



## **Review of Family Support Services**

Consultation Process of the Centre for Early Childhood  
Development and Education

21<sup>st</sup> May 2004



## 1. Introduction

In 2001, the Minister for Education and Science appointed the Dublin Institute of Technology and St. Patrick's College, Drumcondra to jointly establish the Centre for Early Childhood Development and Education (CECDE). This was in pursuance of the objectives of the White Paper 'Ready to Learn' (DES, 1999) and to advise the Department of Education and Science on policy issues in this area. The remit of the CECDE is comprehensive, focusing on all care and education settings for children birth to six years of age, bridging many of the traditional divides between education and care and between the early years settings and the formal education system.

Within this broad framework, the **objectives** of the Centre include:

- To develop a quality framework for early childhood education;
- To develop targeted interventions on a pilot basis for children who are educationally disadvantaged and children with special needs and;
- To prepare the groundwork for the establishment of an Early Childhood Education Agency as envisaged by the White Paper, *Ready to Learn* (CECDE, 2001).

The support of families forms an inherent part of this brief, the family forming the primary unit within which the majority of children develop and learn. As part of the development of the National Framework for Quality, parental involvement is cited within our Programme of Work (CECDE, 2001) as one of the core areas for the development of guidelines and standards. Specifically in relation to coordinating and enhancing provision for children affected by disadvantage or those with special needs, the Programme of Work asserts that, "*The active involvement of parents in early childhood education settings will be a priority.*" (CECDE, 2001: 5) Consultation is a core and central value of the CECDE, and we have made great strides in the development of consultation processes to involve parents and the wider community in our work. Moreover, our Research Strategy (CECDE, 2003a) outlines a number of research initiatives the CECDE is undertaking in relation to parental and family support and partnership. The Audit of Research (CECDE, 2003b)

contains a chapter on parents and families, part of which is a review of research in Ireland on Family Supports from 1990-2003.

Within this context, the CECDE welcomes the opportunity to be involved in the Review of Family Support Services. As part of the wider consultation process, the ten members of the CECDE team met and discussed the questions posed and the following account is the CECDE position on the Review of Family Support Services. The team contains a diverse array of professional backgrounds, including psychology, education and social care, while the main focus of the discussion was based on the impact of family supports on young children (birth to six years).

### **Broadening the Consultation Process – A Proposed Framework**

#### **Section 1 - Informing people about the review and the approach being taken to the review.**

##### ***(i) Do you have any comments/suggestions about the terms of reference?***

There was some concern expressed in relation to the lead role the Department of Health and Children were playing in this review. It was felt that family support services were very broad and diverse, involving a multiplicity of departments and agencies and that this must be reflected in the terms of reference. Additional concerns were raised that some very valuable work and services within family supports may be omitted if a narrow interpretation of family support was utilised.

The research undertaken as part of the review process “*A Census of Family Support Services in Ireland: Results of 2003 Census of Family Support Services commissioned by Health Boards in Ireland*” and “*Promoting the Well Being of Children and Families: A Study of Family Support Services which are funded through Health Boards in Ireland*” reinforces this concern as they both focus on services funded or provided by the Health Boards. Many

family support services, using a broad interpretation of such services, provided by Health Boards will not feature within the review within the current terms of reference, such as childcare supports and the inspection of preschool services. Family support services cannot be viewed as child protection or from a welfare perspective exclusively.

**Recommendation 1:**

**The CECDE propose that a more holistic view of family support services be employed, inclusive of all departments, agencies and organisations involved in the provision of services. All services, not only child welfare and protection initiatives, including childcare, must be an integral element of the terms of reference.**

***(ii) Do you have any comments/suggestions about the approach being taken to the review?***

The CECDE welcomes the broad representation of participants on the review of family support services and believes this is a necessity to ensure inclusion of all aspects of family support services. The CECDE regrets the fact that the two aforementioned research documents prepared as part of the review process were not available to delegates partaking in the review process. This research would help to contextualise and ground the review process. The CECDE concedes that these documents may be drafts and evolve as works in progress, but believes that their dissemination is important to inform the review process. Moreover, further research may need to be commissioned to include all other aspects of family support services not provided through the Health Boards.

