



# Cúram

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IRISH ASSOCIATION  
OF SOCIAL CARE  
WORKERS

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2001 2002 2003 2004  
2005 2006 2007  
2008 2009 2010

2011

Cautious Optimism?



Orchard  
Children's  
Services Ltd.

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### Membership Renewal

Some of you whose membership has or is about to expire will find membership renewal forms with this edition of CURAM. We appreciate that at this time of year and the budget cutback kicking in for lots of people money is scarcer than ever.

With that said, we believe that the €15.00 administrative fee to cover membership is a modest one and hope that you use the stamped addressed envelope provided to renew your membership.

Your continued support is appreciated.

## Editorial

Many social care workers may say 2011 cannot be worse than the previous year. That conclusion may well be based on a professional and personal view as the economic and budgetary situation bites deeply. Others may say, for the very same reasons, that 2011 augurs badly on both levels. They may disagree totally with the cover of this edition of CURAM where the term Cautious Optimism is used. After all, we do tend to look at things very often from our own work situation and our own perspective. Also, admittedly, cutbacks and embargoes and staff shortages are now a fact of life and you will find other issues noted elsewhere in these pages.

For the IASCW it will be a critical year but one not necessarily devoid of hope. The level of progress made on the development of Social Care Ireland has been excellent and the plan to formally launch it in mid 2011 is on target. It must again be remembered that the temporary executive of SCI all have other things to do and yet meetings were well attended and most deadlines met since the announcement in February in Athlone.

One of the many advantages of this umbrella body for IASCW, RMA and IASCE is that it meets a suggestion from CORU, the Health & Social Care Professionals Council that one, rather than three distinct organisations, might better focus on the groundwork around registration. The HETAC standards and progress on the review on non national qualifications are a further help in this area.

All well and good, one might say, but when are we going to be registered? As a group to be registered, social care workers, perhaps more than any of the other groups preparing for registration, are unique. How? Because they are a very large group with a wide range of varying experience and qualification. This factor cannot be ignored but the developments adverted to above cannot but help in moving this very slow, painstaking process along. *To this end a representative group from Social Care Ireland met Minister Mary Harney on January 17th last. This meeting was at our request and was specifically on the Registration issue. The minister indicated that the formation of Social Care Ireland was a significant step toward progressing the registration process. The outcome of this meeting was that 3 or 4 other applicant bodies will be registered before social care workers would come into the frame. The decision on which body then becomes next will rest with the Registration Council. It is now up to ourselves to work closely with the council in the next twelve to eighteen months to enhance and maximise whatever needs to be in place to gain the most favourable position for social care workers. We intend to pursue this issue rigorously.*

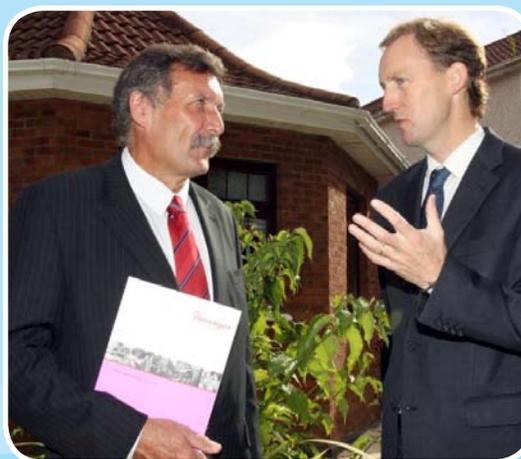
With a new government on the horizon we can hope that the many protestations in opposition to what the outgoing government did not do about deaths of children in care, aftercare, the referendum and the disability sector will turn into real progress in those two areas. The IASCW, and indeed Social Care Ireland will not be slow in reminding new ministers of the promises they made in opposition. Some hope then that commitments given in opposition will be honoured. Also we bear in mind the indicators from the outgoing government, Fine Gael and Labour that significant reductions in public service numbers will be a definite feature no matter who is in government.

As 2010 ended we wrote to the new HSE National Director of Children and Families Social Services wishing him well on his appointment shortly before Christmas. Gordon Jeyes faces a herculean task in attempting to wrestle with and make progress in an area that is notoriously complicated and fractured and where morale is low. Social care workers' experiences bear testament to that. Mr Jeyes has written to the IASCW following a request from us and a date for an initial meeting will soon be finalised. We believe we speak for all in the sector when we say he can be assured of our assistance, commitment and professionalism in moving toward the provision of a first class social care system. Such provision may appear merely aspirational in view of debacles in the past and the recent past. However, we need to balance our constructive criticism with a willingness to learn from the past, take the best from it and forge a structure that benefits those who are in receipt of the service social care workers and other professionals have the ability, capacity and enthusiasm to deliver.

Mr. Jeyes has agreed to open the Social Care Ireland annual conference in Athlone on March 9<sup>th</sup> next.

## *As social care workers know, good things do happen. In this respect two new developments deserve mention.*

Minister Barry Andrews officially opened a new residential centre for Home Again at Templeogue, Co Dublin in September 2010. This home replaces their centre at Blackrock. The new property cost the Society €1.1 million for the property alone and has cost a further €120,000 in renovation! Home Again, formerly known as Los Angeles Society, has run residential centres since 1965 in the South Dublin area. All of the properties are funded by donations from their supporters. Home Again have now reluctantly placed the old home at Blackrock for sale following a long drawn out planning process through which they hoped to develop the site to provide a new home and separate aftercare apartments, all of which was turned down by An Bord Pleanála. Once Blackrock is sold Home Again will be investing in establishing a new project. They are already researching areas where gaps in services can be identified, to ensure resources are effectively targeted at where they are most needed.



*John Molloy, Manager Home Again with Minister Andrews at the opening in Templeogue.*

The **second** very welcome service development is the opening of an 8.8 million child and adolescent mental health unit in Merlin Park, Galway. This 20 bed unit is a further step to address what many have called for in recent years around providing facilities for young people with mental health problems. Much adverse publicity has surrounded under eighteens spending time in adult mental hospitals because of lack of under age facilities. While the opening of the Galway unit will not cure all problems in this area it is a very welcome step. Our understanding is that another 20 bed unit is to open in 2011 in Cork. This will mean bed capacity reaching 50 which is yet only half the goal set in *A Vision for Change* in 2006. Total mental health spending fell from 6.7% in 2009 to 5.3% in 2010 and the outlook is anything but optimistic for the next four years. We must anticipate great benefits that will accrue from the opening of 40 new beds but equally we need to highlight that these two new excellent facilities only get us halfway toward a goal set over four years ago.

### *No Aftercare Legislation*

In all the financial turmoil and political uncertainty of last November one significant piece of information almost went unnoticed. On November 11th Minister Barry Andrews announced in the Dáil that aftercare provision would not form part of forthcoming legislation. His reason for this, in reply to a call for amendments by Kathleen Lynch (Labour) and Charles Flanagan / Denis Naughton (Fine Gael), was that the current law which provides for aftercare “should the need arise” was adequate. Presumably, by this the Minister was referring to the 1991 Child Care Act where the HSE “may” as opposed to “must” make provision for aftercare. Since the act’s implementation many advocates for a comprehensive aftercare provision have argued that this section of the act is discretionary and limiting.

Minister Andrew’s announcement leaves things as they are which means that young people leaving care at 18 are effectively on their own.

One hope however is that with the likely change of government shortly those opposition politicians whose cogent arguments could not sway the minister’s thinking will be translated into exactly what they called for – legislation for proper aftercare provision. Should Fine Gael and labour form the new government we would ask social care workers to quickly remind the opposition of their views as expressed in the dail on November 11th.

### *More Madness*

Just when one thought the levels of absurdity relating to child protection could not be added to a newspaper report of last October was headlined Giving child biscuit could be “grooming.”

To establish the veracity of the case we contacted the NI Ombudsman’s office and were assured that the newspaper article reflected the facts of the case.

The article referred to the Northern Ireland Ombudsman calling for an official apology for a school employee who was warned that by giving a pupil a biscuit she could be seen as “grooming” the child. In January 2008 the woman, a catering supervisor at St. Mary’s primary school, Brookborough, Co. Fermanagh was asked for a biscuit by a child. She agreed and asked a colleague to hand the biscuit to the pupil. The following day the woman, who is related to the child, was told by a senior teacher that under the Child Protection Act she could be seen as “grooming” the child. The woman had to attend three meetings. One of the meetings with the principal lasted over an hour and a fourth meeting was sought with the principal. By then the lady had left the school because she felt she had been “grilled.”

The Ombudsman noted that the lady should receive an apology from the Education & Library Board after enduring gossip and rumours over two years.

This case highlights the levels to which ordinary, humane, adult gestures can be seen by some as indicating something more sinister. For all who deal with children in a professional capacity such cases inspire no confidence and shows that we really have lost the plot.

