



# **SLIGO SPRINGBOARD RESOURCE HOUSE PROJECT**

## **An Evaluation of the Sligo Springboard Resource House Project**

**Conducted by  
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**August 2008**



Feidhmeannacht na Seirbhíse Sláinte  
Health Service Executive



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## **Foreword**

### *Springboard Evaluation Report*

This evaluation of the Springboard Resource House Project in Sligo, undertaken by the Child and Family Research Centre at NUI Galway, is both timely and welcome. It will contribute greatly to the development of family support initiatives in Sligo, Leitrim and West Cavan.

In this area, the HSE and before it the NWHB, has been at the forefront of investment in community led family support programmes. This is wholly consistent with government policy as reflected by the *National Children's Strategy - Our Children, Their Lives 2000 - 2010* and the *Agenda for Children's Services (2007)*.

The Springboard model is focused on the needs of children, their parents and their relationships, which are so important in undertaking the difficult task of parenting in today's world. The model helps families and children utilize their own as well as community resources in overcoming adversity. Historically, it was taken for granted that they could rely on community networks for support and assistance. In recent years, however, this has become a rarer feature of life in Ireland. The Springboard philosophy is based on compelling evidence that children and families do best where there are strong inter-familial and community links. It is this focus so clearly outlined in this evaluation that the HSE has been determined to encourage.

The evaluation details the impressive breadth of work undertaken by the Project. In addition, service users and partner agencies testify to its value in supporting families and children. The outcomes which were measured as part of the evaluation confirm that social support and self-esteem are positively impacted by the work of the Project.

Looking forward, a number of issues are pinpointed relevant to the consideration of policy development in the family support area generally. These may best be illustrated when applied to the Project's after-school programme which rightly, is given particular priority. There is strong international evidence, that maximizing educational opportunities can create possibilities for a child allowing escape from adversity in adulthood; conversely, failure to grasp such opportunities can confirm and accelerate a cycle of disadvantage spanning successive generations. Applied to this area, questions that the evaluation poses are:

1. How can parents be helped develop the confidence to take responsibility themselves in exercising their right and duty to positively influence their child's educational development?
2. How can the structure of Springboard Resource House Project be adapted to ensure that parents have greater representation and opportunity to influence educational programmes designed to meet their and their children's needs?
3. In ensuring that the parents and children identify with and can influence the Project, what is the balance to be achieved by on the one hand, targeting services at a specific community or area and on the other, their being available to the wider community? Are there implications for instance, if some children attending the same school have access to educational supports, not available to others? If available more widely would that impact negatively on parent's willingness to take responsibility for their children's educational well-being?

These and other questions are now to be addressed. The fact the Project has developed so that it is embraced by the local community and the agencies with which it works on a day-to-day basis, is an impressive achievement and a tribute to all involved. In its continuing commitment to the Project, the HSE will work jointly and enthusiastically with its partners on the Board of Directors in utilising the direction charted by the evaluation to build on the progress achieved to date.

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August 2008

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## **Child and Family Research Centre**

This evaluation was conducted by the Child & Family Research Centre (CFRC). The CFRC is a partnership between the Health Service Executive (HSE) and National University of Ireland, Galway. Based in the School of Political Science and Sociology, the CRFC undertakes research, education and training in the area of child & family care and welfare.

The Centre's objectives are to:

- Understand child and family needs by producing scientific research and evaluations.
- Improve services for children and families through: third and fourth level education; better service design; and learning networks for service practitioners.
- Build research capacity in family support through applying best practice methodologies, developing researchers and supporting practitioner research.
- Influence policy for children by engaging with researchers, policymakers, service providers, children and their families

The lead CFRC researcher during this evaluation was Cormac Forkan, with specific support from Dr. Pat Dolan, Dr. John Canavan, Professor Chris Curtin, Brian Merriman and Bernadine Brady. Gillian Browne and Aileen Shaw from the Centre also helped to prepare the report for publication.

More information on the CFRC can be obtained from the following website:

[www.childandfamilyresearch.ie](http://www.childandfamilyresearch.ie)

## Acknowledgements

As is mentioned so often throughout this evaluation report, the need to recognise the importance and intricacy of social-ecology is fundamental to youth work and family support. Over the past two years, I have drawn on many people and organisations to complete this evaluation and without their help, my job would not have been possible. Considering this, I would like to extend my thanks to the following people and organisations for their invaluable help and contribution to this evaluation process:

- **The Participants** – *This includes the young people, adults and families who participated in the data collection; the Board of Directors and representatives from the Community, Voluntary and Statutory Agencies.*
- **The Research Advisory Group (RAG)** – *The group, formed at the beginning of the process, to help guide and advice on the work of the evaluation, conducted their duties with clarity and fairness.*
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# Chapter 1

## Introduction

### 1.1 Introduction

The meaning of the term *family* is an ever-changing concept, one that has always been subject to social construction over time. The once traditional two-parent family with children, being supported by its wider family circle, is now being socially deconstructed and challenged by other family forms. In Ireland, the extent and rate of social change over the last 15 years has led to a questioning of the *old orthodoxies* and certainties (Corcoran, 2006). This social change has led to the need for more state led interventions, often in the form of community based family support services (Department of Health and Children, 2003: 56). Some of the key features of these services are that they are all based in communities that experience grave socio-economic disadvantage. In addition, they provide a safe outlet that enables family members to spend time away from the family, which can be a source of stress and they have a focus on personal development, education and training. Furthermore, families are encouraged to see their strengths, identify solutions and work at their own pace.

One of the best-known family support Projects in Ireland is the Springboard Project, which was established in 1998 in 14 pilot sites. Since then, the Springboard way of working has continued to grow and develop. However, in reviewing the plethora of family support Projects in Ireland, Canavan, Dolan and Pinkerton (2000) have asked, how do we know that these services offer real and meaningful support to the families they work with and in particular, can the outcomes of service users be assessed to answer this question more affectively?

### 1.2 Background to This Evaluation

Considering this, in early 2005 representatives from the Health Services Executive in the North West (HSE NW) contracted the Child and Family Research Centre (CFRC) from NUI, Galway, to conduct an evaluation of the Sligo Springboard Resource House Project<sup>1</sup> in Cranmore, Sligo. Following a number of meetings between the

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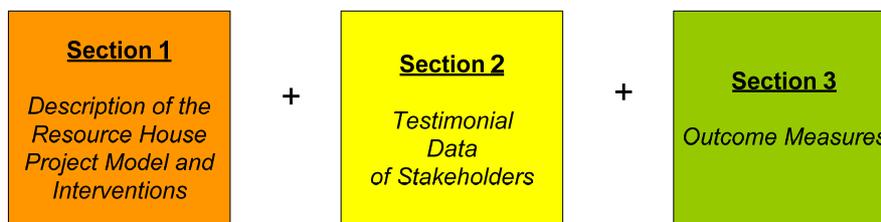
<sup>1</sup> Despite formally being called the Sligo Springboard Resource House Project, the families and agencies that have contact with the Project refer to it as the Resource House Project. Therefore, the

CFRC and the HSE NW, a final agreement on the terms of reference of the evaluation was reached in November 2005. It was agreed that the evaluation would begin in January 2006 and would be fully complete by December 2007. The overall aim of the evaluation was to *conduct a comprehensive review of the work of the Resource House Project*. In order to achieve this, the evaluation set out:

1. *To gain an overall insight into how the Resource House Project is meeting the needs of the identified community and identify any barriers to this process.*
2. *To establish the perceptions of all stakeholders and service users involved with the Resource House Project in relation to all aspects of the work of the Project.*
3. *To assess possible life outcomes for the Service users who engage with the Resource House Project.*
4. *To investigate how the capacity and behaviour of the participants engaging with the Resource House Project is affected in any way.*
5. *To examine the overall position of the Resource House Project with a view to its current and future compatibility with other local family support services.*

As shown in Figure 1.1, these five objectives were then further categorised into three key components. The first component will examine the Project Model as operated by the Resource House Project; listening to the testimony of the various stakeholders involved with the Resource House Project makes up the second component while the third one focuses on life outcome measures for those who have used or continue to use the Resource House Project.

**Figure 1.1**  
**Key Components of Springboard Evaluation**




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terms 'Project' and/or 'Resource House Project' are used to denote the Sligo Springboard Resource House Project throughout this report.

### **1.3 Layout of the Report**

This evaluation report consists of 8 chapters, which contain the following information:

- **Chapter 2** raises some of the key issues facing families and young people in contemporary western societies as well as examining the policy context through which the lives of families and young people are currently understood in Ireland.
- **Chapter 3** profiles the community within which the Resource House Project is based.
- **Chapter 4** discusses some key issues relating to the evaluation process, in particular looking at the key ethical considerations that underpinned the evaluation.
- **Chapter 5** describes the Project Model as operated by the Resource House Project in more detail.
- **Chapter 6** both presents and comments upon the testimonial data obtained from the stakeholders who engage with the Resource House Project.
- **Chapter 7** introduces the concept of measuring outcomes for children who use the Resource House Project. Furthermore, specific data collected using standardised outcome measuring tools is also given.
- **Chapter 8** offers concluding comments and recommendations subsequent to the evaluation process.

# **Chapter 2**

## **Supporting Irish Families and Young People**

### **A Contextual Overview**

#### **2.1 Introduction**

As presented in Chapter 1, the overall aim of this evaluation is to *conduct a comprehensive review of the work of the Resource House Project*. In subsequent chapters, both the research methods used throughout the evaluation as well as the various findings will be presented and discussed. Prior to that, this chapter provides a contextual overview for the study, by introducing four main areas. Since the Resource House is a family support Project that works with adults, parents and young people, the first part of the chapter focuses on *Families and Young People in Contemporary Ireland*. The changing nature of the term family is discussed as well as the key issues being experienced by contemporary young people. Any such family support work is guided both by international and national policies and legislation, this forming section two. The third section examines the definition of family support, the development of the Springboard Model of family support as well as the key findings from the National Evaluation of the Springboard Model in 2001. The fourth and final section introduces the notion of Measuring Outcomes in family support and how this way of working has permeated its way into family support policy and practice in Ireland.

#### **2.2 Families and Young People in Contemporary Ireland**

In this section, the changing nature ‘family’ in contemporary society is discussed as well as some of the most pertinent issues experienced by contemporary young people.

##### **2.2.1 The Changing Nature of Family in Ireland**

The Irish Constitution of 1937 placed the family in a pivotal role, recognising its fundamental function in Irish society (See Articles 41.1.1 & 41.1.2). Since the initiation of Ireland’s process of modernisation during the Lemass era of the late 1950’s, through to the Celtic Tiger, what exactly constitutes a family has been the subject of frequent academic and social debate. In defining family, Macionis (1995: 662) suggests that it is a “...*a social group of two or more people, related by blood, marriage or adoption, who usually live together*” while Gough (1992: 23) points out that it is “... *a married couple or other group of adult kinfolk who co-operate*

*economically and in the upbringing of children, all of whom share a common dwelling”.*

Neither of these two definitions is totally accurate in capturing the nature of ‘family’ in Ireland today. For example, the fact that 1 in 3 of all births in Ireland now occur outside marriage (CSO, 2007) as well as the growth in ‘blended families’ and the increase in the number of women working outside the home, all further question the nature of family. Regardless of the era in question, however, the cultural ideal of *family* is socially constructed over time, and therefore is subject to change (Gelles, 1995). It is now the case that the current cultural idea of family in Ireland is best described as heterogeneous, non-traditional and one that acts out of a ‘*Pick & Mix Approach*’.

Furthermore, many of these changes in Irish family life are merely reflective of international trends in family change, which have been occurring in tandem, the most common being (Dolan & Brady, 2007):

- A growing sense of individualism
- A growing trend towards a nuclear family structure
- Changing family shapes, where the shape of the family structure can be described as ‘*bean-pole*’, in so far as it incorporates one grandparent, one parent and often just one child.
- A separation of sex from marriage
- The reconstruction of marriage – growth in civil marriages
- The separation of parenthood from marriage
- A challenge to the traditional sexual division of labour
- Smaller family size
- Diversity of family forms, namely blended families and single parent families.

Social change is inevitable as society progresses. However, the nature and extent of this change, particularly in Ireland, has been profound over the last 50 years. In reviewing this change, Sweeney & Dunne (2003) ask to what extent has Irish society become like the US, with its growing sense of aloneness among young people. Blum (2002) has shown that adolescent misbehaviour is very much related to how

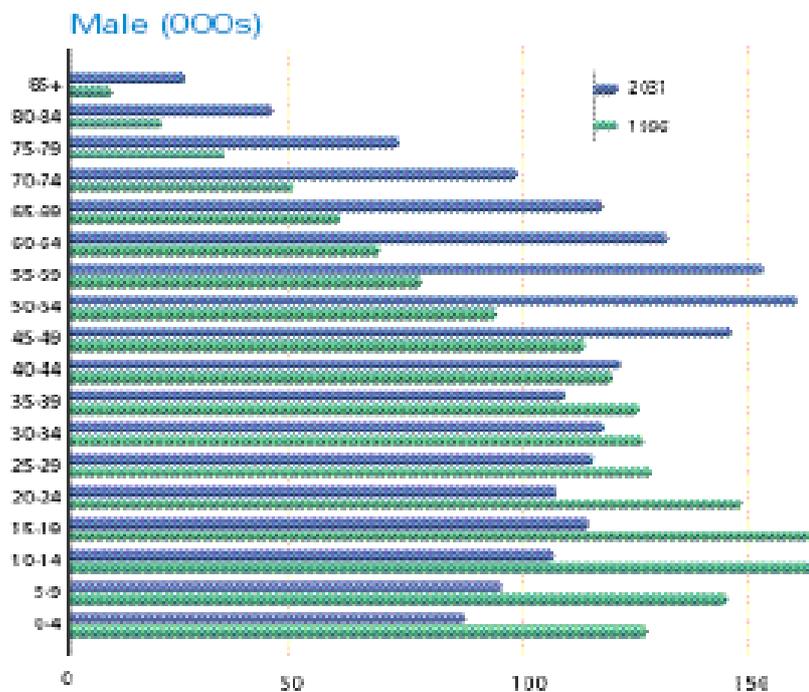
connected parents are to their children - *“Teenagers who were emotionally connected with at least one parent were a third less likely to develop problem behaviours”* (Sweeney & Dunne, 2003: 18). Therefore, questions such as these run deep into the practice of and need for family support.

### 2.2.2 – Understanding Our Young People

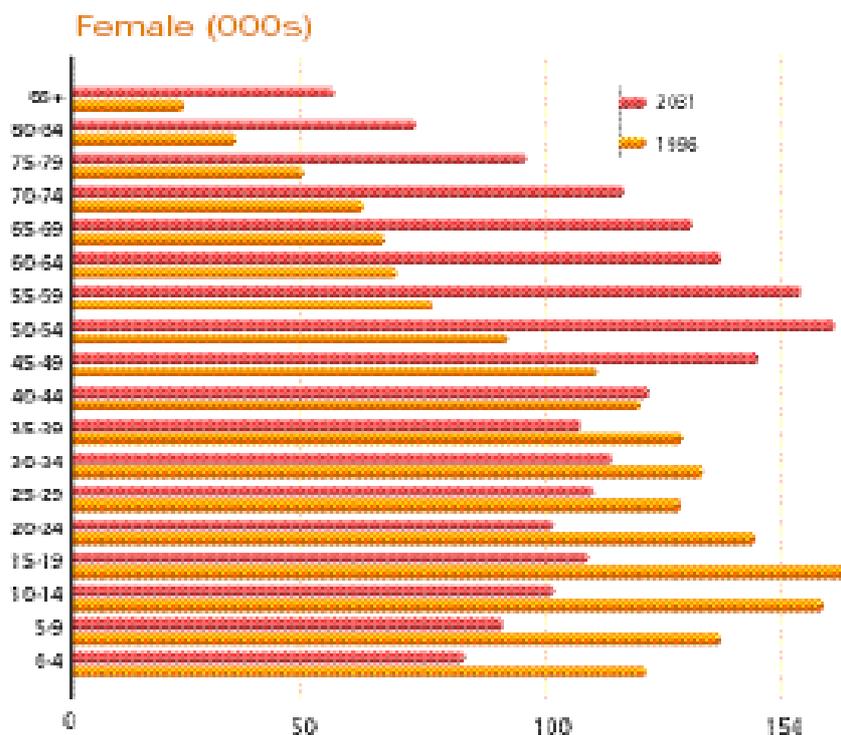
Under the terms of the United Nations Convention on the Rights of the Child (UNCRC, 1989), a child is defined as any person under the age of 18. At present, Ireland possesses the highest proportion of children in the EU, representing approximately 29% of our population, as compared to 21% for the EU. In terms of future demographic trends, it is predicated that there will be a significant decrease in the number of young people across European societies over the next two decades, and that by 2031, the population pyramid for males and females will contain a greater number of older people than before (See Figures 2.1 & 2.2). It is timely, therefore, that family support is available to young people and their families as the youth of today are the parents of tomorrow.

**Figure 2.1**

Population pyramid for 1996 and 2031



**Figure 2.2**



Since the time of the philosophers, young people have been ‘branded’ as problematic. Plato, one of the best known 5<sup>th</sup> Century BC philosophers was concerned about the youth of the day and asked:

*“What is happening to our young people? They disrespect their elders, they disobey their parents. They ignore the law. They riot in the streets inflamed with wild notions. Their morals are decaying. What is to become of them”?*

With the emergence of the academic study of youth in the post World War II era, Skelton and Valentine (1988) suggest that little has changed with the concept of young people, with them still being seen as causing moral panics about one thing or another. Much of this negativity is reinforced by the mass media. To illustrate this, Devlin (2006) monitored Irish newspapers during March, July and November in relation to articles on youth, teens and juveniles. He found a total of 608 news items concerning young people were carried. After completing an analysis, Devlin categorised the 608 stories into a number of categories, namely:

- *Criminal and violent behaviour (32.7%)*
  - *Victimhood (31%)*
- *Vulnerability to health problems, homelessness (20.2%)*

- *Problematic Behaviour (5.2%) - alcohol, drugs, sexuality*
- *Good Behaviour (8.9%) – sporting, artistic, musical, political commitment*
  - *Attractiveness (1.2%) Style or attractiveness of young people*
    - *Miscellaneous (0.8%) General stories*

These results clearly show that almost 85% of the stories described young people to be perpetrators, victims of crime or as vulnerable in some way. Devlin concluded that news stories in Ireland tend to show young people as being problematic or having problems. Furthermore, 44% of the stories he investigated were about young males while 15% of stories were about young females. It was, therefore, not surprising that after conducting a series of focus groups with young people on the issue, Devlin found that in general, young people perceived adults as seeing them in a negative light.

The key point being made is that a considerable amount of research on young people has focussed solely on ‘*youth problems*’. Devlin (2006) suggests that little work has been completed on the normative aspects of the lived experiences of young people in Ireland, which is just as important. This was supported by a study completed by Cleary, McDonald & Forkan (1999) which stated that Irish society has lost touch with young people and tends to often categorise them according to simplistic stereotypes, and in doing so, over compensates for the negative components. In a sense, many people in society feel they ‘*understand*’ the lives of young people, but are in essence viewing a distorted caricature of young people.

As alluded to above, the changing nature of family has created a very different landscape for the young people of today, as compared to 20 years ago. Corcoran (2006) suggests that Ireland has witnessed a passing of the ‘*old orthodoxies*’, across the key social institutions, which can be summarised as follows:

- The Catholic Church has lost a considerable amount of its legitimacy and importance among the younger cohorts, in particular, due to its blatant stumbling from one crisis to another.
- In the realm of politics, tribunal after tribunal have shown to the world the less than ethical nature of some of our elected representatives.

- Irish culture, incorporating food, sport and music have been subjected to an ever-growing sense of globalisation, all resulting in questioning what exactly it means to be Irish.
- The old notion of accepting the way things are, has been replaced by a growing sense of individualism, promoting the dogma of more choice, be it in schools, hospitals or supermarkets.

The dissolving of these *'old orthodoxies'* has created a situation where Irish people are now provided with the opportunity to make their own value judgements and *"...develop their own normative positions"* (Corcoran, 2006: 3) in relation to life choices. Searching for a social compass to navigate this uncertainty is probably the biggest challenge facing our young people, with many young people experiencing a sense of normless-ness or anomie, a condition detected by Durkheim, over 100 years ago in the newly industrialising French society. In 1998, Hirsch published a study which she had conducted over a five-year period on a group of suburban adolescents in America. Her results, poignant as they are, are testament to the ultimate paradox in terms of social and economic development and its affect on some young people:

*"The most stunning change for adolescents today is their aloneness. The adolescents of the nineties are more isolated and more unsupervised than any other generations...not because they come from parents who don't care, schools that don't care, or a community that doesn't value them, but rather because there hasn't been time for adults to lead them through the process of growing up"*.