**Recommendation 2:**

**The research completed to date should be disseminated in draft format to participants to assist in informing and advancing the review process. Further research should be undertaken to ensure there is a comprehensive understanding and review of wider family support services available in Ireland.**

***(iii) How would you describe family support?***

***(iv) What if anything is different from your description of family support and the description in the definition above?***

There was some concern that the definition provided viewed family support largely from a child welfare or child protection perspective. There was also much discussion around the term “...*focused on early intervention...*” and there was general consensus that this was aspirational, as early intervention was not always the norm at present. The term ‘...*early intervention...*’ needs to be defined clearly as it is not always understood in the context of intervention in early childhood (It could readily mean early intervention for early school leaving or for juvenile delinquency). In addition, research now shows that intervention even at age three or four may be too late and that supports are needed earlier in the child’s life. Also, learning is not considered in the definition and early childhood care and education is a necessary support for many children. Furthermore, it was held that family support services cannot focus exclusively on the child, that they must take greater cognisance of wider parental, family and community needs. The current definition would be more apt of “*child support*” as opposed to “*family support.*” The case of adult-dependents was also raised, including individuals with special needs and this reinforced the need for a broader interpretation of family supports.

**Recommendation 3:**

**The CECDE proposes that the definition of family support needs to be broadened to be more inclusive of the general needs of the child, family and community as opposed to focusing directly on child welfare issues. Further clarification of the term “...*early intervention...*” is a prerequisite of ensuring that this aspiration is achieved in future.**

## **Section 2: Refocusing of Health Board Services for Families and Children**

***(v) Do you think that these changes would make differences to the services currently provided for families and children by Health Boards? Please say how and why you think they would be different.***

The CECDE was in complete agreement that there was a radical departure from the column entitled “*re-focusing from*” to the column entitled “*re-focusing to*” and that the majority of these were for the better. It was also acknowledged that there would be a great challenge involved in making such a departure. It was felt that the changes would make services more user-friendly and oriented as opposed to being driven by the needs of the services or bureaucracy. However, it was also stressed that a complete shift might not be desirable or advisable – for example, we have much to learn from tradition and practice and they provide the context for us to move forward. ‘Evidence’ should be inclusive of the vast array of practical experiences as well as formal research. Thus, a complete reliance on empirical evidence and formal research alone would not be adequate to provide a context for services.

### **Recommendation 4:**

**The review must learn from the existing context, such as tradition and practice, and use this as a platform for reform into the future. In addition, a broad interpretation of the term ‘evidence’ must be employed as there is much to be learned from a number of aspects in relation to family support services, not just empirical research.**

***(vi) What kind of things need to happen if these changes are to be made?***

For such a radical change, a number of systemic and structural changes would be required if success was to be achieved. First of all it was felt that the whole image of Family Support Services as perceived at present was in need of revision. There is a deficit perspective attached to family support services at

present, causing a stigma for consumers. Instead services need to be designed as a support to benefit all families universally.

**Recommendation 5:**

**Family Support Services must be designed and marketed as a universal support for all families so that it will not involve marginalisation or labelling of consumers.**

Secondly, the structures for providing family support services are in need of an overhaul. The present structures of the Health Boards are not conducive to uniformity as national policy is often interpreted and implemented in different ways in different Health Board regions. The end result is that similar services are not always available in all areas and confusion arises in relation to provision. The present structures entail that services start with and are driven by the system and are not able to react to the individual and diverse needs of people accessing such services. There is also need for greater cooperation and coordination between the Health Boards and the myriad of other departments, agencies and organisations involved in the provision of family support services.