## *“Go Outdoors”*

### *Guidance for Residential Workers*

Go Outdoors was published in June 2010 by SIRCC (Scottish Institute for Residential Child Care) and it is a timely guidance and good practice document devised for those who work with children in care in Scotland. It's a document which will have particular relevance for residential workers in Ireland as it deals with many of the everyday dilemmas that residential workers face in making choices to give the children they care for as wide and stimulating range of outdoor activities as possible. It promotes the right of children and young people in residential care to participate in everyday outdoor activities and is designed to help practitioners and managers to carry out their duty of care safely and responsibly. In doing so it promotes practice which accords with high professional standards and sound principles.

The introduction notes that “Learning to manage risk contributes to healthy physical, psychological and social development, as well as providing opportunities for learning and enjoyment. A risk averse and bureaucratic living environment undermines good outcomes for children.”

There are numerous quotes from the 2007 document *Playing It Safe* and reading some of them graphically illustrates the crazy thinking that can sometimes inhibit workers from doing anything. It would be naive to suggest that such thinking does not apply here in Ireland. This publication might be first step for Irish workers to address the many problems they face in this area and one hopes the document can and will be adapted to the Irish context.

## *“No Touch” Rules to be dropped*

The “biscuit” case referred to above relates to a school situation but its implications in a broader sense will not be lost on social care workers and where teacher is indicated in the following it will not be a problem for social care workers to identify with the sentiments.

Another interesting development, this time in the UK, saw the education secretary, Michael Gove, move toward abolishing the so called no touch rules in English schools. These rules discourage teachers from restraining or comforting children. He also added that he would give teachers the right to anonymity when faced with allegations from pupils, overcoming doubts within the Ministry of Justice.

He compared required knowledge by teachers for class discipline to reading the equivalent of *War and Peace* as the is about 500 pages of guidance on discipline and another 500 pages on bullying. He is quoted as saying “I don't believe you should be able to hit children but I do believe that teachers need to know they can physically restrain children, they can interpose themselves between two children that may be causing trouble, and they can remove them from the classroom. The important that teachers know they are in control, and this department and the justice department will back them.”

One feels like standing up and cheering at such a common sense attitude, openly articulated by a government minister as it relates to children in schools. The fact that he uses the word “control” is a welcome breath of fresh air. It goes some way toward counteracting the absurd neoliberal agenda of New Labour in the UK that, from 1997 to 2010 seemed to have lost itself in rights but forgot about responsibilities. Incoming ministers in our new government please note!

## *Children's Rights Referendum*

After the cabinet recently signed off on the wording for a constitutional amendment on children's rights there was speculation that the referendum might be held on the same day as the upcoming general election. Minister for Children, Barry Andrews, expressed the view that the necessary legislation could be introduced in the Dail before the government steps down and he saw no reason to prevent the referendum being put to the people on election day. It is now almost four years since the then Minister for Children, Brian Lenihan, set the wheels in motion to enshrine the rights of the child in the constitution by way of referendum.

Not everyone agrees with the suggestion of holding the referendum, were that possible, on the same day as the election. Mary O'Rourke, who chaired the all party committee which produced suggested wording, has always been of the view that the importance of this particular referendum is such that it deserves to be held separately. Minister Andrews pointed out recently that in 1992 there were a number of referenda issues put to the voters on the day of the general election and there was no confusion with what he called a “sophisticated electorate.”

There was general relief that at last the government had made a decision but not everyone was happy with the new suggested wording. Barnardos, as well as saying that holding the referendum on polling day seemed “rushed,” also said that, on an initial reading of the wording, it appeared that it differed substantially from the wording produced by the all party committee and really diluted the rights of children.

Also, the wording indicates that the state could not be sued if it failed to vindicate the rights of children economically or socially.

It's worth keeping in mind also that there is a view which suggests that if the law was properly applied there is no need for anything to be done with the constitution to vindicate the rights of children. Another view is that a referendum on children's rights being carried would dilute the “imprescriptible” rights of the family as laid down in the constitution.

All in all, it seems, there may well be a longer road to be travelled before this issue is finally resolved.

## ***Food for Thought for Social Care Workers & Educators***

*The article which follows is written in the context of social work teaching. However, readers may find that practically all of the ideas could apply to social care work and education. This article is an account of an original and imaginative project in which young people in care participate in the training of social workers. It is as moving as it is informative.*

*We are indebted to the author, Jeremy Miller and to the online journal, goodenoughcaring for their permission to reprint this article.*

### ***It's the New Thing !!***

*By Jeremy Millar*

*Jeremy Millar teaches at the School of Social Work at Robert Gordon University, Aberdeen. His research interests include Care Leavers, Participation, and Cultural Competence.*

Teaching social work now has to involve the perspectives and direct inputs from service user and carers (SCIE Annual Report 2003/2004). All well and good we might say until one takes a closer look at the complexities of the task. At the Robert Gordon University it is now over five years since we embarked on the road to including service users and carers in the delivery of our social work courses and it is an opportune time to take stock. My involvement resulted directly from my previous practice experience of working with care leavers and my conviction that any involvement by young people should go beyond the tokenistic. To this end our original recruitment strategy extended an invitation to all residential and support services for children and young people in the North East of Scotland. This resulted in an open meeting at the University facilitated by an established care leavers group; the Debate Project. Out of this initial meeting we recruited a core group of children and young people from a range of settings and covering an age range from 12 to 27.

The challenge of engaging with this diverse group of children and young people has proactively addressed issues relating to ensuring the fullest participation possible utilising the best practice guidance developed by SCIE (Wright et al 2005).

This developmental process highlighted a number of complex issues including;

- How can young people be equitably involved
- Who takes the lead in supporting user involvement
- The need for significant energy and resources to be put into the process
- How the School can avoid a tokenistic approach that is reactive to external deadlines
- How to promote a more sustainable engagement
- How young people can utilise their involvement to promote their personal development

The challenge called for an inclusive approach that acknowledged the diversity of experiences among 'looked after children and young people' in the north-east of Scotland. It also flagged up the need to address a cultural shift involving the School of Applied Social Studies in developing a 'whole system' approach (Wright et al 2005:12-13). The key elements of a whole system approach are:

**CULTURE:** Refers to the ethos of the organisation, one shared by all staff and service users, which demonstrates a commitment to participation.

**STRUCTURE:** Refers to the planning, development and resourcing of participation evident in the organisations infrastructures.

**PRACTICE:** Refers to the ways of working, facilitation of involvement and utilisation of the skills and knowledge that enables children and young people to become involved

**REVIEW:** Refers to monitoring and evaluation systems that contribute to the evidence of change brought about by the participation of children and young people.

These can be conceptualised fitting together as in a jigsaw puzzle offering a joined up approach with the focus shifting appropriately to reflect needs and priorities at any given time. It aims to avoid hierarchical structures which inhibit the fullest participation of minority groups.

The main objectives discussed at the outset was to develop a self sustaining group of children and young people who will be able to assist the School of Applied Social Studies in developing their effectiveness in the training of social work students. It was envisaged that this would be done through involvement in;

- Developing course materials
- Teaching inputs
- Selection of students
- Selection of staff
- Networking with other youth participation groups
- Contributing to the body of research in this developing field

This article offers a reflective account of the process and a sense of whether the original objectives have been met. Central to this is hearing the voices of the young people themselves;

*"Firstly I got involved with the Group because I felt it was important that people working in social work and social care had a real idea of what it was like to be a service user. I experienced lots of different things and felt that really the things I experienced something positive should come out of them somewhere along the lines".*

*"It feels really good to be involved with people who are already working with service users and people who plan too just because I think its important that they want to know what its like for people who have had first hand experience, to know that they are open to learning and to listening and to taking things on board and also its nice to think that all the things I have gone through, those experiences might and can make some difference to other people in my situation and also to how the students will work in future."*

I think it can make a difference because studying doesn't really give you any real life practical experience and if these students who are training if they have never experienced any of the things in the way of life that people who are service users have experienced then it can make it very difficult for them to understand what it is like so I think listening to real life experiences and learning things from people who have been there makes a difference because there is no way of having that first hand knowledge without experiencing it yourself or finding out from people who have experienced it".

The above statements demonstrate a desire to draw on personal experience in order to offer the students an insight into what was felt to be beneficial and what was not. The Group offered their insights to the first year intake of students through an exercise known as the 'ideal social worker' which is described in the next paragraph.

The Group members organised the random dividing up of the 60 students into groups. They then got the students to clear away the tables and chairs so that the exercise could take place on the floor with everyone at the same level. The exercise involved the students constructing a large piece of paper and then drawing around one of the students to leave an outline on the paper. Into the body of the figure would be written the desirable qualities of a social worker and out with the body, would be the undesirable characteristics. During the task the young person facilitating the group would be able to prompt and where appropriate share experiences. The discussion offered students the opportunity to share their experiences and motivations for coming into social work.