(Hirsch, 1998: 19-20)

In examining these changes as experienced by young Irish people today, Duncan (2003) suggests that there is nothing inherently damaging about the upending of the traditional systems of living in Ireland. However, Irish society, including young people, is struggling to understand the *"...responsibilities and vulnerability of economic success"*. In describing the lives of young people in Ireland, Duncan used a geomorphic analogy. He suggests that young people in Ireland are negotiating their lives along *'fault lines'*, like those found in an area of potential earthquakes. Two sets of forces are evident along these fault lines - on the one hand, once money is available to them, there is little that cannot be experienced. However, on the other hand, the possibility of a failed adult life looms, unless they sacrifice some of their youthful freedom and work at attaining a good level of education. It is, therefore, not

surprising according to Duncan, that young people find respite in drink, drugs and related activities.

The current generation of young people, *Generation Y* or *Generation Me*, as they have become known, have been researched considerably in the US since the mid to late 1970's. This has led to a wealth of useful information on what our young people are experiencing. It is only recently that this has been instigated in Ireland, with the first major longitudinal study set to conclude in 2012, which is a joint venture between the Children's Research Centre at TCD and the National Children's Office. Despite the lack of longitudinal empirical research, Sweeney & Dunne (2003) present a list of the key characteristics of Generation Y in Ireland:

- *Their parents are earning more than ever before and spending more on their children*
  - *Less quality contact time at home with their parents*
  - *Parents select schools and monitor their progress more than before*
    - *Their networks of kin are smaller*
    - *There is less of a religious influence in their life*
- *Their sense of moral guidance often comes from the media and their peers*
  - *There are weakened community ties.*

The *State of the Nations Children Report* (OMC, 2006) for Ireland has shown statistically that the top three issues affecting young people are *binge drinking, youth suicide, physical activity/poor diet (obesity)*. All of these factors, when combined with the changing nature of family, illustrate the obvious need for state support for families and young people.

## 2.3 Youth and Family Support Policies

As suggested in the introduction, any family support work is guided both by international and national policies and legislation. Over the past 10-15 years there has been a considerable expansion and development of the extent of child and family support services in Ireland. The groundbreaking introduction of Child Care Act (1991) legislation focussing on the protection of children was the first piece of child-oriented legislation passed in Ireland since 1908. This Act was a policy-watershed in youth and family support in Ireland, with numerous policies being implemented since then. A brief description of these will now be presented.

### *United Nations Convention on the Rights of the Child*

In 1989, the United Nations adopted its Convention on the Rights of the Child (UNCRC). “*The Convention has been ratified by 191 out of 193 countries, territories and states, making it a truly global bill of rights*” (UNICEF, 2007). Once the Convention, which is an agreement between countries to obey the same law, is ratified by a country, that country then becomes a State Party to the Convention, and is obliged to review its national law to ensure full compliance with the articles of the Convention. The Convention is grounded on the belief that for a child to develop, there are accepted pre-conditions that must be present and provided. In addition, the Convention recognises that children have a range of civil, economic, cultural and political rights. The Convention consists of 54 articles, with a “*child*” being defined as anybody under 18. The major provisions of the Convention are that (ibid):

- All rights apply to all children without exception or discrimination of any kind (Article 2).
- The best interests of the child must be a primary consideration in all actions concerning children (Article 3).
- States have an obligation to ensure as much as possible, every child’s survival and development (Article 6).
- Children’s views must be taken into account in all matters affecting them (Article 12).

From an Irish perspective, the UNCRC was ratified here in 1992. This gives credence to the belief that policy makers and service providers have become increasingly open to listening to young people in Ireland, over the last number of years. In the words of Lalor, de Roiste and Devlin, (2007:8), “*The UN Convention on the Rights of the Child is perhaps the most significant international event for children’s rights ever*”.

*Strengthening Families for Life (1998) – The Commission on the Family*

The Commission on the Family was established in 1995 with its aim being to examine the effects of legislation and policies on families and make recommendations to the government on how to strengthen the capacity of families to conduct their functions. The Commission's main findings are presented in terms of desirable outcomes for families and relate to building strengths in families, supporting families in carrying out their normal functions, promoting stability in family life and protecting the position of dependent and vulnerable family members and children.

*Children First Guidelines (1999)*

These guidelines were developed to help people, both professionals and those who come into contact with children, to identify and report child abuse. The guidelines stressed the needs of children and families and stated that a partnership approach must inform the delivery of services (Department of Health and Children, 2003).

*The Family Support Agency (2003)*

This Agency was established in 2003 by the Minister for Social and Family Affairs. The work of the Agency is grounded in the firm belief of the fundamental importance of families and family life for individuals, communities and society generally. As part of its work, the Agency brings together programmes and services introduced by the Government since 1997 which are designed to promote local family support, support ongoing parenting relationships for children and help prevent marital breakdown. The Agency also has a responsibility to undertake or commission research, to advise, inform and assist the Minister and to promote and disseminate information about family-related issues. (Family Support Agency, 2007)

*National Children's Strategy (2000)*

In 2000, the Irish government published '*Our Children – Their Lives: The National Children's Strategy*'. The Strategy came about after years of criticism of the various governments for not having a strategy in place for the co-ordination of children's services, inadequate procedures for listening to children, social exclusion and inadequate access to health and education facilities for minority groups. Considering this, "*The National Children's Strategy dealt with the broader issues of children's*

*care and well-being. It was designed to run until 2010*” (Lalor, de Roiste and Devlin, 2007: 283). From the outset, the Strategy (2000: 4) outlines its vision for the future:

*“An Ireland where children are respected as young citizens with a valued contribution to make and a voice of their own; where all children are cherished and supported by family and the wider society; where they enjoy a fulfilling childhood and realise their potential”.*

The introduction of the Strategy was very much related to the UNCRC and was Ireland’s way of ensuring the progression and implementation of the Convention. The Strategy introduced the concept of the ‘*Whole Child Perspective*’. In more specific terms, the *Whole Child Perspective* recognises the capacity of children to interact with and shape the world around them as they grow-up. It then goes on to identify a total of nine key dimensions of children’s development, from physical and mental well-being to social and peer relationships. It states that all of these dimensions of childhood development must be addressed if a child is to enjoy a satisfactory childhood and make a successful transition into adulthood.

## **2.4 Family Support and the Springboard Model**

This section examines the definition of family support, the development of the Springboard Model of family support as well as the key findings from the National Evaluation of the Springboard Model in 2001.

In their book on family support, Canavan, Dolan and Pinkerton (2000) suggested that as a concept, family support needed to find direction and overcome the tag of just being *warm and fuzzy* and having no real substance. Since then, the concept of family support in Ireland has become extremely important in terms of practice and policy. In 2006, the Irish Government commissioned a review of family support services. From this review, a definition of family support for Ireland was developed to be the following:

*“Family support is recognised as both a style of work and a set of activities that reinforce positive informal social networks through integrated programmes. These programmes combine statutory, voluntary, community and private services and are generally provided to families within their own homes and communities. The primary focus of these services is on early intervention aiming to promote and protect the health, wellbeing and rights of all children, young people and their families. At the same time particular care is given to those who are vulnerable or at risk”.*

(Dolan, Canavan and Pinkerton, 2006: 16)

Emanating from this definition, a set of ten practice principles for family support practitioners were developed, which are as follows:

1. Working in partnership is an integral part of family support. Partnership includes children, families, professionals and communities.
2. Family support interventions are needs-led and strive for the minimum intervention required.
3. Family support requires a clear focus on the wishes, feelings, safety and well-being of children.
4. Family support services reflect a strengths-based perspective which is mindful of resilience as a characteristic of many children’s and families’ lives.
5. Family support promotes the view that effective interventions are those that strengthen informal support networks.
6. Family support is accessible and flexible in respect of location, timing and setting and changing needs and can incorporate both child protection and out of home care.
7. Families are encouraged to self-refer and multi-access referral paths will be facilitated.
8. Involvement of service users and providers in the planning, delivery and evaluation of family support services is promoted on an ongoing basis.
9. Services aim to promote social inclusion, addressing issues around ethnicity, disability and rural/urban communities.
10. Measures of success are routinely built into provision, so as to facilitate evaluation based on attention to the outcomes for service users and thereby facilitate ongoing support for quality services based on best practice.

### **2.4.1 The Springboard Project Model**

In 1998 the Irish government launched Springboard, a family support initiative in fourteen locations across the country. In its call for proposals from potential Springboard Projects, the Department of Health and Children suggested that Project proposals should demonstrate an ability to achieve the following (McKeown et al. 2001):

- To identify the needs of parents and children in the proposed area. Specific attention given to those families where child protection concerns exist, to families with on-going health and welfare problems and/or families in once-off crisis situations.
- To target the most disadvantaged and vulnerable families in the area specifically focusing on improving parenting skills and child-parent relationships.
- To work in partnership with other agencies, key groups and individuals in the community and with families to develop programmes of family support services.
- To provide a direct service through a structured package of care, intervention, support and counselling to the targeted families and children, and to families within the wider community.

These overall aims were very much consistent with the approach suggested for family support services in the Commission on the Family (1998). Each Springboard Project combines the provision of a universal service to all families, parents and children in their area, with targeted provision which allows them to work with those who are most vulnerable. This dual way of working has ensured that since its inception, Springboard provides intensive support to the most vulnerable in society in a non-stigmatising way. A more detailed description of the Resource House Project is offered in Chapter 5.

### **2.4.2 Understanding Family Well-Being**

In December 2001, McKeown et al. published a national review of the Springboard Model. The evaluation focussed on 14 Springboard Projects, all based in cities and large towns, of which the Resource House Project was one. The evaluation set out to answer the following two questions:

- a. *Has Springboard improved the well-being of children and parents?*
- b. *How have its services been received?*

The final evaluation presented a profile of the families who attended the 14 Springboard Projects with data on family size, employment status sources of income and occupation of parents. One of the core findings of the evaluation was that “...parents and children experienced considerable improvements in well-being while attending Springboard between January 2000 and May 2001” (McKeown et al. 2001: 118). Despite this, the authors noted that family support is an umbrella term covering a wide range of interventions, which vary according to the target group. As the evaluation was a national one, without separate evaluations of the different interventions in use across the 14 Projects, it was impossible to determine between the effective and ineffective interventions. In a later paper, McKeown, Haase and Pratschke (2006) made the following additional points:

- Children and parents with serious problems cannot expect a ‘miracle cure’ from a Project such as Springboard.
- Childhood experiences of parents, impacts on the childhood experiences of their own children. “*This finding is a powerful illustration of how family systems function over time and a strong argument in favour of intervening to break the harmful inter-generational cycle of family dysfunction*” (ibid: 26)
- The results also showed much variation between Parents, Springboard Staff and Teachers on the definition of a ‘*child with problems*’. For example, Parents tended to see younger children as more likely to have severe problems, while Springboard Staff assessed older children as the most likely to be in the problem category. Therefore, the concept of ‘*what is normal*’ for children is indicative of the complex issues involved when intervening with families.

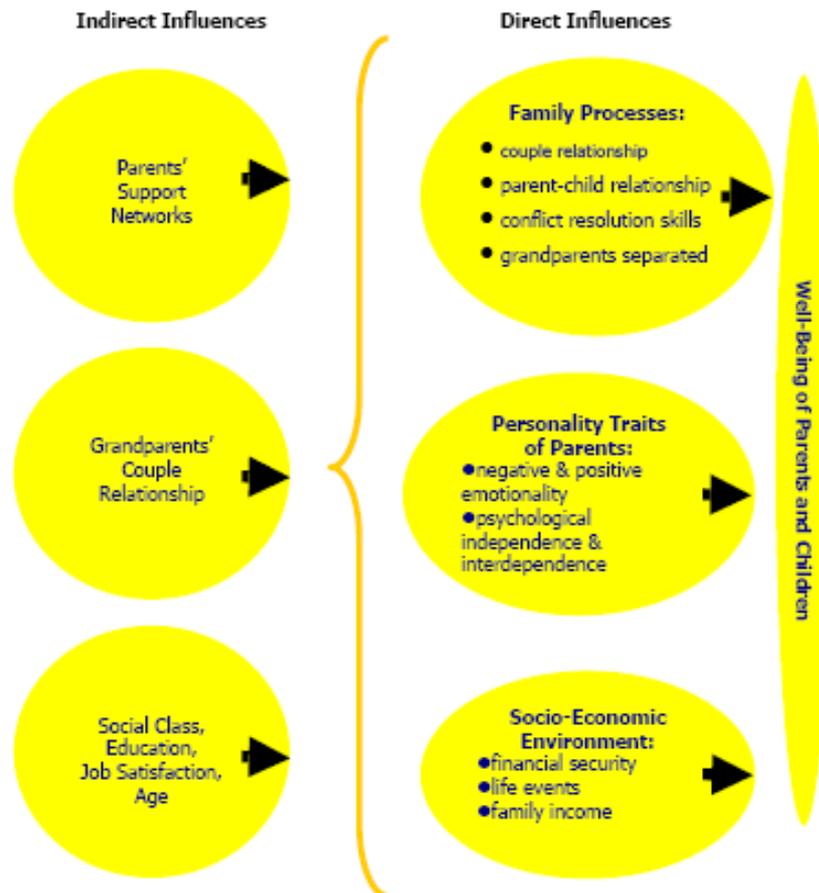
In a follow-up study for the Ceifin Institute in Ennis on what makes a difference in family-well-being, McKeown, Pratschke and Haase (2003) reported on study of 1,500 households where there was at least one child under the age of 18. The authors found that child well-being is almost exclusively in the hands of their parents, finding four factors to be key:

1. *The Presence of Unresolved Problems between Child and Parent* – The less problems reported by the child, the more of an increase in their life satisfaction.
2. *The Characteristic of the Mother* – These included good physical and psychological well-being, supportiveness to her child, satisfaction with being a parent and her skills in resolving conflict with her partner.
3. *Father's Supportiveness* – Despite the fact that in general, fathers exercise less influence on their child's life as compared to the mother, their supportiveness increases the child's life satisfaction and reduces psychological disturbance.
4. *Family Income* – Children exhibit less psychological disturbances as family income rises.

In relation to both parent and child well-being, the study showed that their physical and psychological well-being is primarily shaped by dynamics within the family (See Figure 2.3 - (Source: McKeown, Pratschke and Haase, 2006: 11). However, parents support networks, the quality of the grandparents' couple relationship and social class position have the most powerful indirect effect.

**Figure 2.3**

*Model Summarising the Direct and Indirect Influences on Family Well-Being*



In conclusion, the authors suggest that “*These findings have important implications for family policy by drawing attention to the need for measures which develop and support relationship skills since these are crucial in determining the well-being of families*” (ibid: 12)

## **2.5 Measuring Outcomes in Family Support**

This section introduces the notion of measuring outcomes in family support and how it is now beginning to become part of family support practice in Ireland.

### **2.5.1 ‘Social Accounts’ and Well-Being**

Bruner (2006) argues that the focus of family support programmes should be to help its members thrive and achieve better life outcomes. While it is generally recognised that family support is an essential tool to help families thrive, “*it is not clear whether and how family support programs can build or strengthen the support for families*

*within the communities they serve*” (ibid: 238). One of the ways to assess the role of family support programmes in the lives of the families it works with is with the aid of programme evaluation. Bruner (2006) suggests that it is essential for the family support discipline to continue to improve its methods of evaluation as traditional evaluations of family support programmes focussed on measuring ‘*inputs and processes*’. However, Bruner suggests that evaluations should measure the ‘*impacts and results*’ for the families involved. This ensuing outcomes-based evidence would inform funders of family support programmes in deciding on whether or not to continue funding the specific programmes while also providing ‘*better guideposts*’ for policy makers and practitioners as to what works and has the most impact on families.

In a similar vein, in order to achieve the positive life outcomes for children as outlined in the UNCRC, policy makers, service providers, and practitioners need to subject their work to these questions (Bradley, 2008: 3):

- Are we making a positive difference for children (*as a result of planning for the right outcomes?*)
- Will we know it (*by monitoring achievement of agreed outcomes*)
- How will we measure this (*through evaluation that gets us to full information or “the true story behind the apparent story”*)

Questioning of this type shows that society has moved beyond merely measuring basic needs and survival outcomes of children, to a more strengths-based perspective. According to Fattore et al, (2007), the use of well-being outcome indicators grew from the 1960’s, on the back of the belief that if the indicators were well constructed and measured consistently, they would help inform society about the quality of life of the group in question. Over the last decade or so, there has been a move towards ‘*counting children in*’, with Ben-Arieh and Goerge (2001) identifying over 130 reports aimed to document and monitor the well-being of children.

In discussing the concept of well-being for children, Land, et al, (2007) noted that indicators of child and youth well-being can be used to describe the conditions of children, monitor and track outcomes and set goals. The first major publication on ‘*Social Indicators*’ was written by Bauer in 1966, where social indicators were meant to be a statistical series, that allow society to assess where it stands and is going in

relation to values and goals. Bauer's work highlighted the absence of a system of charting social change and thus a call for a system of social accounts was made. In 1969, Olson published *Toward a Social Report* which examined such issues as health and illness, public order and safety to income and poverty. All of this work linked the notion of social indicators and social accounts to the idea of social enlightenment and progress for children and families.

### **2.5.2 International Efforts – Using Outcomes to Track Well-Being**

A number of methods of tracking outcomes for children and families who are involved with youth and family support programmes have been developed. In the UK for example, Ward (1998) suggested that it has only been in the last 20 years or so that child welfare services and their management have tried to evaluate their outcomes or effectiveness. This has been further pushed-on by the growth in consumerism and the demand for all types of services, not just welfare based ones, to meet the needs of the clients they serve. As a result, in 1987, Ward was involved in developing the "*Looking After Children Project*". This was a Project aimed at measuring outcomes for children in state care across key "*developmental dimensions*" along which children need to progress, if they are to achieve long term well-being in adulthood. The developmental dimensions were *Health, Education, Identity, Family and Social Relationships, Social Presentation, Emotional and Behavioural Development and Self Care skills*. The Project has since been mainstreamed across the UK and is proving to be a very useful method of tracking outcomes.

Within the EU, Bradshaw et al (2007) reported on the *EU25 Child Well-Being Index*, which has been recently developed by the EU. The Index measures well-being for children across 8 clusters, namely, Material situation (poverty, deprivation, workless families, income levels), Housing (living conditions and housing problems), Health, Subjective Well-being, Education, Children's Relationships (within the family), Civic Participation (civic activities and political interest) and Risk and safety. These clusters cover 23 domains and have 51 indicators. When collated, the figures will illustrate the type and rate of change in these outcomes for children across the EU, the results being linked to policy implementation if needed.

A number of indices and outcome measuring tools have also been developed in the US. One of the best known examples is the *Child and Youth Well-Being Index (CWI)*. It was developed by Land and others to measure change in child and youth well-being from 1975 up to today and is:

*“...a composite measure of trends over time in the well-being of America’s children and young people, one that consists of several interrelated summary indices of annual time series of numerous social indicators of the well-being of children and youth in the United States”.*

(Land et al, 2007: 111)

The CWI is designed to measure the rate of change among children and young people; whether well-being is improving or dis-improving; in what domains this is occurring and for what specific socio-economic groups. The CWI is built around a total of seven quality of life domains, namely, Family economic well-being, Health, Safety/behavioural concerns, Educational attainment, Community connectedness (participation in schooling or work institutions), Social relationships (with family and peers), and Emotional/spiritual well-being. Data for these 7 domains are gathered across 28 national level key indicators, from annual time series, for example vital statistics and sample-based surveys.

Another well known system of tracking well-being for families and young people in the US has been the *Vermont Communities Count Project*, spearheaded by Con Hogan. In the early 1990’s, various agencies in Vermont State began working together to more effectively deliver services to children and families. *“To track the effectiveness of these efforts, Vermont and its communities began using indicators of well-being to track outcomes (also known as results-based accountability)”.* (Hogan, 1999: Preface). The belief of those involved was simply that organizing at the community level around basic agreed broad outcomes, linked to specific indicators, could result in an improved quality of life for people in the community and state.

The Project developed 8 key outcomes it wanted to achieve for families and young people in Vermont State (See Figure 2.4). For each outcome, they included indicators which were a way of measuring success.

