting to pursue another course of action before the CMF.

4) Less than half of CWWs reported that their agency provided them with therapy/support after the fatality, despite many reporting that they felt distressed, burned out, unable to focus on their work, and insecure about their skills as a worker.

5) 68%-80% of CWWS reported that their co-workers and supervisors were a source of support for them.

What are the implications for practice?

1) Findings support the importance of, and need for training regarding recognising and conceptualisation of risk for a fatality.

2) Consideration may be given to providing formal sources of support in the aftermath of a child maltreatment fatality e.g. emotional and legal support.

3) Findings point to the need for a more comprehensive understanding of the availability, and workers' use of, supports in the event that a child on their caseload dies.

Organisational Profile

Organisational Profile

What do they do?
The Centre for Effective Services (CES) is an independent organisation working across the island of Ireland that helps services for children, young people, and the community to make better use of evidence of what works so that they can deliver more effective services.

The CES works with others to connect and support the implementation of effective policy, efficient systems and good practice, using the best available evidence, so that children, young people, families and communities thrive.

How do they do it?
The CES undertakes a wide range of project work to influence policy and systems change, champion service design and implementation and build knowledge, skills and capacity of the whole sector. The CES is one of a new generation of organisations focusing on implementation science. Their small multi-disciplinary team are working in the areas of practice design and implementation, research and evidence, knowledge dissemination and communication, and organisational development.

Projects undertaken by the CES are organised into three inter-related areas:

1) Policy and systems change;
2) Service design and implementation;
3) Supporting practice: Knowledge, skills, and capacity.

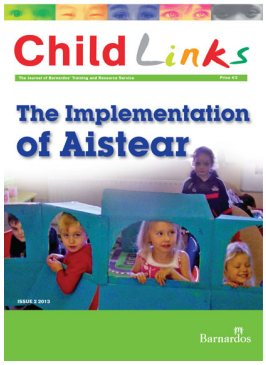
Sample CES Project: Development of What Works Process and Tools for Working with Clients
In recent years, across the world, a growing number of evidence-based programmes (EBPs) aimed at services for children and families have been developed. These programmes, services, or interventions seek to apply lessons from research about what works in practice that has been demonstrated to achieve measurable improvements for service users.

Researchers and practitioners have begun to distill the shared features of effective programmes and services that seem to be responsible for their positive effects. These 'in common' characteristics are sometimes called "principles of effectiveness", "active ingredients" or "best practices". In January 2011 the CES launched the What Works Process and Tool, a comprehensive multi-dimensional review of the extent to which a service is currently working in evidence-informed ways.

In designing this tool, the CES have taken the view that the identification of common characteristics among effective programmes and services does offer an opportunity for practitioners to reflect upon their own services, whether or not they are implementing a recognised EBP or wish to make their practice or service more evidence informed.

Where can I find out more?
http://www.effectiveservices.org/

Web Links and Electronic Publications



ChildLinks (Issue 2, 2013) The Implementation of Aistear

This issue of ChildLinks includes articles from the National Council for Curriculum and Assessment (NCCA); Barnardos; Donegal County Childcare Committee; youngballymun; Geraldine French, Early Childhood Specialist; and various practitioners implementing Aistear into their services.

ChildLinks (Issue 1, 2013) Bullying

This latest edition of ChildLinks contains articles from Anti-Bullying Research and Resource Centre, Trinity College, Dublin; Department of Education and Skills; Ombudsman for Children's Office; School of Media and Centre for Social and Educational Research, Dublin Institute of Technology; Barnardos; Immigrant Council of Ireland; and BeLonG To Youth Services

Integrated Care for Ireland in an International Context: Challenges for Policy, Institutions and Specific Service User Needs

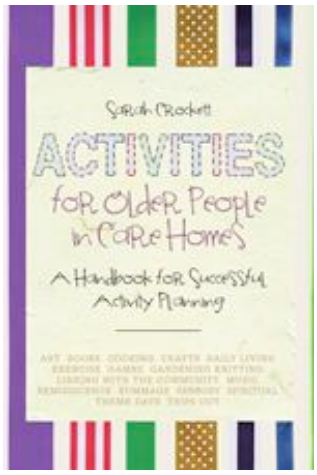
Integrated Care in Ireland in an International Context aims to bring the debate on the future of integrated care in Ireland to a wider audience than heretofore. It is intended to guide the thinking of policy-makers and the whole panoply of different health and social care professions that are stakeholders in the process. Equally important, it is hoped that groups representing the needs of the general population, those with disability, mental illness, older people with specific needs and others also will benefit from the text. The whole project is to improve the overall health and wellbeing of all who live in Ireland.

It is hoped also that this publication will be a spur to the further development of research and teaching in the area of integrated care, as well as being a catalyst for the resourcing and implementation of improved public policy in the area. As such, this book will be important to students and lecturers across the disciplines of medicine, social work, social care, gerontology, addiction, health management, lawyers in health and human rights areas, mental health therapists and other sister professions that are not included here, such as occupational and speech/ language/auditory therapies.

We have one copy of this book if you would to review it for the next edition of PL. Email k.burns@ucc.ie

Web Links and Electronic Publications

Activities for Older People in Care Homes: A Handbook for Successful Activity Planning



When tasked with providing activities for older people in care homes, it can be difficult to know where to begin. What constitutes an activity? How can you make sure activities are as positive and person-centred as possible? What can you actually do? Written by an experienced activity coordinator, this handbook is an indispensable companion for others in this role.