The students' comments on this exercise evidence the value for their individual learning;

*"Surprised me. Service users tend to prefer their social worker who is not 'textbook' – prefer a human."*

*"Was strange being told what to do from young people."*

*"This session has been brilliant and it has made an enormous impression on me."*

This session has now been run five times and the Group members have reflected on their experience and the following observations have been made;

Social workers need to be more open, less guarded about certain things. They should be caring, understanding, open minded. But often you do not find this in social workers. Some areas for concern were raised:

1. Life experience or age is an issue – it seems that there are now people leaving school and coming straight onto a social work degree, and group members questioned whether this would enable them to understand the issues involved
2. There was one of us in each small group of students – 'I tried asking them questions but they kept turning it round and asking me what I thought. I wanted to know what they thought!'
3. 'I went to shake hands with the students but one girl wouldn't shake my hand, she said she had a phobia about shaking hands. What kind of social worker is she going to be if she can't even shake hands?'
4. We divided the students into groups and some of them didn't want to go in the group we were putting them in, they were trying to cheat – so we made them stay in the right group, they should be able to manage without their friends and see what it's like'
5. We got them all to sit on the floor along with us but some of them didn't want to sit on the floor, they wanted to sit on chairs, higher up, looking down on us.

It clear that the young people were picking up on issues of power and status as well as concerns regarding the ability of people with less life experience to respond to their needs adequately. As the students progress through their training this early experience of direct contact with service users is often commented on as being pivotal to their appreciation of the need to address core values and acknowledge the relational as opposed to the functionary aspect of the social work task.

The Group members have been instrumental in teaching inputs across all courses and in a variety of forms ranging from direct teaching on children's rights through to role playing in case study. Group members have, in addition, assisted in assessing suitability of applicants to the social work course and the readiness for practice of students about to go out on placement. It is clear from the following comments the value that they place on their teaching;

*"It feels ace teaching students, its amazing like I said I don't work its the only work I do, this and go to meetings....I love being in the room with other students cos you feel like its worthwhile, everything you're doing is worthwhile. That's why I joined the group, we haven't had any bad feedback at all its all been good, which just proves its a good thing and makes it really enjoyable especially. It feels ace teaching students just because you know you are helping make a difference"*.

*"Erm the teaching, I like the teaching. I think it's a very good thing to do, to teach students, and I think we should do more of it because I think they are learning better from us from what they are of other people"*.

*"It feels funny teaching students because I am only 14 and like it feels weird because they are way older than me. It feels funny to teach them but apart from that it's good"*.

The original goal of the project was to offer the young people the chance to gain accreditation, along the lines of SVQ/ NVQ for their involvement leading to an improvement in their own educational prospects. We looked at Youth Achievement Awards but found that the time commitment to support the candidates exceeded what was on offer from the School. To get around this we made application to the Big Lottery Fund for the cost of a development worker. Unfortunately we were not successful and our aspirations for investing in the Group membership have been curtailed. I am acutely aware that whilst

the young people are generous in giving of their time and enthusiasm for little more than an Asda token to the value of £20 we are still in an exploitative relationship with them. The limited funding that we have sourced to enable social activities, attendance at conferences and the purchase of teaching aids has helped promote the Group identity but has also raised expectations that we struggle to meet. Working with young people is a joy due the enthusiasm and commitment but it also present difficulties when working within bureaucratic environments that move slowly and cautiously.

The acceptance of the young people within the University environment has been wonderful to see and a credit to staff members from the reception through to the Head of School. In terms of demystifying higher education and offering the possibility for the young people of educational advancement the experience has been invaluable. I witness the pleasure that they get from saying to carers and staff that they teach at the University. I am also struck on occasion by the lack of belief in the adults who hear their story.

The culture within the School has most definitely changed for the better with the majority of teaching staff welcoming the involvement of the Group members and progressively involving them in more activities. It is also striking that staff have stepped up to support the young people's involvement in more practical aspects. There is still, however a considerable amount of time spent on supporting young people to be up and ready at the crack of dawn to be uplifted and driven off to conferences in the south. Planning is everything but ensuring that mobiles are charged, clothes are looked out and some crisis hasn't overtaken the young person is beyond even my organisational control.

In terms of truly embedding the involvement of the young people in the life of the University I feel that we are at a critical point. The momentum of the original membership is dissipating with people moving away, growing into new phases of their lives and struggling with the challenges that life throws up. Recruitment has been difficult to sustain in an equitable manner through open recruitment events and we have fallen back on word of mouth introductions. We don't have the funding to offer new members the sort of induction opportunities the core group experienced and we have not progressed in terms of offering the opportunities that we hoped for in terms of personal development. Many of the big ideas to produce a model of peer support and induction into the role have been lost along with even grander aspirations to extend the service beyond the walls of the University.

Looking at the research into others' experience of involving service users (Robson et al 2003) similarities with our project are described including a perception that sometimes it is about image rather than substance, the right thing to be doing but without the attendant shift of culture. There is also a question as whether service users are involved in decision making within the organisation and the direction of service development. I could see this element as being a considerable challenge for the University.

More recently Cowden and Singh (2007) looked at service user involvement in health and social care and identified the dominance of managerial agendas in which service users are involved as 'consultants' with a narrow remit to progress the more effective targeting of scarce resources rather than offer a critical insight into how existing services might be reformed to truly address service users needs. This can be construed as a continuation of a disempowering tokenistic power relationship disguised under the new umbrella of service user and carer involvement. How we support service users to be involved as I stated before is complex and asks questions regarding their status as activists rather than puppets.

In teaching social work we should endeavour to preserve and enhance the political dimension of the task by entering into true partnerships with service users and carers to question and dispute the new managerial approach and consumerist role of service users that relegates their input to one of tinkering within the existing oppressive structures. Tangible evidence of parity would be through a financial recognition on a par with that of visiting consultants and professionals including the payment of taxis etc to facilitate attendance. There could also be a lot more access provided to University facilities such as the sports and library facilities which would enhance the social inclusion of service users and carers and support their personal development.

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### Your View

**There must be some area of the social care scene in Ireland today about which you would wish to comment. While we have a number of articles, reviews etc. in this edition from those directly involved in social care we could do with many more. At a time of unprecedented economic, social and political change those who work in social care are not getting away unscathed. There are good news stories you must be aware of as well as the opposite. Let us have your view. Send your views, comments, articles for consideration to [iascw@hotmail.com](mailto:iascw@hotmail.com) or [nh99@eircom.net](mailto:nh99@eircom.net).**

## A “Ryan Report” for Northern Ireland?

In mid December a UTV Insight programme “The Resurrection of Brendan Smyth” looked at the broken lives left in the wake of abuse perpetrated by the late Father Brendan Smyth. Allegations of a high level cover up were made. The programme heard a number of Brendan Smyth’s victims took their own lives as a result of the abuse.

Hours before the programme’s screening the Stormont Executive announced it was to hold an inquiry into historic institutional abuse in Northern Ireland. In the wake of the Ryan report here it was inevitable that the continued call by victims of abuse in the North would eventually be addressed. However, it will take until July before the remit of the inquiry will be known. Civil servants and other professionals will liaise with all departments in Stormont to determine the ultimate remit of the inquiry and it will be interesting to see just how this will all pan out.

Comparisons will naturally be drawn with what happened here over the ten years that led to the eventual publication of the Ryan Report in May 2009 and the devastating fallout from it. Peter Robinson, First Minister of the Executive, said that he did not envisage an inquiry on the scale of the Bloody Sunday inquiry but that there is need to get the process right. This hints that it may well be a long, expensive process if the Bloody Sunday inquiry is the only comparison being looked at. Hopefully that will not be the case as the Bloody Sunday Inquiry took twelve years to complete and cost in the region of 200 million pounds.

As the news was announced at least one politician in the North, Conall McDevitt of the SDLP called for an apology. He also said that the issues around redress and meeting of specific survivors’ needs such as counselling, support and advice needed to be taken on board.

Some of the religious orders that came under scrutiny in the Ryan Report also ran residential institutions in Northern Ireland.

## *Social Care Workers at Professional & Promotional Disadvantage*

At the beginning of 2010, after much searching and questioning, the IASCW discovered that a confidential draft report on a *Strategic Review of the Delivery and Management of Children & Family Services* commissioned by the HSE and prepared by PA Consultancy had been presented to the HSE on October 1st 2009. In fact this particular document has three titles on the covering page. As well as the one in italics above there is *Inspiring Confidence in Children and Family Services* and if that were not enough there is added *Putting children first and meaning it*. On making further enquiries it appeared that many social care workers in the country considered the report as confidential until it emerged that a number of pilot schemes are up and running in different parts of the country. As late as December 2010 it appears that one hand of the HSE does not know what the other is doing.

Perhaps of more importance for social care workers is one of the recommendations around options on the reconfiguring of what the report calls an “Integrated PCCC Model” (pages 29-36). In particular, and this where the concern of Social Care Ireland (with IASCW a constituent part) comes in. On pages 30 and 31 of the reconfiguring the suggested model bars social care workers from reaching the position of Manager – Children’s Welfare and Manager – Children in Care. The recommendation is that these positions be at Principal Social Work level. The implication is obvious for social care workers in essentially indicating that, whatever their qualification and / or experience they will not be promoted to this level and the highest they can go is a position below that. Hardly an inspiring concept and the more cynical among us might say “what else is new?”