*“In a business environment, an enterprise that has no indicators to adequately describe its direction — in terms of sales, cash flow, target markets, etc. — probably will not succeed. The same is true of government. Tracking*

*indicators and outcomes should be at the center of all of our work — yet it is one of the things that government at all levels has not done well”.*

(Hogan, 1999: 11)

Hogan noted that indicators can:

- Provide information on where society has been, where it is and where it wants to go.
- Help society understand how it is doing when compared to others.
- Over time, provide the basis for a cost-benefit analysis.
- Be an impetus for community motivation and change.
- Make the public more confident in government policy.
- Move investment forward in prevention and early intervention.

As well as achieving increased community well-being, the model introduced in Vermont also had huge economic consequences. For example, the model has had a direct impact on lowering the rate of teen pregnancy in the state. The estimated cost to the exchequer of a teen pregnancy per year is almost \$20,000. Since the Vermont model came into being, the number of teen pregnancies has fallen down by 36% in eight years.

**Figure 2.4**

*List of Outcomes and Indicators as used in Vermont Project*

**Outcome 1: Pregnant Women and Newborns Thrive**  
*Indicators:*

- Percent early prenatal care
- Percent low birthweight

**Outcome 5: Children Live in Stable, Supported Families**  
*Indicators:*

- Percent children in poverty, 1989
- Percent children in families receiving Food Stamps (proxy for children in poverty)
  - Percent child support paid
  - Rate of child abuse and neglect
- Rate of out-of-home placements (ages <18 years)
- Average number of moves within the child substitute care system

**Outcome 2: Infants and Children Thrive**  
*Indicators:*

- Infant mortality rate
- Rate of injuries (ages 0–9) resulting in hospitalization
  - Child mortality rate

**Outcome 6: Youth Choose Healthy Behaviors**  
*Indicators:*

- Percent of students smoking cigarettes within the last 30 days
- Percent of students using alcohol within the last 30 days
- Percent of students using marijuana within the last 30 days
  - Rate of teen sexually transmitted diseases
  - Rate of young teen pregnancy (ages 15–17)
- Rate of injuries (ages 10–17) resulting in hospitalization
- Rate of custody for children deemed “unmanageable”
  - Rate of court dispositions for delinquency
    - Rate of delinquents in custody
    - Rate of teen violent deaths

**Outcome 3: Children Are Ready for School**  
*Indicators:*

- Percent of kindergartners fully immunized
- Percent of children ready for kindergarten

**Outcome 7: Youth Make a Successful Transition to Adulthood**  
*Indicators:*

- Percent of high school seniors with plans for education, vocational training or employment
  - Rate of new families at risk
- Rate of out-of-home placements (ages 18–24)
- Rate of injuries (ages 18–24) resulting in hospitalization
  - Rate of teen nonviolent deaths

**Outcome 4: Children Succeed in School**  
*Indicators:*

- School attendance rate
- New Standards English/Language Arts assessment scores
- Arts assessment scores
- New Standards Math assessment scores
- Percent of students with special education IEPs
- Scholastic Assessment Test scores
- Percent high school dropouts

**Outcome 8: Families and Individuals Live in Safe and Supportive Communities**  
*Indicators:*

- Rate of injuries (ages 25–64) resulting in hospitalization
- Rate of injuries (ages 65+) resulting in hospitalization
  - Rate of out-of-home placements (ages 25+)
    - Percent of adults who smoke
  - Percent of adults who are “binge drinkers”
- Rate of petitions filed for relief from domestic abuse
  - Rate of adult abuse and neglect reports
    - Rate of suicide (ages 18+)
    - Rate of violent crime
  - Percent of people above poverty level
  - Average median household income
    - Average annual wage
    - Rate of job creation
  - Percent living in affordable housing
    - Percent of affordable housing
  - Percent met need for child care

### 2.5.3 ‘Social Accounts’ and Well-Being in Ireland

Up until very recently, one of the primary criticisms of support services for children and families in Ireland is that they were often ‘*service-led*’. However, with the introduction of the National Children’s Strategy (2000), there has been a growing recognition of the need for agreement on the methods on how best to achieve and track outcomes for children and families.

#### a. The State of the Nation’s Report (2006)

According to Hanafin et al. (2007), the National Children’s Strategy called for a system to be put in place to measure outcomes for all children in Ireland. This subsequently led to the publication of the *State of the Nation’s Report* (OMC, 2006). This move by Ireland reflects a growing national and international awareness of the need to better understand the complex nature of children’s lives. Prior to the NCS (2000), there was no overall policy in existence that related to the measurement of child well-being.

The first *State of the Nation’s Children Report* was published in 2006. In the Foreword of the Report, the then Minister for Children, Brian Lenihan, commented that:

*“This report fulfils a commitment in the National Children’s Strategy to the publication of a regularly updated statement of key indicators of children’s well-being. As the first such report on children in Ireland, it provides us with a benchmark for the future and gives us a clear picture of the progress we have made and the challenges that lie ahead”.*

In Part 3 of the State of the Nation’s Children report, the *Children’s Outcomes* are categorised according to *health, education, and social, emotional and behavioural* outcomes. Areas covered include the use of tobacco, alcohol and drugs; teenage pregnancy; chronic health conditions; educational attainment; and reported levels of happiness. Figure 2.5 shows an extract from State of Nation’s Report, relating to Social, Emotional and Behavioural Outcomes. Self-esteem for example is an indicator that in this case measures the numbers of children from 8-17 who feel happy with the way they are. The report then gives a description of the key findings and offers comparisons between boys and girls. The data source and the year of publication is also given. When viewed as a totality, the continual updating of the

State of the Nation’s Report will clearly illustrate the trajectory of change for Irish children in families into the future.

**Figure 2.5**

*Children’s Outcomes - Social, Emotional and Behavioural*

Indicator	Measure	Description	Comparisons	Data Source	Year
Self-esteem	The proportion of children aged 8-17 who report feeling happy with the way they are.	51.1% of children aged 8-11 report to always feel happy with the way they are, compared with 25.5% of children aged 12-17.	More boys report being happy than girls. A higher percentage of younger children (8-11 years) report being happy than older ones.	KIDSCREEN	2005
Self-reported happiness	The proportion of children aged 10-17 who report being happy with their life at present.	In 2002, 89.5% of children reported that they were happy with their life at present.	In 2002, girls aged 10-11 were most likely to report being happy, while girls aged 15-17 were least likely to report this.	Health Behaviour in School-aged Children (HBSC) Survey	2002
Youth suicide	The number of suicides among children aged 10-17, expressed as a proportion of all children in the same age group.	In 2004, there were 18 suicides among children under 18. Youth suicide accounted for 22% of all deaths in the 10-17 age group.	The youth suicide rate is higher for boys (6 per 100,000) than for girls (1.8 per 100,000).	Vital Statistics	2004

**b. The Agenda for Children’s Services (OMC)**

In December 2007, the Office of the Minister for Children published *The Agenda for Children’s Services: A Policy Handbook*. The overall purpose of the document is to “... set out the strategic direction and key goals of public policy in relation to children’s health and social services in Ireland” (ibid: 2). The document re-emphasises the commitment to the delivery of evidence based and outcomes focussed services to children, families and their communities in Ireland.

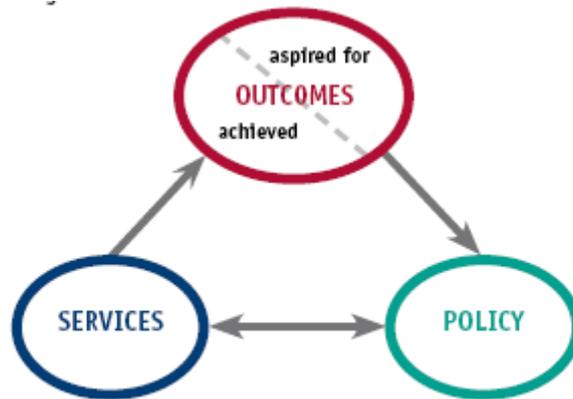
The *Agenda* document suggests that outcomes for children and families are about both what is happening now in their lives and what may happen them in the future. Therefore, outcomes address both the ‘being’ and ‘becoming’ of childhood. The *Agenda* presents the key outcomes being sought for children in Ireland as follows:

**Figure 2.6**

- The 7 National Service Outcomes for Children in Ireland**
- healthy, both physically and mentally
  - supported in active learning
  - safe from accidental and intentional harm
  - economically secure
  - secure in the immediate and wider physical environment
  - part of positive networks of family, friends, neighbours and the community
  - included and participating in society

Each of these outcomes is framed as active, strengths-based and positive, the idea being that all children’s services will strive to achieve these outcomes. Furthermore, as shown in Figure 2.7, the Agenda points out that these outcomes will only be realised when policy and services work together efficiently and effectively.

**Figure 2.7**



(Source: OMC, 2007: )

The final section of the *Agenda* document pointed out that in order to promote the 7 National Service Outcomes for Children, all services need to achieve 5 essential characteristics (ibid: 16):

1. Connecting with family and community strengths.
2. Ensuring quality services.
3. Opening access to services.
4. Delivering integrated services.
5. Planning, monitoring and evaluating services.

## 2.6 Conclusion

This chapter provided a contextual overview for the study, by introducing four main areas. The initial section focused on *Families and Young People in Contemporary Ireland*, examining the changing nature of family, as well looking at the key issues being experienced by contemporary young people. Key international and national policies and legislation formed the second section, while the third section examined the definition of family support, the development of the Springboard Model of family support, in addition to the key findings from the national evaluation of the Springboard Model in 2001. The final section introduced the notion of ‘*social accounts*’ or measuring outcomes in family support and how this way of working has permeated its way into family support policy and practice in Ireland. Many of these issues will be returned to in the concluding chapter.

# **Chapter 3**

## **The Resource House - Its Community**

### **3.1 Introduction**

As outlined in Chapter 1, one of the core needs of the evaluation process was to describe the Project Model as operated within the Resource House Project. Prior to the presentation of this information in Chapter 4, this chapter focuses on describing the socio-demographic and geographical context within which the Resource House is based.

The Resource House Project was created to provide a broad range of family support services to families, adults and children across Sligo town. Figures relating to the families who used the Project in 2006 showed that 55% of families came from the general Cranmore Area. In more specific terms, of this 55%, 39% came from the greater Racecourse View Area (Racecourse View, Langan Drive, Mc Neill Drive, Benson Drive and Carroll Drive), with the remaining 16% of families coming from the wider Cranmore area. The other 45% of families came from outside Cranmore.

Due to the fact that 55% of those who use the Resource House Project are from the general Cranmore Area, the nature and extent of the work engaged in by the Project, is largely influenced by the needs specific to that community. In this section, a profile of Cranmore will be given in order to provide a context for the work of the Resource House.

### **3.2 The Cranmore Community**

The Cranmore estate can be found in the East Ward of Sligo Borough. The East Ward (population 5,568 - 2002 Census) stands out as having the highest rate of unemployment of any area in the county. Within this ward there is a high percentage of local authority housing with Cranmore being the single biggest housing estate. Indeed, Cranmore is the biggest local authority housing estate in the North West, with 511 houses and a population of approximately 1,500.

The development of the Cranmore estate started in the early 1970s and since then the estate has been developed through five construction stages, the last of which was

completed in 1985. In 1998 Local Authority housing stock in Banks Drive (now known as Racecourse View) was transferred to Clúid Voluntary Housing Association (formerly St. Pancras). An extensive refurbishment Project was carried out by Clúid in the summer of 2001. This refurbishment involved the renovation of 42 existing houses and the construction of a further ten new premises. It is here that the Resource House Project is located.

Although the economy has improved considerably throughout Sligo in recent years, there is sufficient statistical evidence to demonstrate that the benefits of economic success have been substantially absent from the Cranmore area. In terms of unemployment, the rate for the East Ward<sup>2</sup> was 12.9% in 2002, higher than the other two wards in Sligo town.. This had declined to 11% in 2007. Coupled with this, 15.6% of households in the East Ward are headed by a lone parent (2002).

In 2005, Sligo Borough Council consulted with residents to ascertain the key issues affecting their lives in the estate. Some of the key areas listed were a poor image of the estate due to the repetition of houses and the number of derelict houses; litter; certain areas were points of congregation for young people leading to anti-social behaviour, back alleyways; lack of recreation areas for young people and a brutal hard concrete environment. In an attempt to overcome these issues and revitalise the area, the Cranmore Regeneration Project, which is an initiative of Sligo Borough Council, was initiated in 2004. It came about through dialogue between the RAPID Programme and Sligo Borough Council and incorporates a multi-agency and community approach to tackling the key issues listed above. As Cranmore only constitutes part of the East Ward in Sligo, no Cranmore Specific data was available from the 2002 Census. Considering this, a door-to-door survey was conducted with all 511 households in the Cranmore area from December 2005 to January 2006 (Forkan, 2006). The following is a summary of the key findings.

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<sup>2</sup> Due to the confidentiality policy of the Central Statistics Office, it was not possible to obtain Cranmore-specific small area population statistics (SAPS). Therefore, the East ward is the smallest sub-set available.

Age Structure - The 17-28 and 41-55 age cohorts are the most common age profiles in Cranmore. A significant change since a previous local survey was completed in 1995 is that the number in the 0-4 age cohort has risen from 8.5% in 1995 to 9.1% currently.

Education - The most common age at which the residents had completed their education was 16 years of age (24.8%). The vast majority of residents had a lower secondary education (46.8%), that being a Junior or Inter Certificate. Only just over one fifth (22%) had achieved a Leaving Certificate and an even smaller number (3%) a Primary Degree.

Work Status - The results showed that 11% were unemployed, 9% were based in the home looking after their home/family, while 56% were working for payment or profit. When compared to the 1995 survey of Cranmore, it appears that the number of those unemployed has decreased from 38% to 11%, while those in employment has risen from 23% to 56%.

Sense of Community and Stability – One of the most striking findings to emerge was that 44% of those surveyed had lived in Cranmore for 16-35 years. As a further 32% had lived there for up to 10 years, the figures revealed a community that is indeed very well established and considerably well-rooted to the area. When asked where they saw themselves living in the foreseeable future, the results again showed a *rooted-ness*, as 57% stated that they intended staying on living in Cranmore for the foreseeable future with only 9% of residents seeing themselves as moving out of Cranmore in the foreseeable future. It should be noted though that 34% of those surveyed were undecided as to what to do.

Quality of Life for Residents – When asked about their perceived quality of life, 46% described it as *'excellent/good'*. When asked to give reasons for this, having good neighbours and the fact that their area was quiet were the main reasons given. For those who had a poorer quality of life, living in a *'shabby area'* with regular occurrences of *'antisocial behaviour'*, were cited as the main reasons for not experiencing a good quality of life.

### **3.3 Building on its Strengths**

Two main conclusions are clearly obvious from the above data. Firstly, Cranmore has a number of key social and economic issues that have the potential to impact upon the work of the Resource House. For example, housing concerns, educational needs and up-skilling/work form the core of these needs. Secondly, Cranmore is a COMMUNITY, backed up by the quality of life felt by residents and the stability of residence as shown by the wish of the majority of residents to stay on living in the area. It is the view of the author that the potential inherent in this latter conclusion far outweighs the potential damaging effects of any socio-economic issues faced by residents.

# Chapter 4

## The Research Process

### 4.1 Research Advisory Group

As pointed out in Chapter 1, this evaluation began in January 2006 and ran over two years up until December 2007. An initial meeting was held in early 2006 between the CFRC, the HSE and the Resource House Project Management/Staff. The initial task saw the aims and objectives being agreed between all parties. In addition, it was decided that in line with good research practice, a *Research Advisory Group* (RAG) would be established to advise and support the researchers from the CFRC in conducting the evaluation. The membership of the RAG consisted of representatives from all the main stakeholders of the Resource House Project, namely:

- Nike Ogun (*Service User*)
- Ronnie Snee (*Service User*)
- Ann Lawrence (*Service User*)
- Sharon Kearns (*Service User*)
- Ray Colburn (*Service User*)
- Des Keaney, (*Community Worker, HSE NW and Board of Directors, Resource House Project*)
- Bridget Myles (*Probation Officer, Sligo and Board of Directors, Resource House Project*)
- Paula Gorman (*Project Manager, Resource House*)
- Colleen Sheerin (*Project Worker, Resource House*)
- Ria Opgenhaffen (*Team Leader, Social Work Department, HSE, NWA*)
- Dessie McGarry (*Sligo Borough Council & Board of Directors, Resource House Project*)
- Maeve Whittington (*Development Worker, Sligo Social Services Council Ltd. and Board of Directors, Resource House Project*)
- Mary McHugh (*School Completion Programme and Board of Directors, Resource House*)
- Cormac Forkan (*Lead Researcher, CFRC, NUI Galway*)

At the first meeting of the RAG, the Terms of Reference for the Group were discussed (See Appendix 1). It was agreed that the group would meet at least four times during the course of the research, to support and advise on the *Completing Research Design, Data Collection, Final Analysis of Research Findings and Format of Final Report*. It was also agreed that the RAG would not have a management function over the researchers from the CFRC.

## 4.2 Ethical Considerations

As suggested by the Sociological Association of Ireland (SAI) in their Ethical Guidelines, “*The integrity of sociological enquiry and the freedom to research, study, and publish the results of research is a major concern of sociologists*”. Therefore, throughout this evaluation process, the work of this author was guided by the ethical standards of the SAI. In general, ethical guidelines ask three main questions (Bryman, 2002):

### 1. *Was there a lack of informed consent or deception?*

In advance of any of the data collection sessions for the evaluation, all participants were informed about the aim of the evaluation, the process of data collection as well as the fact that they were not obliged to answer any question if they so wished and that they were free to decline the invitation to participate. When dealing with children, written parental consent was sought prior to the data collection. In addition, on the day, each participant, child and adult, was asked to read a Consent Form and sign it to show they knew what they were asked to become involved in (See Appendix 2). In this way, there was no deception by the researchers of any of the adults or children involved in the evaluation process.

### 2. *Was there harm to participants?*

As part of the evaluation, the researcher always guarded against any consequences for research participants which could have been predicted to be harmful. A plan was put in place to deal with any possible upset for any participant, arising from their participation in evaluation interviews. The process was also guided by *Children First National Child Protection Guidelines*, for dealing with any disclosures made during interviews with regard to child protection. All of this ensured that the participants were not harmed in any way.

### 3. *Was there an invasion of privacy*

All of the information shared by participants during the evaluation process was treated as confidential. No information was shared with anyone outside the CFRC, except in aggregate form as part of report findings. No research participants will be identified in this evaluation report as every effort has been made to ensure that the individual stories of young people or their families are not identifiable. Due to the nature of the

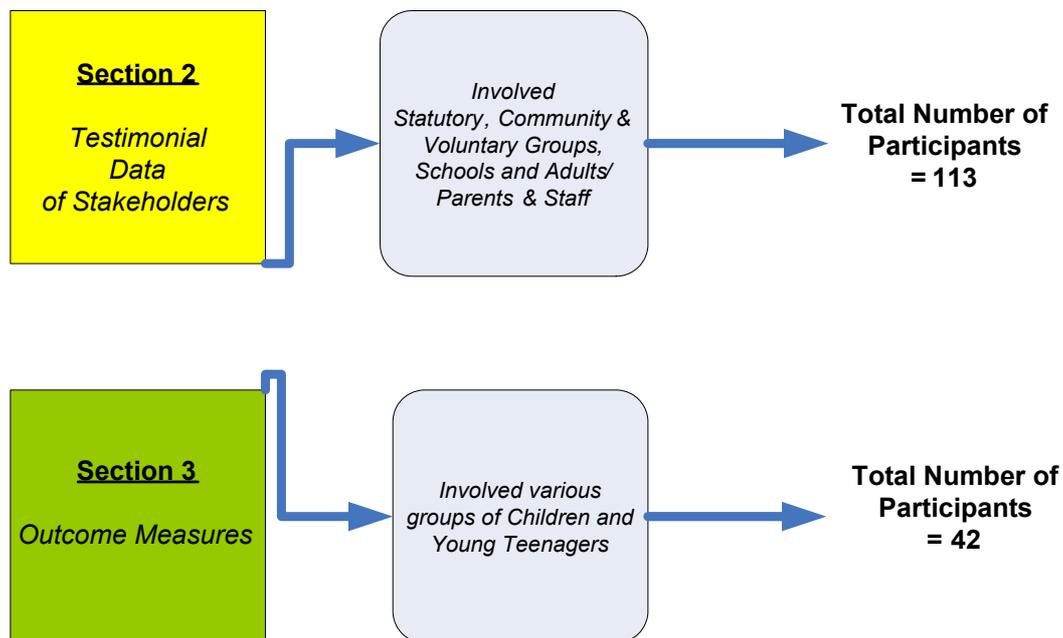
process, apart from young people and their families, anonymity of other stakeholders cannot be guaranteed.