The author provides useful background information on dementia, the importance of activities and how to get to know residents through life story work. She addresses important practical considerations such as how to assess a resident for suitable activities, activity planning, timetabling, budgeting and money-stretching, as well as more subtle issues such as how to enthuse residents and staff to join in and how to deal with resistance from colleagues. An A-Z of inventive ideas and step-by-step instructions for activities as wide-ranging as arts and crafts, cooking, exercise, gardening, meditation, music, reminiscence, themed days and trips out is also included.

Offering peer-to-peer advice and encouragement as well as a wealth of practical ideas and suggestions, this is essential reading for all those involved in activity planning for older people, including those with dementia, in care homes. http://www.jkp.com/catalogue/book/9781849054294

After School: Providing an Inspirational After School Programme of Activities for 4-12 Year Olds

ISBN 978-1-906004-28-6. Price: €25.00

This book and CD are for anyone who is interested in promoting the wellbeing, learning and development of children who spend any part of their time in after school services on a regular basis. The main focus of this publication is to enhance understanding of what children of this age need in after school settings and to support those delivering services to meet those needs through a high quality programme of activities.

"Edition 3 of Applied Social Care (Gill and Macmillan, 2013)

The 3rd edition of this key social care textbook is now available in bookshops and at:
http://www.gillmacmillan.ie/social-studies-uni/social-studies-uni/applied-social-care

The new edition contains an update on the social care professional development project and new chapters on therapeutic approaches to social care practice, child protection, health promotion and working with juvenile offenders."

Podcasts

Reading Social Work Blogs

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

How do I find them ?

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

How do I write my own blog ?

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

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

Audio & Video Podcasts

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

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

Audio: Motivational Interviewing

Mary Velasquez, Ph.D., Centennial Professor in Leadership for Community, Professional and Corporate Excellence and Director of the Health Behavior Research and Training Institute at the University of Texas at Austin has been involved in research that informed the recent changes to Motivational Interviewing. She talks about how she became involved with MI, , what has changed and and how people can experience MI in less than 15 minutes. Available at: http://socialworkpodcast.blogspot.ie/2013/09/MI3.html or via iTunes at https://itunes.apple.com/ie/podcast/the-social-work-podcast/id216662405

Audio: The Thesis Whisperer

Are you a PhD student? Thinking of writing a blog? Or just like or want to improve your writing? This is the podcast for you! Inger Mewburn is a Researcher, specialising in research education since 2006. Prior to this she lectured in architecture and worked in architecture offices for around a decade. She is currently the Director of Research Training at The Australian National University where she is responsible for co-ordinating, communicating and measuring all the centrally run research training activities and doing research on student experience to inform practice. Available at: http://www.podsocs.com/podcast/the-thesis-whisperer/

Podcasts

Audio: Working with young people who offend

Working with young people who offend and their families can be challenging. Jioji Ravulo talks in this podcast about his research and practice with marginalised youth and their families. He highlights a model that emphasises strengths, inclusion, community and collaboration. Available at: http://www.podsocs.com/podcast/working-with-young-people-who-offend/

Video: Let's Talk Mental Health

An educational video which could be used with clients, especially young people, around the topic of mental health and mental illness. This animated video presents practical information about the fundamentals and could be used as a talking point when a parent of carer is first diagnosed. Available at: http://www.youtube.com/watch?v=aNQBdIMM3mQ

Video: Psychotherapy

Victoria Lemle Beckner, Assistant Clinical Professor in the UCSF Department of Psychiatry, discusses the different approaches to psychotherapy and how research informs clinical practice to help patients achieve lasting improvement. Available at: http://www.uctv.tv/shows/The-Science-Art-of-Psychotherapy-Insiders-Guide-23797

Video: Lectures, Interviews and Podcasts

A vast array of material from the University of California – all for free. There are listings by subject area and a search function. Full list at: http://www.uctv.tv/humanities/

Audio: Educational Books for Children by the Author

Julia Cook writes stories for the child in each of us about social or emotional issues children experience but perhaps haven't words to describe. Children are able to relate to the pony or the tree, the butterfly or the balloon, who is the 'hero' of the story and experiencing distress. Ms. Cook will share excerpts from her newest books including addictive video games children play, cancer in children, and coping with peer pressure. Available at: http://www.thekimfoundation.org/html/notalone/archive.html

Videos: Referendum on the Abolition of the Seanad

On September 19, Constitution Project @ UCC hosted a public debate information event on the referendum on the proposed abolition of the Seanad, which was attended by almost 200 people. The event was chaired by broadcaster George Hook, and began with contextual information on the Seanad from three disciplinary perspectives. Fiona Buckley of the Department of Government at UCC gave a political science perspective; Dr Maria Cahill of the Faculty of Law at UCC spoke about the implications for constitutional law; and Professor John A Murphy, Emeritus Professor of History at UCC, gave a historical account of the Seanad. This was followed by the debate, where abolition of the Seanad was proposed by Simon Coveney TD, Minister for Agriculture, and Dr Eoin O'Malley of the School of Government at DCU. The motion was opposed by Senator Katherine Zappone and Dr Conor O'Mahony of the Faculty of Law at UCC. A substantial number of audience members made contributions from the floor. At the conclusion of the evening, a vote was taken on the motion: "That this House would support the abolition of the Seanad", and was defeated by a significant margin. http://constitutionproject.ie

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, electronic 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/ .

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