The IASCW wrote to the consultants seeking an answer as to why the association was not consulted during the process and with a core question around the above issue. We asked that PA Consultancy “might give some reasons for this conclusion being arrived at when for example social care workers, trained and highly experienced, now work in these two areas. We especially would refer to Manager – Children in Care and point to the fact that very few social workers currently work as managers of children in care.” The response was predictable, concluding that PA Consultancy was not in a position to comment on the report.

We had, fortunately, more success from our correspondence with IMPACT and the union gives an assurance that the HSE has indicated that it would revert to the union with comprehensive proposals on Children and Family Services relative to this report and their proposals are awaited. We (IASCW) have forwarded correspondence to Phil Garland, HSE Assistant National Director – Child and Family services. We will keep members updated on this important issue.

## *State fails to Ratify Disability Treaty*

Ireland is not one of the EU Member states that have ratified the UN convention on the Rights of Persons with Disabilities. The convention commits countries to eliminating legislation, policies, customs and practice which discriminate against those with disabilities. It furthermore commits countries to introducing legal rights to education, healthcare and work opportunities.

While Ireland signed the convention in 2007 it has delayed ratification because certain aspects of domestic legislation need to be amended to comply with ratification. The Dept of Community, Equality and Gaeltacht Affairs says it is the government’s intention to ratify the treaty as quickly as possible.

# *Tracing and Tracking of Children Subject to a Special Care Application - 2010 Study*

*By Grainne McGill (Senior Manager HSE Dublin North East)*

## *What is the study's purpose?*

The purpose of the study was to provide an overview of the applications for admission to special care made by Health Service Executive (HSE) in 2007 and to trace and track outcomes for the children who were subject of those applications up to November 2009. The Children Acts Advisory Board (CAAB) commissioned the study and it was undertaken by Mark Brierley of Social Information Systems (SIS). It was guided by a steering group and was independently peer reviewed. The full report and briefing note can be found on [www.caab.ie](http://www.caab.ie)

## *How was it undertaken?*

The study involved scrutiny of anonymised special care applications and their supporting documents, interviews with social workers, children, parents/carers, staff from the special care units, guardians ad litem and solicitors.

## *Applications, Admissions and Outcomes*

In 2007, there were 70 applications for special care in Ireland, for 61 children. Of the applications 46% (n=32) led to an admission to special care, 41% (n=29) were refused admission, and 13% (n=9) were withdrawn. By November 2009, 46% of the individuals (n=27 out of 59) who had been subject to one or more applications in 2007 had overall risk factors that were perceived by social workers to have improved, 19% (n=11) had mixed fortunes (the perception being that some risks improved, some stayed the same or worsened), 14% (n=8) had the same level of overall risk, and 22% (n=13) had worsened.

For both those who were admitted to special care and those whose application was withdrawn, 75% had overall risk factors that improved or had mixed fortunes (n= 21 out of 28 for those admitted, six out of eight for those withdrawn). While only 48% of those who were not admitted had improved or mixed fortunes (n=11 out of 23) and 30% of this same group had risk factors that actually worsened (n=7).

## *Views on the Impact of Special Care*

Of those children admitted to special care in 2007, social workers felt that special care had a positive effect for 54% (n=15 out of 28), with it providing a place of safety only for another 21% (n=6). For 18% of the children (n=5) special care was perceived by social workers to have had a negative effect. Those who had been admitted to Gleann Alainn at some stage of their life had a higher likelihood of overall risk factors that improved or had mixed fortunes than those admitted to Ballydowd, Coovagh House, or not admitted at all. The children who were interviewed who had experienced both Gleann Alainn and Ballydowd (n=3) were also more positive about Gleann Alainn.

Some 42% of social work interviewees (n=25 out of 59) felt that special care was an effective model and 29% (n=17) felt that it was reasonably effective. Nevertheless, 24% felt it needed reshaping significantly (n=8) or was totally ineffective (n=6). Three had mixed views.

## *Variations*

**GENDER VARIATIONS:** Special care appears to cater more for the needs of females than the needs of males. Females were more likely to be the subject of applications (59%, n=41), and their applications were also more likely to lead to an admission (61% [n=25] admitted compared to 24% [n=7] of males).

**AGE VARIATIONS:** Younger children were more likely to be admitted to special care than older children and were also more likely to experience improvements in overall risk factors. Some 33% of those aged 16–17 had risk factors that actually worsened (n=4 out of 12). Ethnicity: some 74% of the applications (n=52) were for children whose ethnicity was White Irish and 14% were Irish Travellers (n=10); 40% of Irish Travellers were admitted to special care (n=4) compared to 48% (n=25) of those whose ethnicity was White Irish. 63% of the Irish Travellers had overall risk factors that worsened or stayed the same (n=5 out of 8) compared to 36% for White Irish (n=16 out of 44).

**HSE AREA MAKING THE APPLICATION:** The HSE South area had the highest percentage of applications not admitted (57%, n=8 out of 14). There appears to be two reasons for this; the children for these applications had never experienced anything more intensive than a mainstream residential or community/family placement and applications from the HSE South area were less likely to have an onward placement secured at the point of the application.

**YOUTH HOMELESSNESS:** Only 38% of the applications for children at risk from youth homelessness were admitted to special care (n=5 out of 13). By November 2009, of the 16 individuals who had either been at risk from youth homelessness at the point of the application or who had acquired that risk factor in the intervening period, 56% (n=9) had overall risk factors that worsened or were a new feature. Twelve experienced homelessness after the application. This suggests that the needs of children who are at acute risk who have experienced homelessness are not being addressed adequately.

## *Other Areas Examined*

The research also examined the placement type that the children had at the time of the application to special care in 2007 and the types/numbers of previous placements. Furthermore the research explored the discharge from special care and if

the onward placement agreed at the time of the application was the actual onward placement that the children moved on to and how in the eyes of the social workers the children dealt with leaving the structure of special care. Finally the research explored educational, offending and health related matters for the children and the overall application process of placing children in special care.

### *Launch of the Report*

On 1st October 2010, the Minister for Children and Youth Affairs, Barry Andrews, T.D. launched this research on behalf of the CAAB with guest speakers Mary Doyle (Director General, Office of the Minister for Children and Youth Affairs), Norah Gibbons (Director of Advocacy and Central Services, Barnardos) and Aidan Waterstone (National Specialist for Alternative Care, HSE), with a presentation from Mark Brierley and Gráinne McGill (Advisory Officer, CAAB). 'Speaking at the launch, Minister Andrews noted that the report contained both positive and negative findings, and stressed that any criticism should be taken on board and used to drive change and improve the levels of service to children.' Press Statement, 1st October 2010, OMCYA.

### *Health, Information and Quality Authority*

The Health, Information and Quality Authority published a National Overview Report of Special Care Services Provided by the HSE on 15th December 2010 which included the following recommendation: 'The HSE should implement the recommendations of the Children Acts Advisory Board report, Tracing and Tracking of Children Subject to a Special Care Application 2010, within reasonable timeframes.'

### *What are the recommendations?*

The recommendations cover national policy, interagency working, processes, monitoring and research.

#### **RECOMMENDATIONS FOR THE HSE AT NATIONAL LEVEL AND POLICY MAKERS**

1. The HSE and policy makers should review whether variations in patterns of applications, admissions and outcomes between males and females are acceptable and in the best interests of the children. If this is not the case, the implications in terms of the configuration of special care provision and guidance to staff will need to be considered.
2. The HSE and policy makers should review whether the current low levels of admission to special care and poor outcomes for children aged 16–17 (who were subject to a special care application) are acceptable and in the best interests of the children, or whether service reconfiguration in the HSE and in partner agencies may be required to better meet the needs of this group.
3. The HSE and policy makers should review whether the current low levels of admission and poor outcomes for children at risk of youth homelessness (who were the subject of a special care application) are acceptable and in the best interests of the children, or whether special care and/or other HSE services need to be reconfigured to better address and prioritise the needs of this group of children.
4. The HSE should consider whether low levels of admission and poorer outcomes for Irish Travellers are acceptable and in the best interests of the children, and whether this has any implications in terms of training for social work staff and/or reconfiguration/accessibility of Traveller services.
5. The HSE should ensure that admissions and discharges from and between special care units and high support units are better co-ordinated. This might be achieved through centralised national structures and/or processes. In addition, with the imminent closure of Ballydowd, the HSE should consider opportunities to increase the collocation and joint management of special care units and high support units.
6. The HSE should consider developing increased consistency in the models of special care offered by the special care units. Each unit should have the same access to psychiatric and psychological support (as required by the needs of the child).
7. The HSE should consider if there should be a separate special care facility for younger children.
8. The OMYCA should take into account the findings in this report related to the length of time children spend in special care when developing future policy for special care. The court, HSE and guardians ad litem should also be mindful of these findings when considering the best interests of the child.