### 4.3 Number of Participants in the Evaluation

In the subsequent chapters, detailed information will be given on the types of research methods used to collect the data necessary to answer the objectives of this research, as outlined in Chapter 1. In addition, micro-level information will also be presented on the numbers of people who participated in the data collection phases of the evaluation.

However, Figure 4.1 provides a macro view of the core areas of data collection in this evaluation. Testimonial data were collected from key stakeholders as well as outcome level data from young people involved with the Resource House Project. A total of 155 people took part in these two phases of the evaluation. A more detailed analysis of these figures will be given in chapters 6 and 7.

**Figure 4.1**  
*Numbers of Participants in Evaluation Process*



# Chapter 5

## Description of the Resource House Project Model

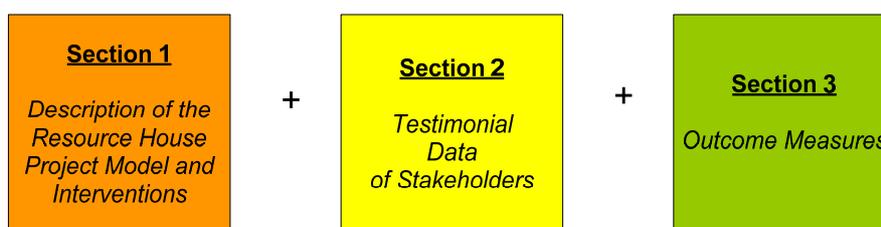
### 5.1 Introduction

As described in Chapter 1, the overall aim of the evaluation was to *conduct a comprehensive review of the work of the Resource House Project*. As part of this process, it was agreed by the RAG that one of the most important tasks of the evaluation would be to describe the model of family support as operated by the Resource House (See Figure 5.1). As suggested by Bruner (2006: 237)

*“Family support programs defy neat categorization. Their defining characteristic is that they adhere to family support principles in working with families - taking an ecological focus, building on strengths and partnering with families in defining and reaching goals”*

Therefore, the overall reason for undertaking this task was to reveal the intricate nature of the work of the Resource House as well as helping the Project Staff to reflect on the principles underlying their current work patterns. This chapter focuses on three components of the Resource House’s Project Model, those being the range of programmes offered, logging the Project’s family support work and case vignettes.

**Figure 5.1**  
*Key Components of Springboard Evaluation*



### 5.2 Aims of the Resource House Project

Of the 14 Springboards established throughout Ireland in 1998, one of them was the Resource House Project in Sligo. The new Project in Sligo incorporated an already existing Community Resource House at 35 Banks’ Drive, Cranmore, which was established in 1996. The Resource House was set up in consultation with local residents, Sligo Corporation, Sligo V.E.C., Sligo Leader, Sligo Social Services Council Ltd., St. Vincent de Paul Society and with grant-aid, donations and support from many groups. As part of its service, it provided family support services on a

small scale. The demand for these services rose quickly. The transition from Community Resource to Community-based family support initiative has, at times, presented difficulties for those involved. However, as noted in their 2003 Annual Report, “...we view our inclusion in Springboard as developmental rather than as outright change in our policy and ethos”.

Following their successful application in 1998 for inclusion in the new “*Family Support Initiative*”, the new Springboard Project was fully funded by the Department of Health and Children over a three-year pilot phase (1999-2001). After the publication of McKeown et al.’s National Evaluation of the Springboard Model, the Sligo Project was continued. The Resource House Project is located in Cranmore, a Local Authority housing estate in the East Ward of Sligo town. As discussed in Chapter 3 above, the area has long been identified as disadvantaged and is targeted under the RAPID Programme. A report entitled *Sligo Speaks* (1995), the Cranmore Community Survey (1996), surveys by the Co. Sligo Leader Partnership (1997), the E.S.R.I. (1999) and Forkan (2006) all highlight prominent levels of socio-economic deprivation, unemployment and early school-leaving/poor school attendance, social welfare dependency and poor service uptake. The Resource House initially accepted referrals from five drives in the Cranmore area but it now works with families from all areas of Cranmore, and accepts referrals from other parts of Sligo town.

Since becoming a Springboard Project in 1998, its work has been underpinned by the following mission statement:

*“In recognition that all families experience stress at one time or another, The Resource House Project will provide community-based and intensive support for families within Sligo town who may require our assistance. The Project will encourage and empower individuals and families by enabling them to draw on their strengths to avert potential crises. We recognise and celebrate all aspects of diversity and individualism”*

Related to this, the stated aims of the Resource House Project are as follows:

1. In recognition that all families undergo stress at some stage, we work to support and empower each family, and each member in achieving their full potential.
2. To liaise closely with the community and with other involved agencies in developing programmes to meet identified needs and to work in co-operation with other agencies to ensure that families get the best possible supports.
3. To encourage social integration and promote inclusiveness.
4. To promote individual, familial and community development.

### **5.3 Log of the Resource House Project's Family Support Work**

To facilitate the understanding of the work engaged in by the Resource House Project, it was decided to develop a method of logging the range of programmes and activities provided by the Project. In January 2007, each member of staff was asked to keep a diary over that month, outlining the work they carried out on a daily basis. The staff group was given a *carte blanche* regarding how they recorded their work details, with this strategy being informed by the principles of the Delphi Research Technique (Bryman, 2002).

Subsequent to this logging exercise, the researcher collected the diaries and reviewed the content in an attempt to standardise it. By adapting and adding to previously developed logging methods (Weinberg et al. 2003), a draft of the *Logging Tool* was developed (See Figure 5.2). The Logging Tool categorised all of the work done by staff over January, into 11 different categories ranging from one-to one *Scheduled work with adults and children* to *Group Work* to *Programming Planning and Evaluation*. This was then further broken down by each day of the week.

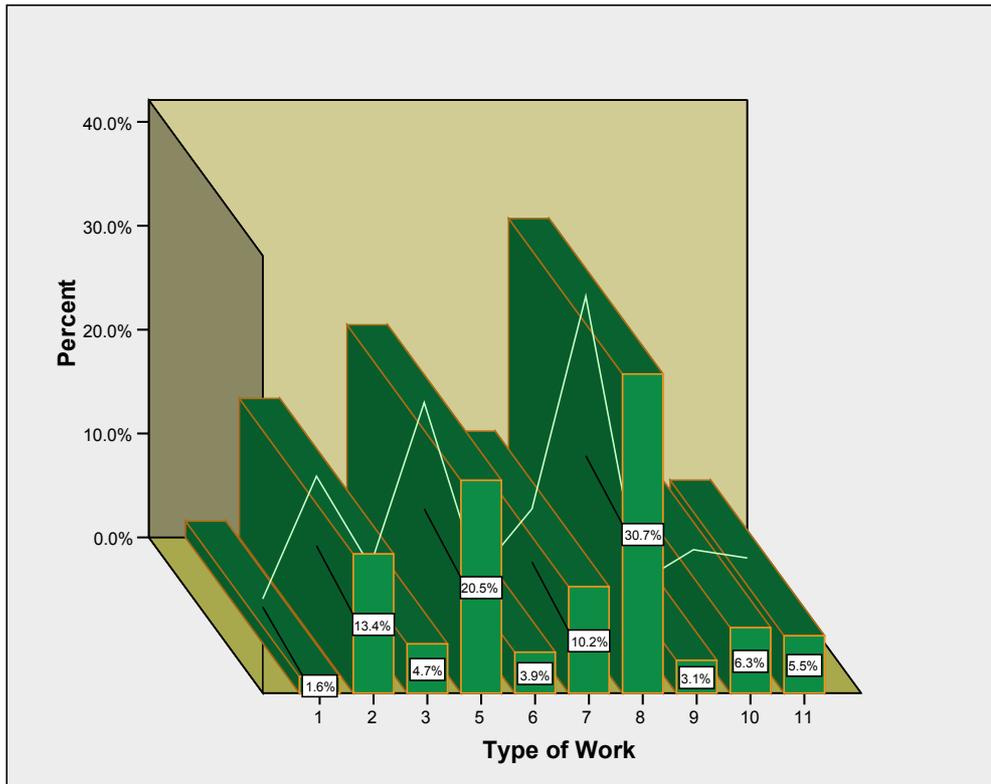
**Figure 5.2**

Resource House Springboard Project, Sligo Log of Family Support Work											
Days & Date	Type 1 <i>1-1 Scheduled Work with Adults &amp; Children</i>	Type 2. <i>Un-scheduled Work – Adults &amp; Children</i>	Type 3 <i>Group Work</i>	Type 4 <i>Staff Supervision</i>	Type 5 <i>Informal Staff Support (Discussions &amp; Information Sharing)</i>	Type 6 <i>Interagency Work</i>	Type 7 <i>Housekeeping</i>	Type 8 <i>Admin</i>	Type 9 <i>Staff Training</i>	Type 10 <i>Programme Planning &amp; Evaluation</i>	Type 11 <i>Facilitating Community to use Resource House Facilities</i>
Monday Date: _____ No. of Staff _____											
Tuesday Date: _____ No. of Staff _____											
Wednesday Date: _____ No. of Staff _____											
Thursday Date: _____ No. of Staff _____											
Friday Date: _____ No. of Staff _____											

To apply the Logging Tool to practice, it was agreed that the Administrator, Project Workers (x2), Programme Support Worker and the Manager would keep a record of their work for one day, the 6<sup>th</sup> December 2007. Subsequent to an analysis of each of their Logs, Figure 5.3 shows the cumulative work undertaken by the staff members in question on the day. As one can see, over 50% of the entire work of that day was made up of a combination *Administration* (Type 8) and *Informal Staff Support* (Type 5).

**Figure 5.3**

*Type of Work Undertaken in Resource House Project (x Specified Members of Staff)  
(6<sup>th</sup> December 2007)*



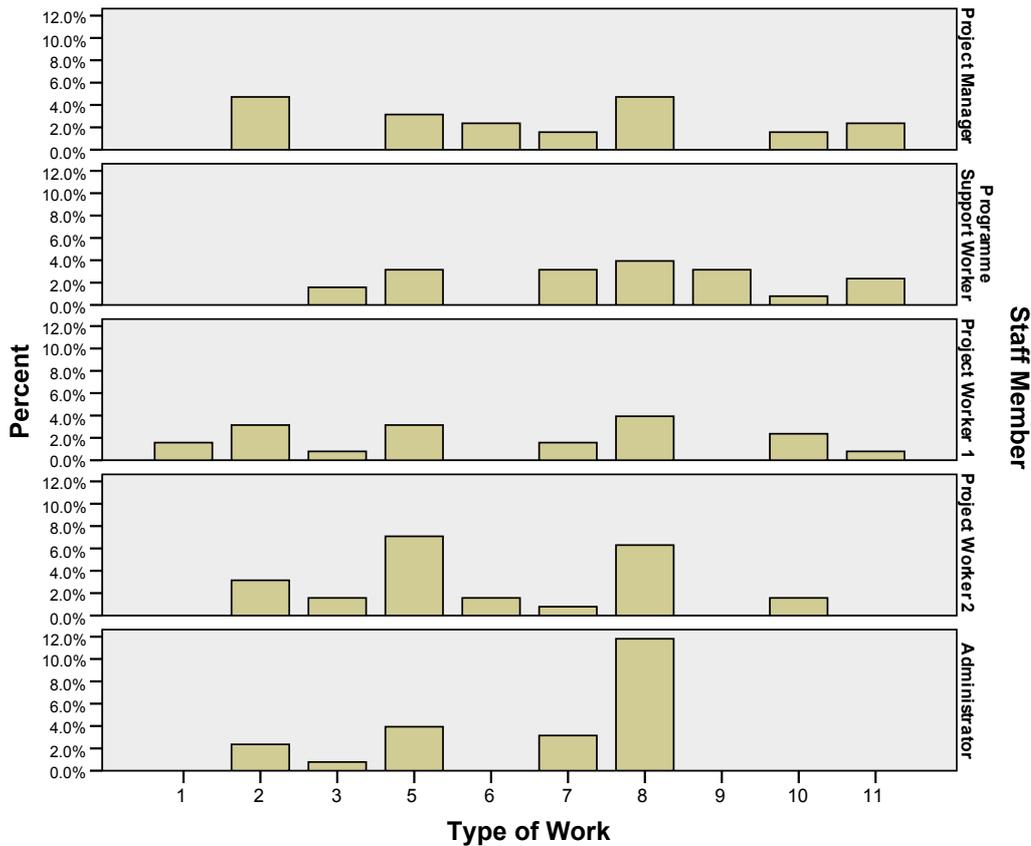
**Key**

- Type 1 – *One-to-One Scheduled Work with Adults and Children.*
- Type 2 – *Unscheduled work with adults and children*
- Type 3 – *Group Work*
- Type 4 – *Staff Supervision<sup>3</sup>*
- Type 5 – *Informal Staff Discussion/ Information Sharing*
- Type 6 – *Interagency Work*
- Type 7 – *Housekeeping*
- Type 8 – *Administration*
- Type 9 – *Staff Training*
- Type 10 – *Programme Planning and Evaluation.*
- Type 11 – *Facilitating Community to use Resource House Facilities.*

In addition to this information, analysis of the Log also revealed the type of work (% of time) engaged in by each staff member (See Figure 5.4)

<sup>3</sup> Figures 5.3 & 5.4 do not show Type 4 – *Staff Supervision*. This is because on the day the data were collected, this type of work did not occur.

**Figure 5.4**  
*Details of Work Undertaken (% of Time) for 5 Members of Staff*  
*(6<sup>th</sup> December 2007)*



- Key**
- Type 1 – *One-to-One Scheduled Work with Adults and Children.*
  - Type 2 – *Unscheduled work with adults and children*
  - Type 3 – *Group Work*
  - Type 4 – *Staff Supervision*
  - Type 5 – *Informal Staff Discussion/ Information Sharing*
  - Type 6 – *Interagency Work*
  - Type 7 – *Housekeeping*
  - Type 8 – *Administration*
  - Type 9 – *Staff Training*
  - Type 10 – *Programme Planning and Evaluation.*
  - Type 11 – *Facilitating Community to use Resource House Facilities.*

The main benefit of producing information such as this is that in the future, the Project Manager can get a better understanding of the type of work being engaged in by staff members, if tracked over one week per month basis, for example. Thus, over the period of a year, it would be possible to track any changes in the pattern of work and activities undertaken by the Resource House. In addition, it would also allow the Project Team to identify any gaps in service provision. Therefore, this method has the potential to be an extra tool in the effective care management of the families, adults and children who use the Resource House Project.

After reviewing the initial results of the logging tool, the staff group reviewed and added to the type of work done by the project. The following list is the most comprehensive of the types of work done by the Project. For operational reasons, it is based on the majority of the work of the staff team, namely the Administrator, Project Workers (x2), Programme Support Worker, four Crèche Workers and the Manager were given a Logging Tool<sup>4</sup>:

### **Type 1 – Crèche**

Two separate sessional crèches operate daily on the premises. Ten children per session, aged between three months and three years attend for three hours each day. Fees are nominal (€15.00 per week), being heavily subsidised by either the HSE (NWA) or the Equal Opportunities Childcare Programme. Crèche places are open to families from all areas of Sligo town, although in some circumstances places are allocated on a priority basis to families referred by other agencies. Where necessary, the Resource House Project works in liaison with the HSE Early Intervention Team, with Public Health Nurses and General Practitioners, Speech and Language Services, and Social Work teams where specific programmes or interventions are required for individual children.

Throughout the year various health personnel, including the local Paediatrician, visit the Project to undertake developmental checks and assessments where appropriate. Crèche staff has on-going contact with parents, and are able to provide information and advice concerning behaviour, dietary issues and child development. As children progress through the crèche they are encouraged to partake in age-appropriate activities and events in preparation for moving on to pre-school in other services. Huge emphasis is placed on providing children with a nurturing environment where freedom of expression is encouraged, and where fun and hugs are the order of the day.

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<sup>4</sup> The log does not illustrate the work undertaken daily by the six FAS Community Employment Scheme participants who together complete the team.

## **Type 2 – One-to-One Scheduled Work with Adults and Children**

- School-based Intervention – (behavioural issues, advocacy, facilitation, retention programmes)
- Literacy Skills – (basic and intermediary, with both adults who left school early and children with learning difficulties)
- Driver Theory Preparation – (often with adults who may have literacy and consequential self-esteem issues)
- Home Visits – (guidance around parenting, behavioural, child welfare, adult welfare, mental health, home – and self-care concerns, housing, financial and home management worries)
- In-house appointments with Project Staff (adults and children)
  - One-to-one advocacy/support around personal issues
  - Preparation for referral to other services
  - Domestic Abuse and Violence
  - Conflict Management/Resolution
  - Home management/budgeting/educational needs/rights and entitlements/childcare/parenting issues
  - Personal/Self Development
  - Grief, bereavement, loss
  - Interpersonal difficulties
- Appointments with other agencies/services/personnel.

## **Type 3 – Access: Facilitation, and in some instances, supervision of access between separated parents and their children.**

Some families are referred to the Resource House Project by personnel in the HSE (NWA) with a view to the staff facilitating regular and consistent contact between parents and children with whom the parent does not reside. Circumstances in each case are different. In other situations, parents may seek the same service from us when ordered by the Courts to commence access. This area of work, while potentially contentious, can be extremely rewarding. The Resource House Project is currently working to ensure that this area of our service evolves and progresses in a structured and child-centred manner.

#### **Type 4 – Unscheduled work with adults and children**

In response to the needs of the families, much of the work undertaken in the Project arises from unscheduled contacts or through our *Drop-In facility*. Drop-In for adults could mean requests for help with their Curriculum Vitae, rights and entitlements or legal issues, or very often with more personal or domestic problems, including domestic abuse and violence. This latter issue has particular implications for the Project in planning for the needs of children who are inevitably traumatised in experiencing violence in any form.

The Resource House Project is also very much aware that while both adults and children might drop in for assistance with one particular concern, the response from staff will more often than not elicit a request for support with another possibly more problematic issue. Unscheduled Work also regularly involves crisis management/resolution for adults using the service. Follow-up in such cases can necessitate telephone calls/email/facsimile, crisis liaison with other agencies and personnel, requests for appointments with other service providers, visits to health professionals, first-aid or personal health support.

The Project is conscious that many of those using our Drop-In facility feel comfortable in having time to talk. Sometimes this response from staff is all that is sought out.

#### **Type 5 – Centre-based programmes**

- Homework/Afterschool Groups
- Sibling Groups – (with children from the same family to support them in understanding and managing life-changing events)
- Specific needs-led programmes
- Crèche
- School-based groups
- Inter-agency collaborative group work
- Drama/Personal Development
- Training (FETAC, Child Protection, In-Service courses)
- Women's Group

### **Type 6 – Holiday Programmes**

During Summer, Easter and Halloween school breaks, the Project ensures that the children and families can avail of daily activities and occasional trips. These holiday programmes are organised in consultation with all service-users, and with many of the Project's referring agencies.

Summer: A five-week programme is offered, with activities for all age-groups being available through the week. As a Family Support service, the Project feels that it is appropriate not to split into one particular age-group per week. Following request from families, the Project has, for the past five years, extended the summer programme into August, when many other family-based services are not available. The summer programme culminates in an Annual Street Party, which is open to all our families and their friends, and to the larger community. One of the most popular developments of latter years has been the Family Daytrips, when up to 40 families in a convoy of coaches, travel together to enjoy a day out.

Easter and Halloween: The children and their friends partake in a range of sports, games, cookery and craft sessions, with trips on the Projects' bus and lots of treats and fun.

### **Type 7 – Staff Supervision**

Project staff participates in individual monthly formal supervision sessions with the Project Manager. Informal supervision and staff support is provided anytime it is required. Project Staff also supervise students on a regular basis. This includes students from the Institute of Technology and from various post-primary schools in Sligo.

### **Type 8 – Informal Staff Discussion/ Information Sharing**

This internal *updating* happens several times daily. The Project is very busy so it is important that staff members are kept informed of any relevant updates or new information/insight into the families they work with. As a professional team that co-works many of our families, the staff is always aware of how any development can impact on each individual. The core staff team meet every Monday morning to share weekly work plans. Whole-staff meetings are held monthly.