**Recommendation 6:**

**An audit of all services, not just by the Health Boards, is required in order to understand the base we are starting from. Following this, systemic and structural changes will be a necessity to ensure there are no voids or duplications in services. Lateral thinking across all services is required to ensure greater coordination and cooperation between services.**

Thirdly, the need to disseminate explicit information on family support services, in a variety of formats and methods, is a necessity. There are such a multiplicity of services and service providers that it is difficult for a person seeking a service to know where to start, especially since many people seeking such services may feel marginalized and threatened by institutions. At present, it is even confusing to people working in family support services

exactly what services are provided by what agencies and how these can be accessed. Services need to be more accessible and understandable and public awareness campaigns and increased information is a necessity to ensure this in the public domain.

**Recommendation 7:**

**The availability of information is a prerequisite of making services accessible and useful for families. The CECDE propose a “one stop shop” for all family support services, whereby consumers can access a central agency which can direct them to the service that best meets their individual requirements.**

***(vii) Can you suggest how people who need or are using family support services could be consulted about that service and other related services?***

The CECDE feels that universal as opposed to targeted consultation would yield the best data. What needs to be uncovered is information on the needs of families nationally, not just those in need and this would help to reduce and even eliminate the deficit perspective attached to services at present. Such information might be gathered as part of the Quarterly National Household Survey or the Census and be used to create a type of national database where information is recorded in a consistent and systematic way. Children, as an important stakeholder within family support services, can be consulted through a variety of established structures such as Dáil na nÓg, the ISPC and by using the guidelines for younger children produced by the Children’s Rights Alliance.

**Recommendation 8:**

**Consultation on a universal as opposed to targeted basis is advisable. This should include all stakeholders in family support services, using a variety of existing structures of consultation and information gathering.**

### **Section 3 - Providing a “joined-up” service for families.**

*(viii) What do you think are the barriers to the provision of “joined-up” services for families?*

*(ix) What might help to overcome these difficulties?*

The CECDE felt that the multiplicity of personnel working within family support services need to have an enhanced appreciation of the nature of family support services and to acknowledge and accommodate this in the work that they do. This will ensure a holistic view of the family and the range of needs and supports that may be required, as opposed to one aspect or discipline. To ensure the attainment of such an understanding, training and ongoing professional development will be required to support practitioners and professionals in their wider roles. Within services, opportunities for specialisation in specific areas must be available to ensure an adequate pool of expertise in various aspects.

#### **Recommendation 9:**

**Personnel working within family support services must be encouraged and supported to view the services they provide in a holistic manner and to understand their input in the context of the wider needs of the family. Pre-service training and continuous professional development are prerequisites in this regard.**

In addition, there will be need for radical systemic changes in the way family support services are organised and delivered. Such changes are essential at a macro as well as micro level, and minor cosmetic changes will not lead to the desired outcomes. This will require greater interagency cooperation and collegiality, the pooling of expertise and resources and services with the needs of consumers to the fore as opposed to their own structures and bureaucracy.

#### **Recommendation 10:**

**A comprehensive reorganisation of the structural aspects of family support services must be undertaken to ensure greater coordination and efficiency within services. This must take account of all departments, organisations and agencies involved in the delivery of family support services.**

Such fundamental changes will require increased funding, at least in the short-term. This will be necessary to ensure that family support services are accessible in a variety of formats to all families. However, as services become more streamlined and focused on needs as opposed to structures, the review may lead to savings or at least more efficient use of the limited resources available.

**Recommendation 11:**

**Funding is a prerequisite of success to ensure a more proficient delivery of services and in the long-term, it will ensure that resources are utilised in a more efficient manner.**

Once again, the CECDE holds that the deficit perspective attached to family support services will impede progress in service delivery. The stigma that is attached to accessing such services must be eliminated and all those in need of support must feel freely open to avail of the supports necessary.

**Recommendation 12:**

**The public image of family support services needs to be revised and reviewed to ensure that consumers perceive them in a more positive light. Only then will those accessing services do so without negativity or stigma, as a universal support available for all families.**

## **Bibliography**

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