#### **Recommendations to Support Inter-agency Working**

9. Where a child is deemed to be at risk from specific, known adults, protocols need to be developed between the HSE and An Garda Síochána on actions to be taken, information sharing, escalation of concerns, and processes to monitor the effectiveness of the above.
10. There are opportunities to increase the integrated assessment of children's needs:
  - a) *The OMCYA, HSE and Department of Justice, Equality and Law Reform should consider whether any measures should be put in place to increase the integrated assessment of risks and needs (offending and child protection/welfare) for children in care who offend.*
  - b) *The OMCYA, HSE and Department of Education and Science and education agencies (e.g. the National Educational Welfare Board, the National Council for Special Education, the National Educational Psychological Service), need to consider whether levels of poor school attendance for children who become the subject of a special care application are acceptable and in the best interests of the children, and whether this should have any implications in terms of future policies and monitoring arrangements.*

There may be scope for:

- *improved co-ordination and delivery of holistic assessments and service responses between social work and education agencies;*

- *the HSE to routinely monitor how many children in its care and protection systems have problems with school non-attendance every year and share this information with the OMCYA and the relevant education agencies.*

This issue should be considered in the ongoing work between the HSE and the National Educational Welfare Board to develop joint working protocols.

11. The OMCYA, HSE and Department of Justice, Equality and Law Reform and Courts Service should consider if any measures should be put in place to speed up the administration of justice for children in care who offend, to benefit the holistic welfare of the child.

#### Processes

12. Within practice, social work professionals need to be mindful of whether and in what circumstances they respond differently to the same types of risk-taking behaviour shown by females and males, particularly in relation to sexual risks and risks of involvement in the criminal justice system.
13. The guidance for special care should be amended to state that where a child has had fewer than five previous care placements, they are unlikely to be admitted to special care, except in cases of emergency, on the grounds that not all options have been exhausted.
14. Discharge from special care:
  - a) *The HSE should refresh understanding of its staff, particular at senior level and within local admission and discharge committees, of the importance of securing an onward placement when special care application is made.*
  - b) *Local admissions and discharge committees should support and prioritise children who are the subject of special care applications in allocating placements.*
  - c) *The HSE should take action to ensure that all relevant staff are briefed and trained in the recently published Special Care Discharge Criteria (CAAB 2010).*

#### Recommendations for Monitoring and Research

15. The HSE should report annually on special care and the operations of the NSCADC, including a statement of the NSCADC's terms of reference and criteria, its membership, the number of applications it considered, the outcomes of the applications, and the demographic profile of the applications. Given the findings in this research, it may be useful to report:
  - a) *the pattern of applications and admissions by gender;*
  - b) *the pattern of applications and admissions by age;*
  - c) *the pattern of applications and admissions by ethnicity;*
  - d) *the pattern of applications and admissions where the application suggests that the child is at risk from youth homelessness;*
  - e) *the pattern of applications and admissions by learning disability and by whether the child has had chronic school non-attendance during the previous 12 months;*
  - f) *the pattern of applications and admissions of children with ADHD;*
  - g) *for all children admitted to special care in a year, the total time that such children have spent in special care in the past or in custody.*
16. The application form for special care should be amended:
  - a) *to prompt the applicant to state whether the child has previously experienced homelessness, is regarded as being at risk of youth homelessness, and any actions taken to reduce this risk;*
  - b) *so that where risks identified relate to alcohol and substance misuse the applicant must specify what substances are involved and what actions are being taken, or have been taken, to manage the harm from this abuse;*
  - c) *to ensure that, where a child subject to a special care application is deemed to be at risk from specific, known adults, information is recorded on any actions taken or planned against that adult by the social work department;*
  - d) *to ensure that, where a child has previously had contact with psychiatric services, it is clear whether they engaged with those services and whether they received an assessment only or went on to receive service interventions;*
  - e) *to establish whether a guardian ad litem is already appointed for the child, and, if so, by what court and when;*
  - f) *to ensure that it is clear whether the planned onward placement has been secured or not.*
17. Future research into special care outcomes should identify in detail:
  - a) *the subsequent placements of children, in particular the number of children who go home at any stage, the range of supports offered if they go home, and the effectiveness of those supports;*
  - b) *the number of children who have accessed psychiatric services prior to the application, the range of supports offered both before and since the application, any issues with regards to accessing them, and the effectiveness of those supports;*
  - c) *processes for accessing education supports for children subject to a special care application and the effectiveness of those supports.*
18. Further research should be conducted into whether the requirement to hold a family welfare conference should be a component part of the application process for special care.
19. Further research should be conducted into future cohorts of children who were subject to special care applications, using findings in this current report as a comparative baseline.

## *Silence: A Bully's Best Friend*

*By Sheila Wayman*

A boy of 16 described his bullying as 'the breaking down of a person'. But how can parents deal with bullying claims without making the problem worse? LAUREN DWYER was such a bright, confident child, her teacher recommended that she skip the infant classes in primary school and go straight from Montessori into first class when she turned five. Otherwise, the teacher suggested, she might be bored. It proved to be a big mistake. Looking back, Lauren believes it was the catalyst for years of bullying which followed. "I was a year younger, I wasn't used to the whole system and I stuck out like a sore thumb." She was parachuted into a class of girls who had been together for a couple of years and encountered four or five who picked on her.

"Because I was always a confident child, I had my head above the parapet and I stuck up for myself, which made things worse." She saw other girls targeted too, some of whom were so desperate to become friends with their tormentors that they would "join in on the picking" once they were accepted into the core group. There was no physical bullying; it was name calling, exclusion, pranks, hiding possessions and "snide comments if you answered a question in class". Every day it was something. She remembers her third class teacher saying she had "schoolitis" because she kept going home sick. "I didn't want to be there anymore."

She had loved learning as a younger child but the bullying changed that. "If I was seen to know the answer to something, I got so much grief, I said, 'Okay I don't want to know the answers to things anymore'." A couple of other girls who were bullied told their parents but, apart from the ringleaders being warned, nothing else seemed to be done. "It was always found out who told and it made their lives even worse," Lauren recalls. "I always felt that telling was not an option." She had a very good relationship with her parents and she knew that if she told them they would be up to the school straight away, doing whatever they could. "I had seen that was not going to work."

After sixth class, Lauren wanted to get away from those girls, so she opted for a mixed secondary school in Dublin where few, if any, from her school would go. However, many of the first years had come from another school together, so she was going in not knowing anybody again and, of course, was still at least a year younger than her classmates. It was not long before one of the girls said something that hurt Lauren's feelings and she instantly thought, "This is it starting again". She went home distraught to her mother, who had never seen her like that. "I was thinking I can't take another six years of this." When Lauren went in the next morning, unaware that her mother had contacted the school, she was called to the year-head's office. "I walk in and isn't the girl sitting there with her face like thunder." The teacher said he had heard there was a problem between the two of them . . . She has no other memory of the conversation except when they left the room, the girl turned to her and said: "You're a rat and you're dead." "She told everyone and because everyone knew her and nobody knew me, they took her side," says Lauren. "From that time on, I was not to be trusted or to be hung out with. So it did all start again."

Exclusion and verbal slugging made her increasingly anxious and led her into depression. "There was a group of girls I hung out with and, I know this sounds awful, but it was because it was better than being on your own." One incident in second year, when they were on a school trip to Barcelona, is seared into her memory. "I kissed a boy there, my first time to do that. The next day all the girls were saying, 'Oh, you kissed a boy; we told him to do that, he is not really interested in you'."

"When I got home I had a bit of a mental breakdown because I could not bear going back and giving them more ammunition. I was so confused. I couldn't eat, I couldn't sleep, I couldn't function." She was just 14 and her parents took her to the doctor. "They did not know what was going on as it was so out of character for me." She was still terrified of them finding out. Being put on medication made Lauren think perhaps there was something wrong with her. "All I needed was somebody to talk to, to get to the bottom of it." But having spent so long not talking about it, she did not know how to start. After her Junior Cert, she bluffed her way out of that school, telling her parents she wanted to go to the Institute of Education to concentrate on studying for the Leaving. The move finally brought the cycle of bullying to an end.

Looking back, Lauren (23), who has just graduated in business studies, sees how her fear that she might be bullied again at secondary school "was like a self-fulfilling prophecy". Nothing would have happened, she suggests, if she had not reacted the way she did to that girl's initial remark – "it was probably just a normal kind of comment, I can't even remember what it was" – but she can also see how the well-meaning teacher handled it all wrong.

Schools have come a long way in the past decade in developing the now mandatory anti-bullying policies and raising awareness of the issue among teachers, students and parents. But victims still face that dilemma of if they tell, will it make life worse?

The director of the Anti-Bullying Centre in Trinity College Dublin, Dr Mona O'Moore, gets calls from parents whose teenagers are being bullied and who will not approach the school because their child is adamant that it will aggravate matters. "You would wonder what sort of strategies schools have that youngsters can feel so absolutely terrified," she comments. "Is it that certain schools are still so clumsy in their tactics? That is kind of scary."