## **Type 9 – Interagency Work**

The project has an excellent working relationship with many agencies and personnel involved in Family Support and Child Welfare at their broadest interpretation. Listed below are service providers with whom the Project shares many families:

- Arts Council
- Child and Adolescent Mental Health Service
- Child Welfare and Family Support Social Work Teams
- Citizens Information
- CLUID Housing Association
- Courts
- Cranmore Community Co-Op and other local groups and agencies
- Department of Education
- Department of Justice, Equality and Law Reform
- Department of Social and Family Affairs
- Early Intervention Programme
- Family Therapy Service
- FAS
- Garda Diversion Programme (Youth Action Project Sligo)
- Gardai
- General Medical Practitioners
- Home School Liaison Service
- Home Youth Liaison Service
- Hospital Social Work Department
- Lifestart Sligo Limited
- National Training and Development Institute (NTDI)
- Prisons Service
- Probation Services
- Psychology Services – Children and Adults
- Public Health Nursing
- Rape Crisis Centre
- Reception and Integration Agency
- Refugee Council
- Refugee Information Services
- Revenue
- Schools
- Sligo Borough Council
- Sligo County Council
- Sligo Institute of Technology
- Sligo Leader Partnership Company Limited
- Sligo School Completion Programme
- Sligo Social Services Council Limited
- Sligo Sports and Recreation Partnership
- Sligo Young Enterprise
- Solicitors
- Speech and Language Department

- V.E.C.
- Youth Theatre
- Youthreach

### **Type 10 – Housekeeping**

Although each staff member has specific and defined roles and responsibilities within the work of the Project, one of the main strengths of the staff team is that it works together to ensure the safety of Project-users, and the smooth-running of activities.

Below are some of the tasks which can be broadly defined as “house-keeping”.

- Cleaning
- Equipment Shopping
- Food Shopping (for crèche, homework/afterschool, programmes)
- General Homecare.
- Maintenance
- Preparation of food – (E.H.O.A or H.A.C.C.P. compliant)
- Preparation of workspaces/rooms etc. for programmes.
- Recycling

### **Type 11 – Administration**

- Accounts
- Copying
- Current Evaluation
- Driving to/from appointments with/without project-users
- e-mail, fax.
- File work
- Funding applications and consequent returns
- Letter-writing
- Minutes/notes from calls/meetings
- Phone calls
- Post
- Preparation of statistical reports
- Report-writing

### **Type 12 – Staff Training**

This area of work involves not only the participation of staff members in relevant training, but also the delivery of training to various groups. It can take place both in-house and off-site.

### **Type 13 – Programme Planning and Evaluation**

This work is quite different to any other administrative duties in that it is usually undertaken as a team/group. In ensuring that the Project evolves to meet the changing familial, individual and community needs, and to facilitate programme planning for our funders, the Project alters programmes and activities to accommodate service users. This is done on both a short and long-term basis. The impact of the work of the Project is regularly assessed internally by staff and management and also in consultation with families, agencies and individuals involved in the Project.

### **Type 14 – Facilitating Community to use Resource House Facilities**

The resources available on site are widely available for use by children and families in the area.

- Availability of Stationery, Stamps etc.
- Computers
- Driver Theory Training
- Internet Access
- Job Applications
- Preparation of Curriculum Vitae
- Project Work (Post-Primary Schoolchildren)
- Sale (at Cost) of Refuse bags and Recycling Bags.
- Use of Fax machine
- Use of Photocopier
- Use of Telephone
- Use of rooms/space/facilities by other groups/agencies
  - Cranmore Regeneration Teams
  - Local Authority Personnel
  - Paediatrician
  - Public Health Nurses
  - Residents Groups
  - School Completion Programme
  - Speech and Language Team,
  - Training Venue
  - Visiting Community Groups

## **5.4 Case Vignettes**

In addition to using the Logging Tool to describe the work of the Resource House Project, it was initially planned to supplement the above information with a number of *Generic Case Studies*. It was planned that these would be written up by the staff to highlight even in more detail, their work in supporting families and individuals. The

following case-study guidelines were developed by the Resource House Project Team and were then used in the preparation of several such studies.

**A. Classification**

1. Long term, low intensity
2. Long term, high intensity
3. Long term intermittent
4. Long term, varied needs
5. Short term, low intensity
6. Short-term, high intensity
7. Non-engaged
8. Programme-based intensive

**B. Referral/Assessment Information**

1. Family Name
2. Referred when and by whom
3. Other agencies/services involved at referral stage
4. Is this family/individual currently in receipt of services at RHP
5. Family Composition
6. Family Whereabouts
7. Significant others at time of referral – ext. family, support networks etc.
8. Issues at referral stage
9. Issues on Assessment
10. Level of support initially
11. Issues on Contact 1.
12. Arising Issues

**C. Work to Date**

1. Outline (Family History)
2. Work at initial stages – to address presenting issues
3. Agencies/services contacted (initially for clarity, afterwards as onwards referral or cross-referral.
4. Current Status

Despite the effort made by the Resource House Project Staff to develop and write these case studies, none of them are included in this document. The following explanation has been given by staff to explain their absence:

*“It became immediately obvious that no matter how we tried to amend or “disguise” individual cases, the identity and privacy of those upon whom the studies were based could quite easily be compromised. As a community-based family support Project in a provincial town we became convinced that to include such studies in a publication which would become widely available would be in direct contravention of our commitment to family and individual protection.*

*A file of prepared studies is available on-site. Any person wishing to view the studies is invited to call or write to the Chairperson of our Board of Directors, where their request will be considered”.*

## **5.5 Pattern of Referrals to the Resource House Project**

With regard to the number of children, adults and parents using the Resource House Project, the figures for 2006 show that:

- 108 families engaged with the Project during 2006
- Of this number, there were 44 Adult Males of which 35 were fathers
- There were 84 Adult Females which 81 were mothers and
- There were 224 children

In relation to the families referred to the Resource House Project, the Hardiker Framework is used to assess the level of need for each family. This model incorporates four levels, namely:

- Level 1 – Universal/No Risk
- Level 2 – Vulnerable children and families
- Level 3 – At risk children and families
- Level 4 – Children and families in crisis

Taking 2006 as an exemplar, Table 5.1 shows the number of families referred to the Project as well as their level of need using the Hardiker Framework. From this, it is clear that Quarter 3 was the busiest period for referrals (n=20), followed by Quarter 1 (n=14). In terms of need, Level 2 need was the most common over the year (n=21) followed by Level 1(n=15). Only a small number of Level 3 or 4 families were referred to the Project.

**Table 5.1**

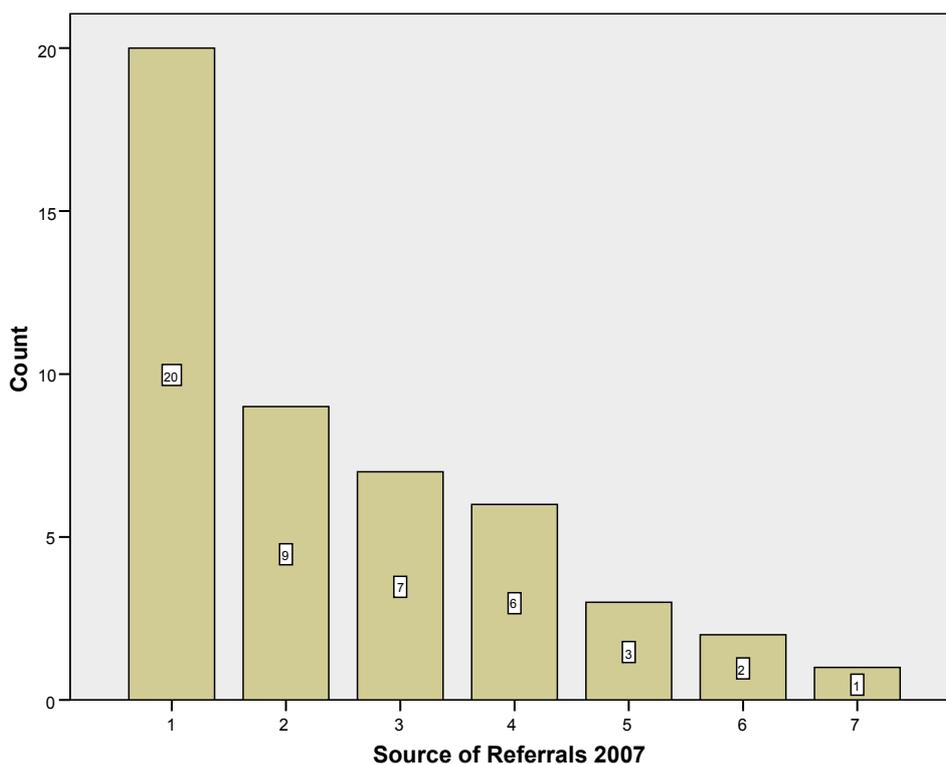
*Level of Need x Number of Family Referrals to Project, 2006*

Hardiker Level	Quarter 1 2006	Quarter 2 2006	Quarter 3 2006	Quarter 4 2006	Totals
Level 1	6	2	6	1	<b>15</b>
Level 2	6	2	6	7	<b>21</b>
Level 3	1	0	1	2	<b>4</b>
Level 4	1	0	1	0	<b>2</b>
Totals	<b>14</b>	<b>4</b>	<b>14</b>	<b>10</b>	<b>48</b>

The sources of referrals for 2006 are also illustrated in Figure 5.5. The data reveals that families were the most common form of referral (n=20), with self referrals (9) being second and 'other' being third (7). Referrals from the Social Work Department accounted for 3 referrals. No referrals were received from community or youth based Projects.

**Figure 5.5**

*Source of Referrals to Project 2006*



**Key**

1. Families
2. Self Referrals
3. Other
4. Other HSE services
5. HSE Social Work Department
6. Schools
7. Gardai
8. Community Projects
9. Youth Projects

## **5.6 Conclusion**

This chapter set out to describe the Project model as operated by the Resource House Project. After describing the five broad areas of activities engaged in by the Project, it went on to detail the development of a Logging Tool to further enhance the description of the work of the Resource House Project. The results from this tool were used to develop a detailed list of the activities engaged in by staff in their daily work. In the future, the model can also be used to examine the spread of work over any given time within the Resource House Project. The absence of the initially planned case studies was explained as being due to the need to protect the identity of the families who engage with the Resource House Project. The final part of the chapter focussed on the source and type of referrals to the Resource House for 2006.

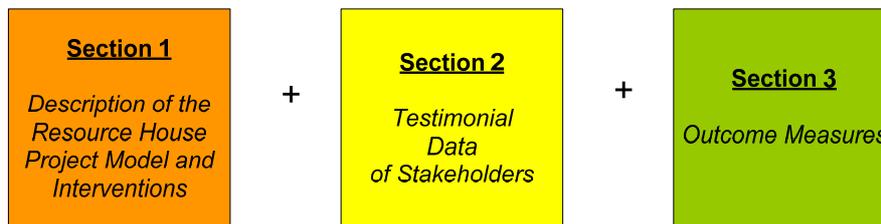
# Chapter 6

## Testimonial Data – Resource House Project

### 6.1 Introduction

In addition to the *Description of the Project Model* which made up the last chapter, it was agreed by the RAG from the outset, that another key task of the evaluation would be to listen to the views of the various stakeholders who link in with the Resource House (See Figure 6.1).

**Figure 6.1**  
*Key Components of Springboard Evaluation*



Therefore, this chapter describes the methodology used to collect the required data from the various stakeholders, as well as then presenting the data on their perceptions and views of the Resource House. A set of general thematic conclusions are given after each section, which identify the positive attributes of the Resource House Project as perceived by each stakeholder group, in addition to their suggestions for the Project.

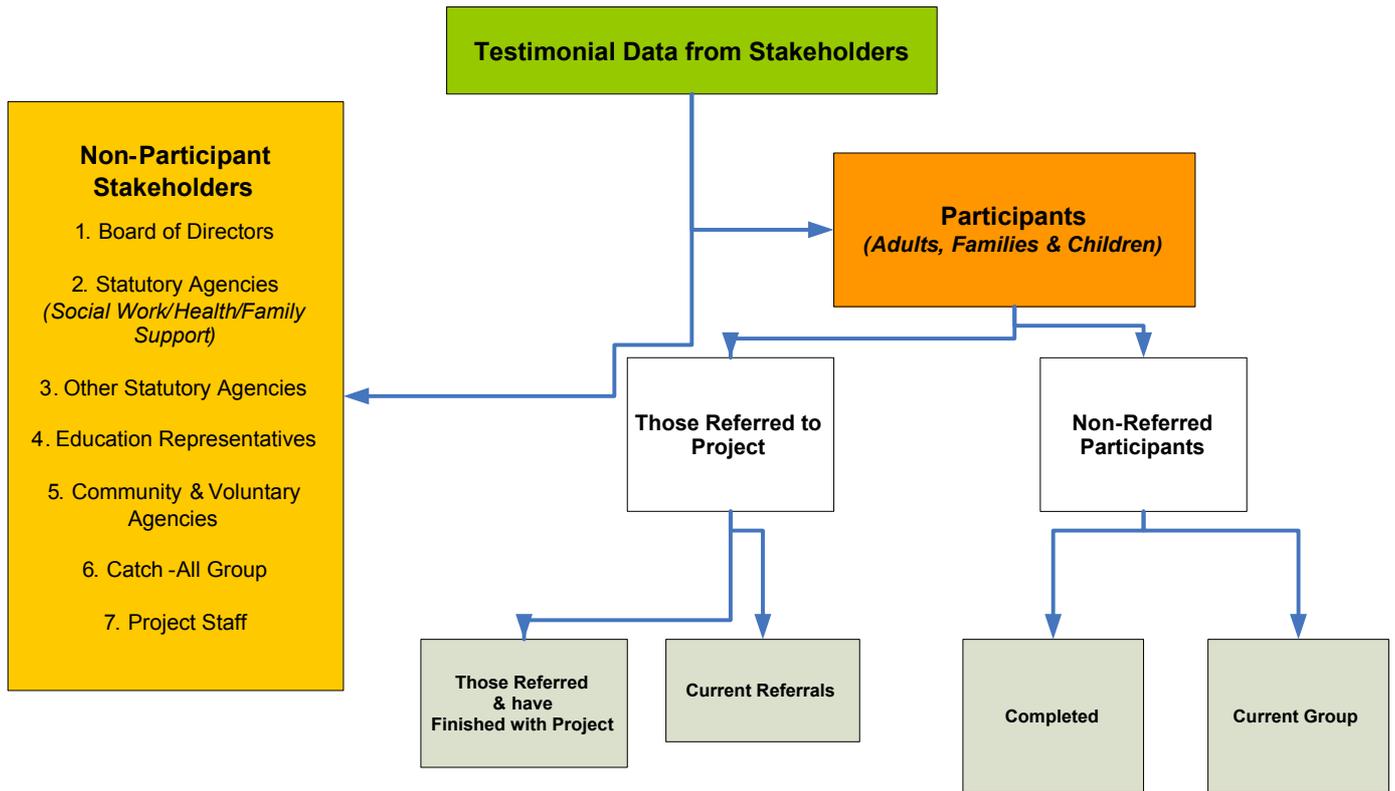
### 6.2 Methodology

The details of the design and implementation of the methodology pertaining to this part of the evaluation is outlined below.

#### a. Designing the Methodology

The initial step in designing the methodology involved identifying the various stakeholders who would be invited to become part of the evaluation. Between the staff of the Resource House and the RAG, a full list of stakeholders was arrived at, which was later categorised into two main groupings, *Non-Participant Stakeholders* and *Participant Stakeholders*. An explanation of these groups is shown in Figure 6.2.

**Figure 6.2**



A total of 7 distinct groups made up the *Non-Participant Stakeholder* group, ranging from the Board of Directors to the Community and Voluntary Group to the Staff. It was agreed that the most time efficient way of collecting data from this group would be by a series of *Focus Groups*. Subsequent to this, a set of Topic Guides for use at the focus groups were designed for each of the *Non-Participant Stakeholder* groups (See Appendix 3 for a Sample of the Topic Guides)

The second group of stakeholders, the *Participant Stakeholders*, was made up of adults and families who use or have used the Resource House. In an attempt to get as wide a sample as possible, it was decided to divide this group into those who were referred to the Resource House Project and those who were not referred but dropped in and out of the Project from time to time (See Figure 6.2). The group of adults and parents chosen for inclusion were then stratified by the length of time they had been involved with the Resource House Project, ranging from relatively new to long-term. In consultation with the Project Staff, it was agreed that a one-to-one semi-structured interview would be the most appropriate way of collecting this data. A copy of the questionnaire used with the adults and families is shown in Appendix 4.

### **b. Implementing the Methodology**

To operationalise the methodology, an invitation was sent to representatives from 6 of the 7 groups in the *Non-Participant Stakeholder Group*, inviting them to attend a ‘*discipline-specific*’ focus group on a set date. For those who could not attend their own discipline-specific focus group, a ‘*Catch-All*’ focus group was organised to accommodate these people. For those who could not make the ‘*Catch-All*’ focus group, a postal survey was sent to them (See Appendix 5 for details). A total of 49 people participated in the evaluation from across these 6 groups (See Table 6.1). In relation to the staff group, both a focus group and one-to-one interviews were held with all staff members following the production of the 1<sup>st</sup> draft of the final evaluation report. This method was chosen by the researcher, as it allowed the staff group to respond in a more focussed way, to any issues raised in the preceding focus groups. A total of 12 staff members partook in the focus group while 10 of them opted to talk to the researcher on a one-to-one basis also.

To collect the data from the adults and parents, two researchers from the CFRC attended the Resource House over two days and talked to 42 people who had used the Resource House at some stage, up to that point (See Table 6.1). In total, 91 individuals from across the *Non-Participant* and *Participant Stakeholder Groups* participated in the evaluation process.

**Table 6.1**  
*Sources and Methods of Data Collection – Resource House Evaluation*

<b>Stakeholder Group</b>	<b>Specific Group</b>	<b>No's Participating in Research</b>	<b>Method of Data Collection</b>
<b>1. Non-Participant Stakeholders</b>	1. Board of Directors	8	Focus Group
	2. Statutory Agencies ( <i>Social Work/Health/Family Support</i> )	5	Focus Group
	3. Other Statutory Agencies	5	Focus Group
	4. Education Representatives	4	Focus Group
	5. Community & Voluntary Agencies	6	Focus Group
	6. 'Catch-All' Group	9	Focus Group
	7. Postal Questionnaire Follow-Up <sup>5</sup>	12	Survey
	8. Staff Group	12	Focus Group
	9. Staff Group	<u>10</u>	One-to One
		<b>Total Number of Participants</b>	71
<b>2. Participant Stakeholders</b>	1. One-to-One Interview with Adults and Parents	42	Semi-Structured Interview
	<b>Total Number of Participants</b>	<b>42</b>	
<b>Overall Number of Participants</b>	<b>1. Non-Participant Stakeholders</b>	<b>71</b>	
	<b>2. Participant Stakeholders</b>	<b><u>42</u></b>	
		<b>113</b>	

### 6.3 Findings

In this section, the findings relating to the 113 individuals discussed above will be presented under the headings *Non-Participant Stakeholders* and *Participant Stakeholders*.

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<sup>5</sup> The results from these returned questionnaires are not written up as a separate section. Instead, the results have been inserted into the data pertaining to the specific focus group the person would have attended.

### **6.3.1 – Non-Participant Stakeholders**

The data obtained from the various *Non-Participant Stakeholders* is presented in this section.

#### **6.3.1.1 Board of Directors**

The Resource House Project is managed by a Board of Directors, which is made up of representatives from the key agencies and families, who link with the Project. A total of 8 people participated in this focus group.

##### **1. What is your role as the Board of Directors?**

The first question posed, required the group to discuss what they saw as their overall role. All of the answers were based on the same principles, stating that the Board of Directors forms the company, with directors and members. The Group saw, budgets, employment of staff and ensuring that *“our service users are happy with what we do”* as being their main work.

Considering this, the Group agreed that it *“was not a rubber stamp board”*, suggesting that *“we argue things out and get on with the job. It is a very constructive Board”*. The Group agreed that any issues or concerns are acted on in a very practical and systematic way, with them being debated openly, with no member having hidden agenda's. *“Therefore, the decisions that have come from this Board have benefited all involved, staff, community – the service has been honed to a very fine art. It is very healthy in this organisation at the moment”*. The only suggestion that was made on how the Board could be improved was to review the participation rate of residents from the area on the Board. It was felt that the current residents on the Board only occasionally attended and that this needed to be corrected to ensure a sense of community ownership.

##### **2. What does the Resource House do?**

The next question posed to the Group tried to ascertain their views on the kind of work conducted by the Resource House Project. The Group agreed that it is a *“community based family support Project – and it is about encouraging members of the community to support each other. It also offers a drop-in support, also crisis intervention depending on needs”*. The Group also noted that *“the Project has the*

*ability to have an immediate impact on a situation ... as it is an integrated service, both in and between agencies and for the families themselves”.* It was suggested that the Resource House Project provides support for all age groups and in particular, the family is included in any work involving their children.

### **3. How Can You Show that the Resource House Works?**

The Group was then asked to consider any indicators that they could identify that would show that the Resource House actually works. In answering this question, the following points were given as indicators:

- *Progression of Service Users* – It was noted that a number of the current Project Staff were initially service users of the Resource House Project, who over time, trained in family support and are now working in the Project.
- *Help with Qualifications* – The Group also identified a number of cases where people in the area, who had left school early, were helped to pass their *Driver Theory Test*, which opened up new possibilities for them.
- *Development of Post-Primary Homework Club* - A few years ago, when the children who had been using the primary school homework club in the Resource House Project moved to second level, they asked for a second level homework club to be set up for them. This illustrated the impact the homework club was having on the school life of the children concerned.
- *Drop in Referrals to Social Work* – It was also acknowledged that a recent meeting with the Social Work Department in Sligo, the Resource House Project was informed that the number of crisis cases being referred to them from Cranmore had dropped. This has been attributed to the early intervention of the Resource House Project.
- *Help with Accommodation* - When people are faced with eviction, they come to the Resource House Project and are supported and helped to overcome the problem.
- *Access* - The Resource House Project helps parents and in particular, fathers, have access to their children, whom they do not live with.

### **4. Potential Concerns with the Resource House**

The discussion was then opened up and the Group was invited to discuss any potential concerns they saw, in relation to the work of the Resource House.

a. Is the Resource House Project Exclusionary?

Due to the history and location of the Resource House Project, the view is often expressed that the Resource House is exclusionary, in so far as it only offers services to residents from the Greater Racecourse View area. The Group agreed that this was the perception of certain residents in outside the Greater Racecourse View area, particularly across “*the Devins divide*”. One suggestion made was that “*maybe there is a need to replicate the Resource House in other parts of Sligo/Cranmore*”. Another point made which may explain this perception was that, “*Sometimes it gives people a comfort to think that a service is for other people and not for them*”.

The Group agreed that no policy was in place within the Resource House Project, which excluded non Racecourse View people from using the Project. They pointed to evidence that in recent years, the uptake of the crèche by parents coming from further out the estate shows the barriers are being broken down. Finally, the Group agreed that any existing exclusionary perception would need to be managed via the current Cranmore Regeneration Project.

b. Does the Resource House Project Create a Dependency Culture?

Another potential problem with a Project of this nature is that it can lead to a dependency culture being created among the families and young people who avail of its services. One potential area of dependency is the aforementioned homework club for children. The researcher asked the group whether or not they thought the Resource House Project was creating a dependency culture and disabling parents, as the Project did not actively involve all parents in this activity.

The Group responded by suggesting that “*Being practical and realistic, the parents do not have the skills in Irish or maths to help their kids. The Resource House needs to give a leg up to these kids. The Resource House reinforces the work they do in school everyday. Hopefully, by the time these kids leave school, ...they will have the skills to do it. – it is generational and will take time*”. The Group was of the opinion that despite the possibility for creating this dependency, in the case of the homework club, “*the obligation of the Project is to the child – I would love to see the parents involved, but the child needs to be fed, homework done etc – there is a bigger debate about*

*this...If there is a child coming in here after school and they are hungry, feeding them is the most realistic thing to do – without food they cannot concentrate and learn – it is very relevant that the cycle is ... broken”.*

In response to this, the researcher suggested that *“You can only break so much of the cycle with the children – if someone fed your child for 10 years too”*. Responding to this, the Group discussed how many of the parents lack the confidence to support their own children through school – *“...the last thing we want to do is to take away the parents role – however, there is a need. Many parents see the Resource House as a possibility to get the child the leg up they need – I don’t think we create a dependency”*. Related to this, the point was made that Irish society measures itself on educational attainment and with that in mind, the Resource House is helping with that and *“...hopefully, the child will look back on the experiences as positive and may lead to change”*.

A final point related to the potential creation of a dependency culture related to the role of the Board of Directors itself. One of the interviewees noted that *“I had always hoped the community themselves would have taken ownership of the Project at this stage – still has not changed, and that I would move to the back benches to have an advisory role only. It is a challenge that should be faced”*.

### *c. Finance for the Resource House Project*

The Group discussed how the current changes in the structure of the HSE (NWA) could lead to potential funding difficulties for the Resource House Project, due to the absence of once *“local influence and control of the situation”*. It was hoped that the current evaluation of the Project would show its value in the area, which would eradicate any potential funding crises in the future.

## Summary of Findings from Board of Directors

The following points summarise the perceived positive attributes of the Resource House Project as well as key suggestions for the Project to consider:

Positive Attributes of Resource House Project	Suggestions for the Resource House Project
<ul style="list-style-type: none"> <li>• The Project is community-based and offers an integrated service to families.</li> <li>• The progression of former clients of the Project to actual workers in the Project.</li> <li>• Community led development of a Homework Club for second level pupils.</li> <li>• A drop in the numbers of referrals to Social Work from the Cranmore area.</li> <li>• The Project has helped many families with accommodation and Access issues.</li> </ul>	<ul style="list-style-type: none"> <li>• The need to address the often lack of real representation and participation of residents on the Board of Directors.</li> <li>• Despite being in existence for 10 years, there is little community ownership of the Board of Directors, with the Group still being run by non-community representatives.</li> <li>• Despite not seeing the Project as being exclusionary to families outside the Greater Racecourse View Area, the Group agreed that there was a perception among residents that the Project was only for the Greater Racecourse View Area.</li> <li>• The Group did not agree that the Project was creating a Dependency Culture through its Homework Club with children as the end justifies means, with the Project being totally child focussed. However, they did call for more debate on this issue.</li> <li>• The issue of the Project's finance was also raised as a potential area for concern, due to the restructuring of the HSE (NWA)</li> </ul>

### **6.3.1.2 Statutory Agencies (Social Work, Health and Family Support)**

After a review of all the statutory agencies that link with the Resource House Project, it was decided to create two separate sub-groups for the purpose of data collection. The data presented in this section pertains to statutory agencies involved in Social Work, Health and Family Support type work. A total of 5 representatives from agencies in this category participated in this focus group.

#### **1. What is the overall aim of the Resource House Project?**

The initial question asked the participants to consider what they regarded as the overall aim of the Resource House Project. In reply, those present agreed that the Project delivers family support services at a community level, services which are easily accessible to members of the community throughout Sligo town, not just

Cranmore. In addition, they felt that the Resource House Project works with families to help strengthen their abilities to meet their responsibilities, while building on strengths they have, to support them in areas they may have difficulties in. In a sense, the Project supports families so that they can ultimately manage their own lives. To achieve this, the Resource House Project empowers people and is thus central in giving power back to the families who use the service.

## **2. What are the most Successful Aspects of the Resource House Project?**

After a discussion of the most successful aspects of the Resource House Project, two key findings emerged.

### *a. Preventative Work*

One of the key benefits of the Resource House Project according to the participants is its preventative work. As part of the Cranmore Regeneration Project, research into Early School Leavers (ESL's) revealed that fewer and fewer ESL's were coming from Cranmore. It was agreed that the preventative work done by the Resource House Project through the homework club and its links with the schools in the area over the last 10 years has led to this outcome – *“I think the Project had a major part to play in that outcome”*. On a broader scale, the comment was also made that the preventative work of the Resource House Project may also have led to a reduction in the number of referrals to the Social Work Department in Sligo. One participant noted that *“I know of one family that has come on in leaps and bounds. The Project has worked with this family and pulled all of the services together to build a plan ....[which led to ] real positive change for this family”*. Therefore as well as preventative work, the group saw the Resource House Project working in conjunction with other agencies on behalf of the families it works with.

### *b. Progression of Past Service Users*

Another successful aspect of the Resource House Project is that it has been hugely successful over the last 10 years, in dealing with marginalised families in an extremely marginalised area. One indicator of the success of the Resource House Project is that many of the families have ended up working on the Project. An example given by one participant was in one case, a family in the area was threatened with eviction and *“nobody could make any headway for them apart from*

*Project....[The] Key worker with that family was a previous service user from here – that is a great sign of success and testimony to how successful the Project has been”.*

*c. Other Indicators of Success*

No less important than these two areas of success, the participants also wanted to put the following points on record as being other signs of the success of the Resource House Project:

- The Project has helped countless families in the area ‘sustain tenancy’, during times of perhaps huge upheaval in their lives.
- Apart from the notion of family support as offered by the Resource House Project, it also serves as a neighbourhood resource for all kinds of information families may need.
- Over the last number of years, the Resource House Project has worked extremely hard at meeting the needs of the international community, whose home is the nearby Globe House.
- The Resource House Project often uses an informal way of working with the families, resulting in many families never reaching crisis phase. In addition, a lot of families would have had very negative experiences of other services in the past – the Project has made great strides to build this trust with these families.
- Due to the fact that the Resource House Project has been in existence for so long, it is now moving into the second generation of people who trust the Project, which is obviously very positive. *“It is in the long term so that the benefits of the Project will be spinning out into family and Child welfare and support”.*

**3. Management Structure and Quality of Staff**

The group was asked to comment on their perceptions of the Management structure in the Resource House Project as well as the quality of the staff in the Project. With regard to the management structure, the majority of the group knew that the Resource House Project was run by a Board of Directors but were unaware as to how effective the structure is - *“I certainly do know that it is taken very seriously and I would imagine that any difficulties are being addressed”.*

In terms of the staff in the Resource House Project, there was consensus that they were extremely professional, open and accessible. *“They work informally with people – participants don’t even realise they are getting a service”*. In addition, *“I think the staff are brilliant – I can only speak highly about every one of them”*. It was also felt that the staff are very good at what they do and no matter how bizarre the request made of them by families, they are flexible and so can respond to the need in question.

#### **4. Is the Location of The Resource House Project Exclusionary?**

One of the most frequent criticisms of the Resource House Project is perhaps that due to its location in Racecourse View, it is not open to residents of Cranmore, outside of the greater Racecourse View Area or to families from other parts of Sligo Town. When asked to comment on this perception, a number of points emerged. One of the participants made the following comment – *“I used to think the Project was just for Cranmore. It is only within the last year that I realised that it was for wider Sligo. It was just an assumption I made myself. If I thought that and I am in regular contact, what do others think outside of Cranmore?”* As a solution to this, it was felt that more advertising of the Resource House Project could be done to show that it is for families right across Sligo town.

In opposition to this, another participant commented that *“There is an openness in the Project to take families and children from across Sligo, so no there are no clear-cut boundaries. However, it may have started off in that way – just dealing with Cranmore residents and Banks Drive. I suggested it to a few outside families and there was no problem”*, as the Resource House Project worked with them. Related to this point, another person suggested that there is a great openness and sense of welcome in the Project – *“My experience is that they are child-centred and family orientated and no matter where people come from, if the Project can help they will”*.

It was later agreed that the area-specific perception associated with the Resource House Project dates back to when the Project started. *“At the beginning, it was almost exclusively for certain people”*. *“Traditionally, Banks Drive was perceived as a no go area. Maybe adults [in the area] still see it as Banks Drive, despite it is now Racecourse View”*? The general agreement was, however, that despite the perception

that may exist, the Resource House Project “...is open to all groups now”. In addition, the summer Project draws in children from the whole of Cranmore and even outside

## **5. Relationship of Resource House Project to other Family Support Services in Sligo Town**

A necessary component of any Project such as Resource House Project is that it is well integrated into the macro family support services around it. To investigate this, the group was asked whether or not they saw the Resource House Project as being a team player with these other support services. As could be expected, a number of points emerged.

The general agreement was that the Resource House Project does link in with other Projects and agencies in the area - “...in my experience, I have found the people in the Project excellent. They have worked well and have great knowledge and feel for the people in the area”. However, one agency suggested that from their experience with the Resource House Project, “I think there is a little bit ... we [Resource House Project] do it our way....”. This agency explained that this maybe the case when the Resource House Project would alert them to a very serious issue that borders child protection, while at the same time wanting to do the work themselves. “I think that is fine but sometimes there can be a conflict. I have great trust in the way the Project manages a family because I know them for a long time...It is risky but it has been working ...There is a little bit of them wanting to do it their way and I am not too sure that is more helpful and that the outcomes would be better”. Having raised the point, however, the agency suggested that they had no bad experiences of this way of working with the Resource House Project.

## **6. Difficulties in the Way of Working**

The discussion then focussed on identifying any key difficulties the Resource House Project may have in terms of the way it conducts its work.

### a. Referrals to Social Work

One of the foremost difficulties raised by participants, concerning the way the Resource House Project conducts its work was around the lack of referrals to the Social Work Department. One participant in the group acknowledged that the

Resource House Project is in a very difficult position regarding referrals to the HSE. The participant noted that the HSE – Social Work Department does have a wider responsibility both for child welfare and family support also. However, “...very often by the time we become aware of case, it is a crisis which makes it very difficult for us to engage in any form of family support. I think this is very much linked to the referrals procedure”. Furthermore, it was pointed out that there is often a very negative perception of Social Workers by the general public – “...if you have a HSE Social Worker calling to your door for the first time, family is worried that you may take children away – fear is there”. Relating this back to the Resource House Project, the comment was made that since Project is often the first port of call for a family, “I wonder if families are coming in where there are child welfare issues that other agencies might be able to assist with – is there a delay in the process of referring them because of where the particular family are at”. This potential conflict of interests was also commented on by the following:

*“You will hear people in the area talking about child abuse, anti-social behaviour, neglect.... Very often you will hear comments like, everyone knows who they are [those suffering abuse] – well, no we don’t, because no one is making referrals into Social Work. I have to ask why is this the case? Is there a conflict of interests or is there something else going on with the child? Is it something that is been overly dramatised in the area by sweeping statements. The Project is our eyes and ears on the ground, because they are often the first port of call for families. I don’t know if that is something specific to the Resource House? I do wonder with more so child welfare than child protection cases – is there a conflict of interests there”.*

In contrast to this view, another participant made the comment that they felt that the Resource House Project was not “...holding onto families too much – it is often the case that it is more beneficial for the Project to work with families here. Often there is joint working in child welfare cases. It doesn’t have to be a single approach. There is good communication, so I don’t see that as an issue”. The point was also made that if the Resource House Project did make more frequent referrals to Social Work, they may lose a lot of ground with families if they were perceived as a Project that would refer general concerns straight away. The group acknowledged that the Resource House Project had worked very hard to build up that trust and that Project’s

credibility is very important in the area. Thus, it would be important for the Resource House Project not to be perceived as an arm of the HSE, “...*but that it is a neutral venue where there is rapport and trust*”. Participants suggested that that “...*they [The Project] are well capable of knowing when it warrants involvement from the HSE. If the Project was more linked to the HSE in this way, family numbers may fall off*”. Coupled with this, the Resource House Project builds up trust with families first and often goes with the family to the HSE at a later stage.

*b. Being a Community Based Project*

Some of the participants discussed the way in which the Resource House Project had become integrated into the community over the last 10 years. The approach used by the Project is as much based on community development as it is on family support. However, being embedded in the community to the extent it is, “...*could become the rock that it perishes upon*”. It was agreed by those present that the Resource House Project needs to protect itself from burn-out. “*If you are always available and overly accessible, you will have all this stuff coming in and get swallowed up. It is important that the work be ‘boundaried’ and not a door-mat for all and sundry to walk over.* However, this is a difficult thing to do considering the fact that the Resource House Project is “...*always here and can never get away from community*”.

*c. A Seamless Community Childcare Service*

Between the Resource House Project and the Abbeyquarter Centre, there are a number of childcare services ranging from crèche care to homework groups. One of the key changes for the area suggested by the Cranmore Regeneration Project is the provision of a one-stop-shop for childcare. At the moment, “*there is no seamless service where you can leave your child all day if you want to go to work*”. The big problem with this is that space for everybody is at a premium so a purpose built facility may be the way to go. This would have knock-on consequences for the Resource House Project.

*d. Work with fathers*

The Group also noted that the Resource House Project has attempted to work with fathers but that more work needs to be done in this area.

**Summary of Findings from Statutory Agencies (*Social Work, Health and Family Support*)**

The following points summarise the perceived positive attributes of the Resource House Project as well as key suggestions for the Project to consider:

Positive Attributes of the Resource House Project	Suggestions for the Resource House Project
<ul style="list-style-type: none"> <li>• The Resource House Project helps to strengthen and support families in their functioning.</li> <li>• The preventative nature of the Project has led to a reduction in the number of referrals to Social Work as well as a reduction in the number of Early School Leavers.</li> <li>• The obvious progression of families who accessed the Resource House Project is obvious.</li> <li>• The Resource House Project has helped sustain tenancy agreements for families.</li> <li>• The Resource House Project serves as a neighbourhood resource.</li> <li>• The Resource House Project has provided considerable help to members of the international community, resident in the area.</li> <li>• The staff is exemplary.</li> <li>• The Resource House Project is a great knowledge base on families and the community for any other support agencies.</li> </ul>	<ul style="list-style-type: none"> <li>• While the Group did not see the Resource House Project as being exclusionary in the families it worked with, it felt that there is a perception among the community that the Project is only for residents from the Greater Racecourse View area. This needs to be addressed, perhaps through advertising the work of the Project.</li> <li>• Some members of the Group were of the opinion that in some cases, the Resource House Project ‘held onto’ families too long, instead of referring them sooner to other services for help. There is need for the Project to have a more clear policy on ‘Joint Working’ with external agencies.</li> <li>• The need to be proactive in not allowing itself to ‘burn-out’ was suggested, due to the intense nature of the work.</li> <li>• The Resource House Project needs to liaise with the other childcare services in the area as well as the Cranmore Regeneration, to create a more seamless community childcare service.</li> <li>• The Group saw a need for the Resource House Project to continue trying to engage fathers in the work of the Project.</li> </ul>

**6.3.1.3 Other Statutory Agencies**

As pointed out above, after a review of all the statutory agencies that link with the Resource House Project, it was decided to create two separate sub-groups for the purpose of data collection. The data presented in this section pertains to those statutory agencies not involved in Social Work, Health and Family Support type work. A total of 5 people representing these other statutory agencies participated in this focus group.

## **1. What is the overall aim of the Resource House Project?**

To start the discussion on the Project, the interviewees were asked to describe what they perceived the Resource House Project to be about. One person suggested that the Project worked on “*Targeting different groups of people and working with them on their own self development and that has a knock-on-effect to community*”. The group also felt that the Resource House Project gives the families who engage with it more confidence and helps them to talk to various agencies if needed to (advocacy). There is absolute trust of the Resource House Project in the community. The community also understand that Project will advocate on their behalf no matter how dire the position is for the person or family.

They felt too, that from the outset, the Resource House Project has aimed to be one that is firmly based in the community which “*...opens doors that are there but the person felt that they couldn't do it themselves*”. Due to the fact that the Project originated at a time of great need and huge exclusion in Cranmore, “*...a lot of trust and understanding has been built up on both sides of the fence, from the client and service provider perspectives*”.

## **2. What are the Most Successful Aspects of the Resource House Project?**

The key areas of success evident in the work of the Resource House Project, according to the interviewees were as follows:

### ***a. Advocating for Families***

One of the strongest perceived positives about the Resource House Project was its ability to be an advocate for the families it works with when required. For example, due to a lack of confidence, the family may not want to talk to Social Welfare about the possibility of updating their package of payments. “*The Project acts as an advocate ... as they often come with them [the families] to service...Working with the Project means that there can be a better co-ordination of services*”.

### ***b. Not Indebted to the Project***

The interviewees acknowledged that the Resource House Project is built on helping families. However, “*Once the Project helps, the families aren't always in their debt – not always reminded of this help*”. The point raised was that once the Project finishes work with a family or individual, it allows the family/person to move on – “*there is no*

*hold on the family – they don't have to come back and do voluntary work".* Therefore, a considerable amount of the work done with families by the Resource House Project is unseen by the general public. *"To the general public in Cranmore, sure that is just another community centre – they don't realise the in-depth work they do in the community... the positive impact that ripples from it ..."* is huge.

#### *c. Progression of Children*

The Resource House Project provides crèche care for children throughout the year. One of the interviewees noted that *"A bunch of the tots from the area were starting in a playgroup this year – a letter came back from the groups to say that they were fantastic little ones – a sign of great progress"*. In addition, another participant noted *"that the kids using the homework club were excelling at their work"*. The Group agreed that, *"In the past kids were not allowed to think – more and more kids getting the chance to change"*.

#### *d. Information Providers*

The Group also acknowledged the fact that the Resource House Project has the ability to provide information on the families they deal with, *"warts and all to local authorities"* in helping them to do their work. In a sense, the Project is a *"reservoir of information"*. The information provided by the Resource House Project is given in an honest, confidential and sensitive way and is *"not doctored up to suit"* in any way.