When somebody is being bullied, their fundamental fear is if I report this, am I going to be better or worse off – and that is a huge question, says Dr Brendan Byrne, a counsellor at Coolmine Community School in Dublin. It helps if schools have a peer-mentoring scheme in place as that creates another layer where children who are being bullied can go to safely, he explains. A number of "ports of call", such as year head, tutor, chaplain and counsellor, are needed and the hope is that a student will trust one of those enough to confide in them.

"The key to it is to get them to go to talk openly to somebody who they are comfortable with; they may not want anything done initially but, if the trust is there, the adult will be able to bring them to the next step. The one thing we have learnt about bullying is that if it is not reported, it does not get better." Children are not able to deal with it on their own. "They miss school

more often; school performance begins to go down and self-esteem is hammered to the point where their whole lives are affected."

Paradoxically, a happy home life may make it more difficult for a child to tell a parent. "If you have a close, loving relationship the last thing you want to bring home is that you are being bullied in school," says Byrne. "It is a protective thing on the part of the student to the parent." One of the best definitions of bullying he has heard was from a boy of 16 who described it as "the breaking down of a person". "That is what it eventually does," says Byrne, "it is gradual, it is insidious and it builds, and where is the breaking point? That is the real worry."

There is no better way to reduce bullying than through a whole-school approach, says O'Moore, who has written a book for parents and teachers, entitled *Understanding School Bullying*, which was published recently. The most important thing is getting the school ethos right and then having the mechanisms for reporting, investigating and dealing with incidents. The approach can be restorative rather than punitive, she explains, and bullies as well as their victims need ongoing care.

The Cool Schools programme was an anti-bullying initiative that was devised by the former North Eastern Health Board and implemented in 50-plus secondary schools before being rolled out by the Department of Education as a pilot project in Dublin schools between 2006 and 2009. In evaluation studies with students who had taken part in the programme, 60 per cent reported that they would tell a teacher about bullying – a significant improvement on previous research, in 1997, which showed that just 20 per cent would tell a teacher. After the pilot project, elements of the programme were incorporated into the Social, Personal and Health Education (SPHE) that is compulsory for all students in the junior cycle of post-primary schools. Typically, schools run an Anti-Bullying Week during which pupils learn about the characteristics and types of bullying behaviour – including cyber, homophobic and racist – and how to act positively as a bystander and how to ask for help.

While generally parents are more aware of bullying, they may not be as well informed as they think they are, suggests consultant child and adolescent psychiatrist Dr Maria Lawlor. "Very well-educated, intelligent people sometimes fall apart when faced with a distressed child coming home and they need to see the school about it. It is a difficult thing to manage." She recommends that parents praise children for telling them and then try to persuade them to report the incident themselves to a person designated in the school's anti-bullying policy. "If there are tears and they say they can't do that, then ask would they like you to go in. And if they say 'no, no, no', you need to think about what you are going to do." She stresses that it is a mistake to let it go. "If you deal with it quickly and do it well, the chances are it is less likely to happen again." Silence, as O'Moore writes in her book, "is the bully's best friend".

Lauren, who is a member of the youth advisory panel for Headstrong, a national advocacy organisation for youth mental health, is well aware that bullying is a significant factor in suicide. "I would have been miserable if I didn't have the parents I have. When I went home, it was sanctuary." She can't imagine what it would be like to go through the sort of bullying she experienced without it. "I definitely don't think I would be here if I didn't have that: it was that bad and it was that long."

*Understanding School Bullying* by Mona O'Moore is published by Veritas, €13.99

For more information on bullying, see [abc.tcd.ie](http://abc.tcd.ie)

### WHEN YOUR CHILD IS THE BULLY

PARENTS TEND to be very defensive when a school contacts them to say their child has been involved in bullying, but that attitude is not helpful and does your child no favours. "It is better to listen and see what is going on," says consultant psychiatrist Dr Maria Lawlor. Generally, your child will deny it, protesting that "I was only messing". "Try to establish the facts of the situation, what exactly happened, and then discuss it with your kid in the calmest tone of voice you can muster," she advises. "Tell them that you are disappointed that they behaved like that because they are so good in other ways, and ask is there something upsetting them?" They need to be told the behaviour has to stop or there will be serious consequences. Some children play out their own unhappiness in aggression towards others, while some bullies come from home situations where family members are shouted down or abused.

However, adds Lawlor, "a lot of very nice kids with very nice homes behave rather badly". A child's aggression in school could be due to very transient situations in the home, explains Dr Mona O'Moore of the Anti-Bullying Centre in Trinity College. "Maybe they feel overlooked; maybe parents are spending too much time with another child, or somebody's sick, or there has been a bereavement." A lot of bullying is motivated by jealousy, she adds. "Bullies may go to people who are superior to them in order to bring them down. Girls, for example, may be jealous of the very attractive girl who is going out with a fella."

#### **SIGNS TO LOOK OUT FOR:**

- Erratic mood swings.
- Reluctance to go to school and won't say why.
- Returning home with torn clothes or missing possessions.
- Looking for extra money when there is no apparent need.
- Disimprovement in school performance.
- Not wanting to go out with friends.
- Loss of appetite.
- Anxiety and sleep disorders.
- Frequent headaches and stomach aches.
- Sudden mood changes after being on computer or reading text messages.

**Acknowledgements to The Irish Times for permission to reprint this article which first appeared in the paper's Health Supplement on November 30th last.**

# *Lessons to Learn - A Review of BBC Panorama Documentary 'Baby P: In His Mother's Words'*

*Screened December 13th, 2010*

*By Denise Lyons*

*Social Care Lecturer Institute of Technology Blanchardstown*

Social care work is about making informed decisions based on policy, experience and training, but all workers accept that at times they will make the wrong decision. Workers are also trained to understand that through reflection and good supervision, these mistakes help them evolve into competent practitioners. However, wrong decisions made by caring professionals can have devastating consequences. Peter Connelly's death was attributed to the wrong decisions made by professionals responsible for his welfare; the GP, the legal system, paediatricians and child protection professionals. On December 13th 2010 the BBC's current affairs programme 'Panorama' presented a report based on a previously unreleased video interview with Tracey Connelly, four months prior to the death of her son Peter. The documentary explores the possibility that this interview could have forewarned those involved of the terrible events that were to follow.

The BBC, when advertising the Panorama Special, described the video interview as exposing vital clues to the dangers that lurked in the Connelly household, evidence that could have alerted professionals in time to save Peter's life. A daunting thought for any person working with at risk children. The one hour interview was conducted in March 2007 and was facilitated by Senior team Manager Sue Gilmore from Haringey Children's Services, the person responsible for the social workers allocated to Peter's case. At the time of the interview Tracey Connelly was under investigation by social services in suspicion of neglect and non-accidental harm of Peter. The interview was not part of child protection procedures, but Sue Gilmore's assignment for a Diploma in Solution Focused Practice.

The filmed interview showed a chatty Tracey who spoke about a candlelit dinner with a male friend called Steven and how she reacted to a compliment she received from him. She also shared her wish to be his girlfriend, and of her desire to move to another area where she could be a proper Mum to her children. Although both women sat with their arms crossed, the conversation appeared friendly and open. This was reflected in Sue's comments to Tracey "I'm really, really impressed with the way you have been, first of all, completely open, completely honest" (Panorama, 2010). In the interview with Sue, Tracey described how she kept a record of every accidental cut, bruise, or bang for the social workers "so she could explain what was going on". According to Tracey all injuries to Peter were accidental or due to infection or illness. Peter's autopsy recorded approximately fifty injuries covering his body, a broken spine and ribs, and bite marks on his head. Tracey also lied about her relationship with Steven Baker, but these details were never checked. Tracey stated that she did not want to have social workers interfering in her family's life anymore, and Sue agreed that this was a straightforward thing to want, and again thanked Tracey for being open and honest.

According to the Local Safeguarding Children Board (LSCB) Haringey (2009), there was six phases of inter-agency involvement during the eight months Peter was on the At Risk register, the last phase describing the final two weeks of his life. The report highlighted 49 'lessons to be learned', which according to the LSCB if used as an example, may reduce the likelihood of this ever occurring again. A core mistake highlighted by the LSCB Report was the "danger of an over-identification with the service user in a wish to support and protect the child's place in the family" (2009: 14). This view was supported by Professor Harriet Ward from the Centre for Child and family Research, Loughborough University, who stated that professionals in child protection make life changing decisions, and that the majority of decisions were made on the assumption that it is better to keep families together. In the Panorama documentary Ward stated that child protection professionals need to be tougher on parents and make specific demands for changing inappropriate or potentially abusive behavior. Peter Connelly was eight months on the At Risk register and according to the documentary, few demands were made of Tracey during this time.