### **3. Management Structure and Quality of Staff**

The interviewees were asked to comment on the Project's Board of Directors and the quality of the staff of the Resource House Project. The group was unable to offer any comments on the former as they were not aware exactly of the nature of this structure. They had no such difficulty when it came to describing the Project Staff. There was agreement that the *"The quality of the staff is superb"*. *"I have never come across staff from the Fas workers ... to the permanent staff.... are all brilliant - .....totally dedicated ....who work well beyond the call of duty. The service that I see them dispensing is excellent"*. A point was also made about the way the Project Manager works at developing those engaged in the CE Scheme – the way that she *"...brings them on is superb, to other training, education etc. Nobody knows about this and it is excellent"*. A final comment was made which suggested that the Resource House

Project is empowering individuals so much so that they may be able to run the Project in the future.

#### **4. Is the Location of the Resource House Project Exclusionary?**

The Group was asked to comment on the perception held in certain parts of the Cranmore community that the Resource House Project is only for residents of the Greater Racecourse View area. The Group suggested that the Project is not just for Greater Racecourse View area, but that *“due to the geography of where it was placed originally – people just perceived that Project was just for houses in that area”*. However, that is changing now, gradually – people from other areas are moving in and availing of services in the Resource House Project, for example the crèche and the afterschools group.

The Project is based in Area 2 of the Cranmore Estate, an area that the *“stats show that it is the most problematic of the three areas. If the Project was moved to a more central location in the morning, the effect would be devastating. There are still a lot of vulnerable individuals living in proximity to the Project and there are a lot of children around the Project that need its support too – daily support”*. The Group suggested that many people on the far side of the Devins divide, see *“this area as a different world”*, due to the stigma of Banks Drive from the past. *“Years ago, there were 16 out of 48 houses being occupied - This was Beirut....the guards would be battered or stoned out of it”*. For this reason, many residents outside of the Greater Racecourse View Area never associated with the Resource House Project. According to one interviewee, things were perceived as being so bad in the Racecourse View Area in the past, the following comment was made at a Residents Association meeting, *“Why don’t you build a wall and throw the bread across” – “That stigma has never been dispelled from the broader community....”*.

The Group noted that the Resource House Project is battling to breakdown that entrenchment. More and more referrals are coming to Project from different agencies and that is leading to a little bit of integration.

## **5. Suggestions for the Resource House**

At the end of the interview, the interviewees were asked for suggestions on how the work of the Resource House Project might be better focussed. The following points were made:

### a. Funding

The Group acknowledged the fact that a Project of this kind evolves weekly and so planning needs to be done on a regular basis. Despite this, the planning has been affected by inadequate funding. This has serious consequences for the morale of staff and it is transmitted down to the community. *“That creates a negative response within the community – ah sure there is no point going over to the Resource House as they will be closed in six months”*. *“It is often just seen as a building with people in it providing a service, but it is more than that ... It is the difference between life and death; a family staying together, someone taking their life – these are not tangible things”*. It was important, according to the Group for the HSE as funders, to recognise the work the Resource House Project does in the community.

### b. Nutritionist & Health Issues

The Group also suggested that there should be a qualified nutritionist asked to work in the Resource House Project. This person could help parents and families *“and provide them with skills on domestic economy – just the basic skills”*. In addition, the Group suggested that there is also a need for certain personal health issues to be dealt with by the Resource House Project. Many residents have minor health issues, but may be afraid to take it any further. As part of getting families to attend either of these two sessions, the Group noted that the Project would need to look at how best to build the capacity of the families to see if they need the help in the first place.

### c. Community Street Workers

The Group also commented on the fact that most of the contact the local authorities have with children from the Cranmore area, is with 10-16 year olds. They proposed that the Resource House Project could link with other agencies and investigate the provision of *“Community Street Workers”* who would walk the area from 4-9pm and try and deter the young people from anti-social behaviour.

d. Education Initiative for Parents and Adults

The Group argued that many of the residents involved with the Resource House Project “give out about politicians too – but when it comes to voting, not one of them know how to vote. If they had a bit more empowerment .... They are embarrassed to say that they don’t know how to go about it. If they had a bit more confidence, it would allow them then to act on their own....” Considering this, the Group agreed that the Resource House Project could investigate the provision of education initiatives for Parents and families of the area.

e. Blockage in the Family Support System

From its position, the Group suggested that one of the core issues faced by the Resource House Project is its links with other services. The Group commented on the fact that it is often the case that when the Project refers families on to other agencies, it takes a long time for the agencies to respond. “There is a blockage there – a time that some individuals cannot afford. Some people could do themselves damage or others. That needs to be looked at”. In addition, they suggested that the Resource House Project often identifies at an early stage, children who have a learning disorder. However, it has often taken 3 years for these children to be assessed, “resulting in three years that are lost – the child is being set up to fail”. “The Project identifies at an early stage there is a problem with child, but the lack of assessment may mean that the help offered by the Project is useless to the child. Therefore, this is a waste of resources for staff in Project”

## Summary of Findings from Other Statutory Agencies

The following points summarise the perceived positive attributes of the Resource House Project as well as key suggestions for the Project to consider:

Positive Attributes of the Resource House Project	Suggestions for the Resource House Project
<ul style="list-style-type: none"> <li>• Being an advocate for families.</li> <li>• The Project develops trust with families, allowing families to build their own confidence and open new doors.</li> <li>• The ethos of the Project ensures that families who receive help do not feel in-debted to the Project.</li> <li>• There is clear evidence of the positive progression of children who use the crèche or the homework clubs.</li> <li>• The Project is a reservoir of information for the families in the area.</li> <li>• The quality of the staff is exceptional.</li> <li>• The Group agreed that due to the history of the Project, the perception among families is that it was for families from the Greater Racecourse View Area. This has now begun to change due to children from across Cranmore using the Project.</li> </ul>	<ul style="list-style-type: none"> <li>• The reality of inadequate funding is unacceptable and has the potential to affect the morale of the staff.</li> <li>• The Project could engage a nutritionist to work with families on how best to feed their families.</li> <li>• Many families are afraid to deal with often minor health issues. The Group saw the Project as being a key player in helping to deal with these issues.</li> <li>• The Group suggested that the Project could link with other local agencies to investigate the introduction of ‘Community Street Workers’ to curb anti-social behaviour.</li> <li>• The provision of more educationally based initiatives for adults and parents was suggested.</li> <li>• The time delay in the length of time families whom the Project refers to other services have to wait, was seen as the biggest issue for the Project. This blockage in the system was seriously impeding the progression of families.</li> </ul>

### **6.3.1.4. Education Representatives**

The participants in this group represented a wide array of educational interests in Sligo, ranging from second level to the School Completion Programme, the Institute of Technology, Sligo and the Sligo VEC.

#### **1. What is the Overall Aim of the Resource House Project?**

To start the discussion, the interviewees were asked to comment on what they saw the Resource House Project to be about. *“For me it is family support – it is supporting families to be the best they can, given the circumstances they find themselves in, and that obviously differs from family to family. I see the Project as being there to help families out in good and bad times. The families can drop in and pick from the menu of services that are there”*. Another interviewee suggested that the Resource House Project *“is about changing families by increasing their options, for example if children are getting their homework support, it helps them to participate more*

*effectively in school which may in turn lift them out of the education system/cycle the parents would have gone in to. It is increasing their options and enabling them to stay on in education and then change the whole poverty thing. I think there is a lot of that going on here*". Combining both of these views, the group agreed that the concept of empowerment is a key aim of the Resource House Project. In addition, as one interviewee suggested, *"I think people are valued in the Project – they are encouraged to take whatever steps are appropriate for them at the time. From what I have seen, it works. I am sure they have their failures too but I haven't seen much of it"*.

## **2. What are the most Successful Aspects of the Resource House Project?**

A very interesting discussion arose when the participants were asked what they saw as the most successful components of the Resource House Project. The following is a synopsis of the comments made.

### *a. Community based Project*

The group stated that one of the key strengths of the Resource House Project is that it is based within the community. *"I think one of the key things about this Centre is that it is based within the community and its programme of events are catered very much for the community and is very much articulated by the community, so it is very integrated into the community. So it is a huge benefit"*. Due to its community base, *"...the people on the street can drop in and pick from the menu [of services and help] available"*.

### *b. Progression of Former Service Users*

A number of points were made concerning the positive progression of families and individuals who formerly used the Resource House Project. One participant talked about the way in which some service users managed to progress onto Post Leaving Certificate Courses in Ballinode College or to third level education as a result of the help and support received from the Resource House Project. Another participant was aware of former service users who became involved with the Project on a CE schemes, *"...and now they have full time jobs. It is an indication that they got something here, like confidence and were able to move on and they actually have real, not CE jobs anymore. It was a massive step for them – they came from a background of long term unemployment. That is tremendous that they have moved on."*

### c. Community Identifying their Own Needs

One of the basic parts of the Resource House Project is the provision of a homework club, where children from the area can call in and be assisted with their homework. The point was raised by the interviewees that *“From the children’s point of view, they love coming in here – so that is a real indicator that things are going well”*. When the Resource House Project started the homework club initially, it was seen as a club for primary school children only. However, as that cohort of children got older, they began to ask for a homework club to be provided for older ages – *“Then, the children got older and moved to post-primary and four years ago it would have been seen as un-cool to come in looking for help with your homework. Whereas now, there is a post-primary homework club because the kids asked for it. They were quite happy to come to us to see if they could get a tutor. That is a real indicator of the worth of the Project”*.

With the aid of the homework club, the group believed that it helps the children who use it to be on *“...the same rung of the ladder as other children...from Rosses Point or Strandhill”*. Another participant commented that in linking with the Resource House Project in relation to certain children, she found the Project to be extremely flexible – *“...there are parameters around the programme but there is great flexibility, so it gives services and schools the flexibility to dip in and out of the Project. It is often the case that schools don’t have the time to make the link, but at least they can make the link with me who can try and help the child. That is what makes the difference”*.

### d. Advocating for Families & Openness

Another key positive component of the Resource House Project is the fact that it advocates for the families it works with when needed. As one interviewee suggested, *“There is a feeling too that the Project advocates on behalf of families too – staff will give them help as to how to approach agency ... The staff show them what to do, here is the number and go up to the office and make the call. They will be just dropping in for tea and this place is there to support them...”*

Related to this, the point was made that often times, the families who come to the Resource House Project just want to give out about a particular thing in their lives – *“The families are allowed to be themselves when they come in – they can sit and rant about the DES, about the principals – they know they are allowed to that. If they go up to Social Work, there will be a mask on, and they will say what they think the Social Worker wants to hear or they will say what they think the principal wants – allowing them to say what they want is a huge support in the Project for them.”*

*e. Innovative ways of Working with Families and Children*

One of the key defining features of the Resource House Project for the participants was the innovative way it works with families and children. One such example relates to the traditional idea of bringing children away for a day out during a summer programme. *“For example, every Project runs summer Projects. A few years ago [The Project Manager] decided that it wasn’t a children’s day out but a family day out”*. The Resource House Project decided that *“... if you want children to go to the Zoo, you have to go with them [meaning their parents]. Initially, the families kicked up as they just wanted to put their kids on the bus and wave bye-bye. [The Project Manager] said no – I thought that was fantastic. For many of them, it was the first time they had away day with their children. Last year, it was accepted and it worked. Many other Projects still just take bus loads of children away but [The Project Manager] stuck to her guns – it was very innovative – that is imagination and creativity. It benefits the children and gives them lasting memories with days out with their parents”*.

Another sign of this innovation is the fact that the Resource House Project stays open for August. According to the interviewees, this *“is a sign of real family support – that is their commitment to families”*. The group also raised the point that *“Some Projects take the children for a week. Here, the Project takes kids for one day a week for the whole summer, so the 7-10’s come every Monday during the summer”*. This ensures that all children in the area have the opportunity to be part of the Project activities for a whole summer and not just for one week.

### **3. Management Structures and Quality of Staff**

The next part of the discussion focussed on the management structure and the quality of staff of the Project. As with other groups, the majority of them were unaware of the exact management structure and so made little comment.

This was not the case when asked about the quality of staff. The group was very aware of the excellent team of staff involved in the Project. As one participant commented, she knows the Resource House Project is good because the children in the area love going to it. In addition, *“Once you mention [The Project Manager], their faces light up or the lads love [The Male Project Worker]. Before [The Male Project Worker] came, there was no male worker. They love that banter ... The kids are very positive about it. I do think too that the families see that [The Project Manager] is here to support them through thick and thin as best she can”*. The group felt that the Project Manager *“...has been the central focus or driver of the Project. I am not saying that she set out to do it as empire building but she certainly has given it 190%”*. In terms of the style of Management used by the Project Manager, one of the interviewees suggested that *“...when you come in the door, she [Project Manager] is sitting there – it is done in a way that they respect it [families] and I find her communication skills fantastic”*.

The group was also of the belief that the Project staff group was *“very upfront about things – there is no messing around it. I think that is the way people in Cranmore are and that is the way they work – so if you are late with your rent and you will be evicted – that is what will be said. It is up front and that is the way it is dealt with. The community see [The Project Manager] as [The Project Manager] – what you see is what you get. It is very much personality led too I think. It takes a certain type of personality to work in a Project like this”*.

### **4. Is the Location of Resource House Project Exclusionary?**

The topic of whether or not the location of the Resource House Project was excluding families from outside the broader Racecourse View Area from using it, was then discussed. The group stated that they had heard about this perception among certain parts of the community but had no real experience of it themselves. However, in relation to the homework clubs, one interviewee noted that *“I know the kids from the*

*other side of Cranmore go to Abbeyquarter for the homework club and there is a very distinct group of kids who come to here. Most of the kids who go here, their mums were on a CE scheme". It would seem from this that the Resource House Project attracts children and families from particular areas while this is not the case perhaps, for families from other parts of Cranmore or Sligo in general.*

Coupled with this, the group suggested a possible explanation might be that when the Resource House Project was established, it was based in Banks Drive, which "...was originally more run down than the other areas". This they felt may have deterred certain families from using the Resource House Project initially, which may explain the current absence of families from outside Racecourse View. In defence of this situation, the comment was made that "*I don't think it is a negative thing that it is attracting people from the immediate area – I think it is positive in a sense because maybe they feel that they have a service just for them. I don't think the Project would exclude people from other areas – I think it may just be in peoples minds*".

## **5. Relationship of the Resource House Project to other Family Support Services in Sligo Town**

The group was asked to comment on whether or not they thought that the Resource House Project links well with the other family support services in Sligo. From experience with the Project, one of the interviewees proposed that the way in which the Project links with other agencies across Sligo is often quite subtle, for example, "*...people could have come here and then advised to go to the VEC. But we wouldn't have necessarily known that. It is very much tailored to the individual*".

One of the other participants commented on the huge amount of overlap between her Project and Resource House Project. For this agency, the Resource House Project often provides detailed information on particular children. "*For me, it is more definite, because when I would get my list of kids from the schools, I would always check to see if any of the kids are from Cranmore. I would then check with [The Project Manager] to see if any of them were linking in with the Project and what supports are they getting. I would ask [The Project Manager] for advice on how to work with child and if I have to go to parents, how I would be received. Most of the*

*time, she will have the low-down – she would be able to point me in the right direction”.* In addition, it is often the case that the contact with Springboard and this agency is informal – *“The informal work is hugely important. A lot of the time, they won’t be any form filling, because it will be done over the phone or conversations at end of meeting – therefore little documentary evidence”.*

One of the issues put to the group was simply that the schools in the area get funded to provide homework clubs. Thus is it not a duplication of services for the Resource House Project to provide a homework club too. A comment from one of the participants explains the co-existence of services:

*“There will be homework clubs in school but you will always get children who won’t use them, but they will happily come to here, it is under a different guise. You come in, do your homework, get fed and get your sweets on a Thursday for being here. Therefore, I really don’t care where the money is given to as long as the kids get their homework done. I would be very aware of duplication too though because if there was a bereavement group going on in one area, we try to make sure that the same work isn’t being done here by the Project, but there will always be children who will be much more at ease working in a community setting – it is not done by a teacher. So there is that opportunity but we are always conscious too of the duplication of resources. We would try and plan to avoid this”.*

## **6. Difficulties in the way of Working**

The group of participants was asked to consider any difficulties it believed the Resource House Project faced which needed to be resolved.

### *a. Financial Difficulties and Staffing*

The group was aware of the fact that over the last few years, the Resource House Project had its funding threatened. The group agreed that *“...trying to do development work is linked to the issue around funding because you are not too sure how far you can stretch the boundaries”.* The lack of financial security does not *“...allow them to sit down and develop a blueprint for 5 year plan – that is just not an option for them. The same around staff – is there going to be funding for me next year? It is very unfortunate because if people aren’t secure in where they are, it is*

*very difficult for them to give of their best. They are giving their best now, but psychologically it is difficult for them to give it their all’.*

In addition to these financial difficulties, one interviewee stated that *“I am under the impression that they are always short staffed – I don’t know exactly but that is what I perceive.*

#### *b. Creating Dependence in the Community*

A very interesting philosophical question was raised by one of the participants about the homework club run by the Resource House Project. It was their view that in general, if parents do homework with their children, it is a good way of building a bond with those children. Acknowledging the fact that *“some of the families [in Cranmore] wouldn’t be able to do homework with them...”*, the question was asked, *“I am just wondering if the homework clubs are leaving the families and parents further behind”?* The question revolved around whether or not the work of the Resource House Project through the homework clubs in this case, was creating a dependency for the children, due to it never really enhancing the capacity of the parents to slowly take over the role of the Project with their child’s homework.

One of the interviewees who is involved with the homework club in the Project commented that *“If we do homework with them, we don’t sign their journals – so that is a link and for some of the older children [to their parents]”*. For older children too, *“we say we won’t do the reading with you – do it at home. But if we see a family that can’t do it at all, we do it with the child. There is a sense of not moving them along but if they go home and the homework isn’t done, it won’t get done either”*. Therefore, the child was regarded as being the central concern for the homework club while *“...you are trying to work with the parents at the same stage”*. In response to this, the suggestion was made that perhaps an attempt could be made by the Resource House Project to provide a parents homework support group. This could occur in an informal way by attracting mothers for example, into the Project for arts and crafts, with the aim being to build up their own skills and confidence first of all.

## Summary of Findings from Education Representatives

The following points summarise the perceived positive attributes of the Resource House Project as well as key suggestions for the Project to consider:

Positive Attributes of the Resource House Project	Suggestions for the Resource House Project
<ul style="list-style-type: none"> <li>• The Project supports and advocates for families in good times and bad times, leading to families being empowered.</li> <li>• The Project is community based and offers a menu of services to families.</li> <li>• There is a clear progression of former service users in all levels of education (CE Schemes, PLC, Third Level)</li> <li>• Community led development of homework club for post-primary school children.</li> <li>• The Project is always developing innovative ways of working, like the Summer Programmes being run in August and Family Outings, not just child outings.</li> <li>• The staff group is superb.</li> </ul>	<ul style="list-style-type: none"> <li>• While the Group did not see the Project as being exclusionary in the families it worked with, it felt that there is a perception among the community that the Project is only for residents from the Greater Racecourse View area. This needs to be addressed.</li> <li>• The lack of adequate and guaranteed funding disables the Project from being able to plan its work with families in the area.</li> <li>• There was debate in the Group as to whether the Project is creating a dependency culture through its work in the Homework Club with children, as parents were potentially being left further behind. It was agreed that the Project could introduce parents' homework support groups.</li> </ul>

### **6.3.1.5. Community & Voluntary Agencies**

A total of 6 people participated in this focus group, each representing a community or voluntary agency.

#### **1. What is the Overall aim of the Resource House Project?**

The participants were invited to comment on what they regarded as the overall aim of the Resource House Project. All of the interviewees agreed that as a family support Project, it has a very high profile in the area – *“I think what the Project does is great. They are based in the middle of them, they see the clients everyday and they build up a relationship with them”*. The point was also raised that *“I think you can’t quantify that. But quality wise, the respect that you see from the community and from the adults and children using this service – it is fabulous”*. Due to the diversity of experience of the members of the group, some were very aware of the work of the Resource House Project while others only had a vague idea as to what it does.

## **2. What are the Most Successful Aspects of the Resource House Project?**

For the next part of the interview, the participants were asked to identify examples of what they perceived to be the most successful aspects of the Resource House Project.