In 2007 the Haringey Children's Services were examining the possibility of using Solution Focused Practice as an approach in working with families. The SFP approach and the interview led by Sue Gilmore was discussed in the LSCB Report, whereby they concluded that this practice was only suitable in cases where the professionals involved "are confident that the parents are giving genuine cooperation with the staff" (LSCB, 2009 :19). Dr. Andrew Turnell, a Child Protection consultant, and expert on solution focused questions in child protection, stated that it has to begin and end with child safety, and the approach needs to be used within a child protection framework. He ascertained that there were at least two opportunities within the interview between Sue and Tracey that may have provided an opening for more investigative questioning. Graham Badman, chairperson of the Local Safeguarding Children Board leading the investigation into Peter's death, was appalled with the interview. Badman described Tracey as a manipulative person who took control of the situation, and who was able to weave a story that the social worker was all too willing to accept. Also he suggested a review of the use of Solution Focused Practice in child protection. Graham Badman surmised that there were several missed opportunities to intervene, "from the first case conference through to the paediatrician's failure to act decisively" (Panorama, 2010). The LSCB Report (2009) concluded by stating that Peter's death should and could have been prevented if all the professionals involved put the child and his safety before the sanctity of the family. Tracey Connelly, her boyfriend Steven Barker, and his brother Jason Owen were convicted of causing or allowing Peter's death on the 3rd of August 2007, however according to the LSCB report all the caring professionals involved were also responsible.

The documentary began by showing a home video of 17 month old Peter smiling and making tentative first steps. Alison Holt, the Panorama journalist, described this footage as the common family experience of any Mum filming a pivotal stage in her child's life. However, these home movies only serve as haunting reminders that in the complex dynamic of an abusive family, all may not be as it is made to appear. This interview may not have provided the incriminating evidence of professional incompetence as advertised, but it has reminded us of the importance or not of taking situations or people on face value. The trusting relationships formed with parents and families are central to social care work, but according to this documentary caring professionals have placed this relationship above better judgement, thus creating a possible opportunity for abuse to occur undetected. Panorama brought to focus the huge responsibility faced by all social care workers, who are both professional and human, and open to making mistakes. The final report into the death of Peter Connelly is due for publication in the spring of 2011, and hopefully the issues raised will help prevent other children from experiencing a similar fate.

#### References

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## *Developing Social Care: Using EPI Info*

*Dr Frank Houghton*

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The development of a research and evaluation culture is essential for the professionalisation of Social Care. The ability to mark out a designated area of knowledge and competence that is specifically 'Social Care' is an essential step upon this road. The competencies for Social Care outlined in the registration process acknowledge the crucial importance of skills in the research field. In addition, without a strong evidence-base, continued funding of many Social Care projects and programs may be in jeopardy.

Many aspects of Social Care may lend themselves more towards interpretive research approaches involving methodologies usually described under the umbrella term 'qualitative' research. Focus groups, interviews and ethnography are excellent research methods, particularly when issues of language, literacy, attention, understanding and exclusion are involved. Gaining a rich, deep and contextualised understanding of issues from the unique perspectives of others often requires these 'softer' approaches.

However it would be naïve to ignore the hegemony of positivist approaches within the HSE, Government and Irish society generally. The scientific method is firmly wedded to medicine, which is still firmly enthroned on a pedestal. Positivist approaches, often disparagingly referred to as 'number crunching', therefore remain dominant in the HSE, which ultimately holds the purse-strings over many Social Care programmes, to the detriment of more in depth research information, which may take longer to assemble.

Social Care practitioners therefore may be wise to incorporate at least some positivist elements within their research studies as this is the currency and language understood by policy makers and funding bodies. The standard industrial tool within the social science field for analysing statistics in Ireland is SPSS (Statistical Package for the Social Sciences), now known as PASW. Most Social Care courses include at least some exposure to this computer package.

However, this training is problematic for Social Care practitioners once they leave college. Although Universities and Institutes of Technology can purchase licences to this software at hugely discounted prices, most social care agencies cannot afford the cost of even a single PASW (SPSS) licence. Research sections within the HSE that formerly had individual access to this software are now having this facility withdrawn for cost reasons and are resorting to interdepartmental shared usage. This cost barrier is a practical and significant impediment to anyone potentially embarking on a project that would help to develop a stronger research culture in Social Care. Relying only on qualitative methods, while undoubtedly valid, will inhibit the uptake and acknowledged veracity of research emerging from Social Care because of the dominance of numerical approaches.

Annual licences for PASW (SPSS) and increased surveillance of pirate software mean alternative statistical packages must be sourced. MS Excel can perform most statistical procedures. This package has the advantage of being a standard element of the MS Office suite and is therefore relatively well-known. However, although an exceptional programme in many ways, MS Excel is not a dedicated statistical package.

An alternative solution may lie in Epi Info, the statistical package designed by the US Centers for Disease Control. Epi Info is a free, public domain software package that facilitates data entry and analysis. First developed by the CDC over 20 years ago it is supported by the World Health Organisation and has been downloaded over one million times across 181 countries.

Epi Info assists in the creation of questionnaires as well as computerised data entry forms. Data can be entered directly or imported from 24 different data formats. The package can easily produce a range of outputs including statistics, tables, graphs, and maps. In addition Epi Info includes a report module which includes a user-friendly tool to create professional looking customised reports. Support for Epi Info comes in the form of manuals, online tutorials, books and even YouTube clips.

Ensuring that students engage with research methods can be achieved through a strong contextualisation of research theory and methods. The major challenge may be encouraging staff teaching research methods and statistics on Social Care programmes to adopt this new package. However, failure to do so may only perpetuate the relatively weak research culture in Social Care. This is a weakness that inhibits individual Social Care practitioners, the discipline as a whole, service development, and ultimately impacts adversely on clients.

**HOUSE RULES by JODI PICOULT***Published by Hodder at €8.99**Reviewed by Richie Hayes (Social Care Worker, St. Joseph's Ferryhouse, Clonmel)*

In a past life I had the pleasure of being associated with a disability organization which among its many virtues provided excellent legal advice and representation to people with disabilities. A perennial difficulty for this service was the provision of direct courtroom assistance for people with autism and Asperger's syndrome. Apparently the unique suite of social and communicative impairments associated with the disorders - poor eye contact; emotionally flatness; restless posture - was invariably perceived in the courtroom as actions of untrustworthiness or disrespect, and thus the clients were often discriminated against by virtue of the social peculiarities endemic to their disability.

So it was with great interest that I read Jodi Picoult's House Rules which tackles this very issue. Those familiar with Picoult's novels will recognize them for their close examination of what it means to be different and her latest book is par for the course. House rules is a mosaic of personal narratives and plots that centre around Jacob Hunt, an eighteen year old boy with Asperger's Syndrome who lives with his single-mum Emma and his fifteen year old brother Theo. Jacob typifies a person with Asperger's; smart, obsessive and emotionally wanton. He is forensics aficionado and is particularly preoccupied with the tv series Crimebusters for which he has apparent total-recall. Armed with this unquenchable obsession and with more than a few unconventional social habits, Jacob develops a penchant for turning-up at any hour at local crime-scenes to volunteer his expertise on forensics, much to the annoyance of the local police. Meanwhile, Emma, a paragon of selfless motherhood, works in an ill-paying job as an agony aunt for a local rag. However, with Jacob's isolated and isolating behaviours Emma finds herself over the years sacrificing friends for family. In her long struggle to make her son 'neurotypical' she momentarily strikes gold in Jess Ogilvy, an affable and caring young woman who she employs as a social skills tutor for Jacob. Jacob is suitably smitten and Jess is a model of sensitivity towards Jake's odd ways and quirky mannerisms. However, when Jess is found dead Jacob is no longer a mere irritating curiosity to the police but suspect number one.

And so, the whodunnit begins: did Did Jake Hunt kill Jess Ogilvy?

The Hunts, we learn, are not without their failings. Jacob is prone to violent outbursts. Emma's lost dreams for Jacob are transferred to Theo, who is burdened by her expectations of him. He is resentful of what he perceives as the inordinate attention lavished upon Jacob and has lately taken to breaking and entering local homes. Early in the story we hear from Theo that he himself has been a victim of Jacob's violence which has the reader guessing that there may be more to Jake Hunt than meets the eye.

In House Rules Picoult has clearly done her own forensics with respect to Asperger's Syndrome and manages to personalize Jake's disorder without the story-line becoming too sentimental or melodramatic. Jake's narrative gives a credible account of what it feels like to 'live' the disorder, how he found the teasing at school so painfully unfathomable, how he gets upset if plans don't work out or if he's schedule changes. "Sometimes", he says "I just can't control what happens". Indeed, the variety of narrators serve as a vehicle to reflect society's contradictory opinions, perceptions and misconceptions of what it means to have Asperger's Syndrome. For instance, there is Oliver Bond, Jake's eminently inexperienced lawyer who undergoes a precipitous learning-trajectory of both state law and Asperger's and who considers the 'insanity clause' as a viable argument for the defense. Then there is local policeman Rich Maston who sees Jake's mixture high intelligence, weird obsessions and lack of eye contact as something creepy.

However, there are times when our credulity is stretched. Jacob's self-awareness is often uncanny and his occasional flourishes of metaphor seem far too rich for the literalism we are reminded is feature of Jacob's communication difficulties. Even if we grant Jacob these self-insights it is strange that no one appears to have asked him directly if he murdered Jess. Nevertheless, there is much to love in House Rules. This is an easy-to-read, humourous and thoroughly engaging novel and Picoult's sheer enthusiasm for her subject is infectious. Her exploration of family ties are both complex and subtly woven throughout the entire story. The court-room scenes are also engaging and the technique of interspersing macabre and anonymously written real-life criminal case studies throughout the narratives not only provide a grisly counterbalance to the mundane events of the story but also have a disturbingly voyeuristic allure!

And as a whodunnit? There's plenty of mystery in House Rules but be warned: it is not the stuff of Scott Turow and you may well work it out early. Then again maybe not! All that can be said is that the very last line will have you turning back the pages...

***Annual Conference + Free Seminar***

*See details on back cover of this edition for the 2011 Conference in Athlone on March 9th & 10th and Free Seminar in Rory Gallagher Theatre, Cork IT on morning of February 2<sup>nd</sup>.*

*Note: Places limited for Free Seminar so book in time.*

*A Little Light Relief... Or is it?***SCHOOL***1957 vs. 2011*

**SCENARIO:** Johnny and Mark get into a fight after school.

**1957** Crowd gathers. Mark wins. Johnny and Mark shake hands and end up best friends.

**2011** Police called, arrests Johnny and Mark.. Charge them with assault, both expelled even though Johnny started it. Both children go to anger management programs for 3 months. School governors hold meeting to implement bullying prevention programmes

**SCENARIO:** Robbie won't be still in class, disrupts other students.

**1957** Robbie sent to office and given 6 of the best by the Principal. Returns to class and does not disrupt class again.

**2011** Robbie given huge doses of Ritalin. Becomes a zombie. Tested for ADHD. Robbie's parents get fortnightly disability payments and School gets extra funding from government because Robbie has a disability.

**SCENARIO:** Billy breaks a window in his neighbour's car and his Dad gives him a whipping with his belt.

**1957** Billy is more careful next time, grows up normal, goes to college, and becomes a successful businessman.

**2011** Billy's dad is arrested for child abuse. Billy removed to foster care and joins a gang.

**SCENARIO:** Mark gets a headache and takes some aspirin to school.

**1957** Mark gets glass of water from Principal to take aspirin with.

**2011** Police called, Mark expelled from school for drug taking. Car searched for drugs and weapons.

**SCENARIO:** Johnny takes apart leftover fireworks from Halloween night, puts them in a paint tin & blows up a wasp's nest.

**1957** Wasps die.

**2011** Police & Anti-Terrorism Squad called. Johnny charged with domestic terrorism, investigate parents, siblings removed from home, computers confiscated. Johnny's Dad goes on a terror watch list and is never allowed to fly again.

**SCENARIO:** Johnny falls while running during morning break and scrapes his knee. He is found crying by his teacher, Mary. Mary hugs him to comfort him.

**1957** In a short time, Johnny feels better and goes on playing.

**2011** Mary is accused of being a sexual predator and loses her job. She faces 3 years in Prison. Johnny undergoes 5 years of therapy.

**What do you think?****SCI**

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## Food for Thought

*Amy Chua's book "Battle Hymn of the Tiger Mother" has caused controversy among parents, teachers and carers. Here is Frank McNally's view which we reprint with permission of The Irish Times*

As any musically illiterate parent of music students will know, YouTube can be a vital educational resource. What happens is that your child comes home with a new piece, which as scratched on a violin or cello does not bear even passing resemblance to a tune. So, wishing to offer advice but having no idea what the melody should sound like, you look it up on YouTube. And there, invariably, will be videos of children elsewhere in the world, posted by their proud parents, playing the same thing. This can be extremely helpful, but it can also be depressing. The children featured are usually Chinese, or sometimes Japanese, or Korean.

They are also typically two or three years younger than your child. As a result, the educational value of hearing them play a tune well is all-but offset by the annoying fact that, despite their tender years, these little virtuosos have already left yours behind. Now, thanks to a woman called Amy Chua, at least I know how it happens. An American of Chinese parentage, Chua is a writer, a law professor, a mother of two, and a very scary woman. Her teenage daughters are both musical prodigies, thanks to her guidance. And in her latest book, *Battle Hymn of the Tiger Mother*, she explains what that guidance involves.

The book purports to describe the child-rearing techniques of the typical Chinese matriarch, who, if the author is not exaggerating, presides not so much over a family home as a boot-camp. I suspect Chua is very much in the front rank of the Tiger Mother movement, and not at all typical, even among the Chinese. But for a flavour of her approach, here are some of the things her daughters are not allowed to do:

1. Attend a sleepover.
2. Have a play-date.
3. Be in a school play.
4. Watch TV or play computer games.
5. Get any grade less than an A.
6. Not be the No 1 student in everything except gym and drama.
7. Play any instrument other than the piano or violin.
8. Not play the piano or violin.

An excerpt from the book appeared in the *Wall Street Journal* recently, under the headline "Why Chinese mothers are superior." Since when, unsurprisingly, all hell has broken loose in the paper's comments section. One of the many criticisms levelled against her is racism: even though in the same piece she says that the term "Chinese mother" is used loosely and that the phenomenon is not exclusive to China, or to mothers.

Fathers can qualify too, Chua insists. And she claims to know "Korean, Indian, Jamaican, Irish and Ghanaian parents" who equally fit the bill. This sounds like an acronym – KIJIG parents – waiting to be born, although the examples are clearly drawn at random from her circle of acquaintances and that selection is not exclusive either. Among the 5,395 comments on the WSJ website, I'm sure, there must be a few from Jewish mothers demanding to know why they weren't included.

Rules about what her children are not allowed to do aside, Chua is also a strong believer in criticism. Not gentle, constructive criticism, of the kind that emphasises how everybody is special, but in different ways. She hates that namby-pamby Western crap. No, the Chinese mother's criticism is more robust. "Hey fatty – lose some weight", she will say. Or: "You're lazy. All your classmates are getting ahead of you." Chua illustrates the success of her ideas with a story about one of her children that will strike you either as heart-warming – if you're a Chinese/KIJIG parent – or, if you're not, as a potential lawsuit under the UN Convention Against Torture.

Her daughter Lulu, then aged 7, was struggling with a piano piece (Jacques Ibert's *The Little White Donkey*), in which right and left hands have to play completely contrasting rhythms. It was, Chua concedes, very difficult. And after a week of failure, the child gave up in exasperation. Or rather, she tried to give up.

This is, of course, not an option in a household run by a Chinese/KIJIG mother. Instead, Lulu was ordered back to the piano. There were resulting tantrums, during which the score was shredded. So in retaliation, Chua took the child's doll's house out to the car and claimed she would donate it to the Salvation Army if the piece was not played perfectly by the following day. She also threatened to deprive Lulu of lunch and dinner. Oh, and she warned that there would be no Christmas presents or birthday parties for up to four years.

Even her husband, who sounds like a namby-pamby westerner, thought she was overdoing it. But, surprise, surprise, Chinese Mother triumphed in the end. At the umpteenth attempt, suddenly, Lulu played the piece straight through. Then she did it again, faster and more fluently. And soon she was beaming: "Mommy, look – it's easy." After which they had a big cuddle. All this could make the rest of us feel inadequate. In fact, sometimes when I see those Chinese kids playing so proficiently on YouTube, I try to console myself by studying them for signs of stress, or shackles, or whatever. And it would be comforting to think that Chua's children – one of whom made her Carnegie Hall debut at 14 – are at least lacking in personality. The evidence is not encouraging, however. It's bad enough that her daughters look healthy and beautiful, but they also seem to be well-adjusted. Enough, at any rate, to joke that their mother is insane. Which, by the way, is a recurring theme in the WSJ comments section.

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|       |   |
|-------|---|
| 09:30 | <b><i>Attendance Confirmation</i></b>   |
| 10:00 | <b><i>Opening</i></b>   |
| 10:15 | <b><i>Statutory Registration</i></b><br><b><i>Where do We now Stand?</i></b><br><b><i>Ginny Hanrahan – CEO of CORU</i></b><br><b><i>(Health &amp; Social Care Professionals Council)</i></b>                          |
| 11:00 | <b><i>Q + A</i></b>   |
| 11:15 | <b><i>Coffee</i></b>  |
| 11:40 | <b><i>From the Rational to the Relational...</i></b><br><b><i>The limits of Regulation</i></b><br><b><i>Mark Smith – Lecturer in Social Work at</i></b><br><b><i>Edinburgh School of Social/Political Studies</i></b> |
| 12:30 | <b><i>Q+A</i></b>   |
| 12:45 | <b><i>Close</i></b>   |

*This seminar will be of interest to all at professional and student level in the Social Care / Social Work field. Both topics are of particular relevance as we face into an uncertain future.*

*There is **NO CHARGE** for this seminar but we do ask that you register, if attending, before Monday, January 31st by contacting Tim at 087-9079404, Nicola at 086-3971729, [iascw@hotmail.com](mailto:iascw@hotmail.com) or 087-9708426 (IASCW).*