### a. Support at a Critical Time

One participant noted that *“I have only experience of one family who was supported from here – the family got enormous support at a very critical time. The children come into the Project during the evening and it is a great space for them to have”*. The point was also made that the Resource House Project tries hard to engage with families who need help – *“The fruit of their work may not be seen until these kids grow up”*. In addition, the group stated that *“When you see dysfunctional families at least holding their heads up and beginning to function somewhat better...”*, it is a sign of success of the Resource House Project. A general improvement in the self-confidence of the children from the area was also cited. *“If the Project wasn’t here , I would dread to think how those families would be now.”*

### b. Summer Programmes

Another example of success given by the group was the summer camps run by the Resource House Project each year – *“The summer camps have been fantastic....They run those too when all the other services are closed for the summer. They make a very big effort to fill gaps. They actively identify gaps and fill them”*. The existence of the camps illustrated for the group the flexibility of the staff and the leadership of the Project Manager.

### c. The Quality of the Staff

The overall quality of the staff and the leadership shown by the Resource House Project in the area was also cited as being a very successful part of the Project – *“The leadership in here – it is the kind of place you would want to work. The comradery, and the atmosphere....”*. *“I would have to agree with that – I think they are wonderful people and extremely professional and they support each other as well”*. In addition, one interviewee commented that *“They are almost like missionaries” - They are wonderful”*.

#### d. Linking with other Agencies

One of the most successful components of the Resource House Project is the way it links with other Projects across Sligo. As noted, *“over the summer, the Project brought a lot of groups together and we sat together to identify the gaps. They set very realistic goals and we must be able to achieve it - a very realistic approach”*.

### **3. Is the Location of the Resource House Project Exclusionary?**

The researcher then asked the group to discuss the idea as to whether or not they felt that due to its location in Cranmore, the Resource House Project may be excluding residents from outside the Greater Racecourse View Area. In response, one interviewee noted that *“I always thought that this Project was specific to an area, that was my notion. Whether that is the reality or not is another thing”*. Another of the participants was of the view that *“the aim of the Project is just to deal with 5-6 streets – I am not too sure. I remember showing them [Residents] that there was some art thing here and I showed them the brochure and they said, oh, is that what it is like. They have never even driven over here. Racecourse View still hasn’t a very good name in the area”*. The group agreed that perception of who the Resource House Project is for, is a big issue in the area – *“Now, that is up there in Racecourse View and that isn’t for us. That is in Abbeyquarter and that isn’t for us because it is several streets away”*. It was pointed out that through the work of the community forum and the establishment of residents fora, this perception can be challenged.

### **4. Difficulties in the Way of Working**

The group then discussed the key challenges they saw the Project having to face.

#### a. Linking with other Services

One of the interviewees was aware of a situation where the Resource House tried to develop and run a Drop in Centre for 2 nights per week. The Project suggested that another local Project would do it for the other 2 nights. However the other Project did not agree to it and so the idea was dropped. Therefore, this gap is a major challenge for the Resource House Project to overcome. Another interviewee commented that *“One of the queries I always have is about the fact that we have [another Project – No.1 and] we have [another Project – No. 2] and we have the Project and they all seem to be in worlds of their own. Are they really connecting and saying we are here for the people of Cranmore or are they trying to see where they can get funding to*

*support themselves. That is a perception I have. I would love to see them coming together more and saying we have these resources, you have those, can we work together”?*

#### *b. Funding*

The interviewees were also aware that over the last two years, the funding of the Resource House has been threatened – *“They were on a shoe string. They didn’t know if they were going to get any funding the next year or not. I think it is so awful that you have such committed professional people and they have to be worried about money. I think it effects the morale of the workers and the planning – it is very hard to plan if you don’t know if you will be around next year”*. The general agreement of the group was that funding needs to be more long term and that the time spent chasing alternative funding detracts from the overall work of the Resource House Project.

#### *c. Engaging Parents and Families*

One of the challenges identified by the group facing the Resource House Project is the need to continually encourage families to look for help when they need it. One comment suggested that *“...quite often people have that information but they still don’t have the confidence or self-esteem to walk through the door”*. Therefore, the need to build the confidence of families and encourage them to use the service is of continual importance for the Resource House Project.

### **5. Other Suggestions for the Resource House Project**

The final part of the interview saw the participants making suggestions as to areas the Resource House Project could consider as part of its work. The two most prominent issues that arose were in relation to *‘Falling through the Cracks’* and *‘Parenting’*. In relation to the former issue, the group talked about the fact that the Project is perceived as a powerful service provider in the Cranmore area. One of the knock on effects of this is that *“...because they are here, other services stay away and then some families are falling through the cracks”*. The group suggested this potential situation could be avoided through increased co-ordination between the Resource House Project and the other key services.

With regard to parenting, the group firmly agreed with one participant who stated that *“I always feel that there is a great need for parenting in Cranmore. A lot of parents don’t seem to be able to handle their children – yelling and swearing at them – I think it is a pity”*. Considering this, the group suggested that the Resource House Project could do more in providing parenting support, training and information for those parents in the area.

**Summary of Findings from Community and Voluntary Groups**

The following points summarise the perceived positive attributes of the Resource House Project as well as key suggestions for the Project to consider:

Positive Attributes of the Resource House Project	Suggestions for the Resource House Project
<ul style="list-style-type: none"> <li>• The Project provides support at critical times for families with the self-confidence of children who use the Project increasing all the time</li> <li>• Summer camps run in August when all other Projects are closed.</li> <li>• The staff group is exceptional.</li> <li>• The Project links with other agencies in the area to identify any gaps in services for families.</li> </ul>	<ul style="list-style-type: none"> <li>• While the Group did not see the Project as being exclusionary in relation to the families from the area, it was felt that there is a perception among the community that the Project is only for residents from the Greater Racecourse View Area. This needs to be addressed.</li> <li>• The Project should further pursue the idea of providing a joint drop-in evening facility for the community, in conjunction with other services in the area.</li> <li>• The issue of funding difficulties has the potential to have a negative impact on the morale of the staff.</li> <li>• The Project needs to continually engage with the most disenfranchised families and help build their confidence. However, the lack of clear boundaries between the various Projects can lead to some families falling through the cracks and not receiving any service at all.</li> <li>• The Project should consider the provision of parenting courses for families in the area.</li> </ul>

**6.3.1.6. ‘Catch-All’ Group**

A total of 9 representatives participated in this focus group, with the representatives being those who could not attend their specific Non-Participant Stakeholder Groups, as presented above.

## **1. What is the Overall aim of the Resource House Project?**

The first question required the group to focus on what they perceived the aim of the Resource House Project to be. The following comments were made in response. *“It is about working with families in the community. It is providing back up and practical support for children and families”*. In addition, *“It is helping children who won’t have back-up or good family support, through such activities and programmes as the afterschools group, the crèche, the outreach work and the various other programmes. Supporting these views, another participant remarked that “It doesn’t just offer support to broader families but it offers support to all families, whatever level of support they need. The Project also focuses in on the young person or families. It is as much designed to meet the needs of families as children. Their outreach work and their advocacy are central. It is as much about community development as a strict theoretical model of family support”*.

Other participants in the group commented that the Resource House Project is extremely practical and thus invaluable to families in the area; *“The Project is not just theoretical – right down to washing clothes and being an advocate for families. It is brilliant”*.

## **2. What are the most successful Aspects of the Resource House Project?**

The next task undertaken by the group was to outline key indicators of success of the Resource House Project. These were the comments made:

### *a. A Project built on Relationships*

One of the most successful parts of the Project is that it has created a relationship of trust with the families and children in the area. As one participant said, *“It is something to do with the relationship created between the Project and families in the area. It has made such a difference to the likes of mothers – If schools can’t get through to a child, the first port of call would be the Project. [The Project Manager] has got the parents to go to the school – the parents trust the Project”*. Related to this, another interviewee made the point that *“The Project gives people a sense that they are human – it is about relationships here - all the staff have. They involve people from the community in developing Programmes, they are fostering resilience too. The Project supports families in learning how to do the practical things and in*

*doing so gives them a sense of value and worth, when other agencies have written them off*". Backing up this, another participant commented that the Resource House Project "*...gives people a sense of self-worth and encourages them to use the gifts they didn't know they had*".

One of the representatives from education remarked about the huge improvement the Resource House Project has made among families in the area - "*You can see the difference in the parents coming up to the school – in the past, they often only came in the white heat of anger. But ... they come up and now don't think that the school is automatically against them. That is because they have more confidence in themselves – this has come from the Project without a doubt. There has been a mighty change over time*".

#### *b. Community-Based Project*

One of the most successful components of the Resource House Project is the fact that it is based in the community and there all the time. One of the knock-on-effects of this is that the Project acts as a preventative mechanism - "*If it [the Project] wasn't here, the HSE would have had a lot more problems with demands on Social Work.....*" Coupled with this work, the participants discussed the way in which the Resource House Project also serves as a facility for example, where medical consultants can come and hold appointments with families. This has led to the staff also learning about what is needed and so reinforces the motivation for families to see the importance of medical appointments, which they may not keep otherwise. - "*Sometimes it is the stick and other times it is the carrot. Because the Project is on the ground here all the time, that makes the difference*". It is often the case too that families "*might come in for one thing but they help them out with something else*", thus highlighting another successful component of the Project.

#### *c. Informal Support*

All of the participants were aware of the fact that a lot of the work done by the Resource House Project with families, is done in an informal way, over a cup of tea. "*That information is not captured in the way that information is collected. This is very important and it is important to show this...*" in the evaluation. The comment was made that this informal work helps to build up the confidence of the families it

works with and that this foundation is crucial for any real personal or social development to occur – *“You can get the best Social Worker, Family Support Worker and the best strategies in Education – but families can only go in at a certain level. If the foundation isn’t there, the lot will fall flat. The Project as a resource helps this”*. Supporting this view, a participant commented that *“I think it is excellent that the Project does small informal education with women’s groups for example. I feel that this has helped a lot of the women around here and has given them a sense of confidence”*.

In relation to the overall support provided by the Resource House Project for families, one interviewee stated that in his experience, the Project *“...has a knack of being very intelligent about things”*.

### **3. Management Structures and Quality of Staff**

As with the other focus groups, the participants in this group were asked to consider how well they thought the current management structure operated the Project as well as the overall quality of the staff on the Project. Due to no real knowledge of the management structure, no comments were forthcoming from the group

In relation to the quality of staff in the Resource House Project, the point was made that *“There is an ethos around here that is about fairness, open-mindedness, support and care. The community values this and so it doesn’t depend on personalities”*. To support this, one participant noted that *“The style of leadership trickles down too – so even if the personalities weren’t here, the structures would be in place to ensure that the Project continued its work”*. One of the participants made the valid point also that in her agency, there is a large turnover of staff and concluded that due to the stability of the staff group in the Project, *“There must be great supports in the Project as the staff stay on”*. Therefore, it would be important to identify what key processes are in action within the Project to ensure its continued success into the future.

### **4. Is the Location of Resource House Project Exclusionary?**

The group then progressed to discuss the common perception among some residents in Cranmore and Sligo that the Resource House Project is just for residents in the greater Racecourse View area. There was agreement among the group that *“The*

*Project has no problem in dealing with families or kids referred here from other areas” – therefore the so-called exclusionary nature of the Project is “...often just a perception in peoples minds”. As well as this, one interviewee suggested “The division between Racecourse View and other areas was worse in the past. Some of the families have moved in and others have come into area. This has opened up area. Families from Globe House has helped this too.*

## **5. Relationship of the Resource House Project to Other Family Support Services in Sligo Town.**

One of the main ways the Project links with other agencies in the area is through the referral process. When asked to comment on how successful they thought this linking with other agencies was, the group agreed that the referral process is working well. It is often the case that *“families don’t like dealing with [other] agencies. The Project is a great link as they support the residents in terms of working with agencies. It is a great capacity builder for residents. The Project sits in with families in these meetings. The Project thus provides access to families that it would be difficult to interact with otherwise. It ends up that you can deal with problems earlier – Project is brilliant - People are comfortable here and thus knock-onto other services”*

The group also suggested that the Resource House Project was always willing to accept referrals from other agencies and figure out *“...how and where someone can be best supported. The Project recognises things it can do with families but also when it would be more suitable to refer families on”*. Supporting this view, the comment was also made about the fact that *“This Project is very proactive and any agency that refers to it, knows that they will get a result....”* One such example of this has been the linking of the Resource House Project with the residents in Globe House. One interviewee noted how *“... from the very outset, the Project sees families as just a family – no better or worse than any other. They don’t give them any extra help than any other family – doesn’t raise expectations and avoids conflict down the road”*

Despite always being ready to help other agencies and link with them in whatever way possible, one interviewee made the point that the Resource House Project is not afraid to act in the interests of the families in question: *“The Project would be both a team player with other agencies, but it is never afraid not to tow the line. They are*

*very independent and have the needs of the families at the heart. People come to them because they know they are independent and challenge families. Just that they work with agencies doesn't mean they are the lackey – they are independent”.*

The point was also raised that the work of the Resource House Project does overlap with other agencies across Sligo. However, instead of cutting back the work of the Resource House Project, it was suggested that “...*the onus might be on the other agencies to look at how they can support the Project here, because of the amount of work that is deflected from them. It could lead to a resource coming from Housing or Social Work and being based in Project – part of team and ethos of Project. This would be an alternative to looking at narrowing the focus of the Project as is. One participant was aware of how this system has already worked within the Resource House Project. The child consultant and Public Health Nurse had used the Project as a base to see families in the area. Related to this, a point was made about the nature of the homework club provided by the Project and how much different the atmosphere was in comparison to the one provided in the Mercy College. “In terms of the homework club, there is a better chance that the children will attend it in the Project. No matter what sort of homework club is put on in school, it is still school and is formal. I wouldn't want anyone to leave here and come to one in school. They are missed here in a different way than if they were missing from school. Even some of the younger children come along with the older ones – they start scribbling away and then it is starting a habit at a younger age”.*

One final comment was made regarding the inter-agency work engaged in by the Resource House Project which suggested that the Project sees the bigger picture of family support – “*The Project doesn't try to hog everything either. They helped to design programmes, like x & y, but are happy to see it being run in other places...*” by different agencies.

## **6. Difficulties in the way of Working**

When the group was asked to identify if there were any difficulties facing the Resource House Project, the following issues were raised.

### a. Resources

The main issue here was that the group stated that the Project could and should be better funded. *“It is not easy to quantify the influence and the value of the service as it is so broad. The funding is so inadequate for the work they do and could do. It would relive so many families if they [Project] could do more”*. Over the last few years, there have been problems for the Resource House Project regarding funding which according to the group has resulted in the Project being overly stretched on a skeleton staff and resources. It was suggested by the group that the HSE need to be practical too about the way they treat the staff in the Project – *“...not to keep staff on a shoe string regarding funding – staff may have mortgages so [the HSE] need to be realistic and not just keep people hanging on”*.

When it was proposed that the Resource House Project could save money and resources if it honed in on a few key areas instead of being as broad as it is now, one interviewee strongly added that *“It is not that it needs to be more focussed on a particular aspect of family support but instead, that breadth needs to be re-enforced because that is one of the key strengths of the Project. Why? Because due to breadth, families may come on for one thing when it is something else they really need help with. But if stretched, they are trying to do, x, y & z, on a skeleton staff ... it is stressful for the staff”*.

To support the need for extra resources for the Resource House Project, a comparison was drawn between the Projects’ yearly budget and the cost of keeping one child in care for a year is. One participant told the group that the latter was €280k and remarked that *“If this was given to this Project, it would make a huge difference. As of now, I am sure that lots of children have been diverted away from care system as a result of Project being involved here. It is about changing the boundaries of where funders are coming from and not to be looking at the immediacy of results but looking at the longer picture – that is what family support is about”*.

With regard to the funders, many of the group participants were of the opinion that *“...on paper, the HSE says all the right things – but when it comes to reality - funding, they don’t seem to have a lot of respect for Projects of this kind. It may be the case too that the Project does not push itself enough and is thus not seen as strong*

*and powerful*". This problem with funding may also be due to the fact that much of the work of the Resource House Project is preventative in nature and so much of its work goes unnoticed.

*b. Planning for the Future and Service Co-ordination*

One of the suggestions made by the group for consideration by the Resource House Project was the need to have a formal forum where all of the agencies involved with families in the area could meet and discuss their plans. Apart from an informal network, none exists as of now. However, the group noted that this may be about to change – *"There may be one in the next year or so with the roll out of the children's committees. The County Development Board should have some aspect of this on their books too – there will be four pilot areas established soon – looking at Outcomes based work"*. Another possibility may be the use of the various committees already established as part of the Cranmore Regeneration Project.

One participant queried whether or not the Resource House Project ever considered replicating its service in other parts of the Sligo town. It was felt that the Project could work successfully with a lot of these families in other areas *"Because a lot of the families dealt with by the Project have now moved to other parts of town"*. This has often led to a loss of continuity for them in terms of care and support.

### Summary of Findings from ‘Catch-All’ Group

The following points summarise the perceived positive attributes of the Resource House Project as well as key suggestions for the Project to consider:

Positive Attributes of the Resource House Project	Suggestions for the Resource House Project
<ul style="list-style-type: none"> <li>• The Project provides practical support, help and advocacy to families and children at whatever level is needed. It is also a preventative service.</li> <li>• Much of the help provided by the Project to families is done so informally.</li> <li>• The Project builds trust and solid relationships with the families who use the service.</li> <li>• The Project involves the community in programme planning, which increases the perceived self-worth of the families involved.</li> <li>• The work of the Project had led to various examples of parental progression.</li> <li>• The staff is effective and ‘<i>intelligent</i>’ in dealing with things.</li> <li>• The developmental nature of the work of the Project cannot be seen immediately. However, time will reflect this good work.</li> </ul>	<ul style="list-style-type: none"> <li>• While the Group did not see the Project as being exclusionary in the families it worked with, it felt that there is a perception among the community that the Project is only for residents from the Greater Racecourse View Area. This needs to be addressed.</li> <li>• Building on the model already in use in the Project, the Project could facilitate other ‘<i>Professions</i>’ who support families to meet the families in the Project.</li> <li>• The issue of inadequate and insecure funding needs to be addressed. If the cost of keeping one child in care for a year was given to the Project, it would make a huge difference.</li> </ul>

#### **6.3.1.7. The Staff Group**

A total of 12 staff participated in this focus group. Following this, the researcher offered to meet with staff individually, to give them the opportunity to express any outstanding issues relevant to them. Subsequently, a total of 10 staff met the researcher on a one-to-one basis. The following data represents the ‘*strengths*’ of the Resource House Project as perceived by the staff group. The remainder of the data collected from the group are used in Chapter 8.

#### **Strengths of the Resource House Project**

The following points are those made by staff in the focus group in relation to what they regarded as the core strengths of the Project.

- “*We think of ourselves as a safe place – we think of ourselves as this and that is also how the kids see it*”.
- The Project is needs-led and listens to the people who use the service and thus has the ability to change.

- It is a community based family support Project, located in the middle of the community.
- The Project does not label people as for example, Travellers, lone parents, fathers or those deemed to be disadvantaged and work with them just because they fit into a category. The Project offers an open door support service to all children, families and adults who wish to use the service. Therefore, the Project would work in the same manner if it was located in any other part of Sligo town.
- *“One of the strengths of here is that everyone that works here gets it. A lot of work goes on here that people outside don’t know about – that is the way it should be, it is about discretion and being able to support people that need help, but it is not everyone’s business – discretion is key. It is more than a job for anyone that works here”.*
- The Project offers telephone phone support to families out of hours “24/7” *“...the phone is never abused by people; they don’t use it unless they really need something”.* Therefore, the service is accessible.
- The service is provided in a confidential manner.
- *“We are also getting better at knowing what our role is and when families are getting to a stage when they need to be referred when needed”.*
- The fact that many of the families continue using the Project *“shows trust”* of the Project among the community.
- The staff know their own strengths when it comes to dealing with families and staff rely on each other for support. *“If the strengths are not in house, we look for help from outside”.*
- The staff team is well-trained and there is great support in relation to continuing personal development and training.
- The families know that there is very little that would shock the team. This means that families do not ‘cherry pick’ the issues to discuss – *“...they get the issues out when they come in. This applies right across the board”.*
- *“We are a stand alone Project – we are funded by the Department of Health & Children and HSE but are not under the HSE and not an extra arm of them. If we were just part of the bigger machine, we wouldn’t be able to adapt and could cease to evolve as a project”.*

- There is a great camaraderie between staff and children and families who use the Project.

### 6.3.2 – Participant Stakeholders

This section presents the findings obtained from the one-one structured interviews conducted with adults and parents who have used the Resource House Project.

#### a. Socio-Demographic Profile

The results showed that 29% of those who participated in the interview were male with the remaining 71% being female. As shown by Table 6.2, the ages of the participants ranged from being under 24 (24%) to being 61 or over (10%). The under 24 and 25-30 age cohorts made up the most common ages for the participants, representing 46% of the entire group.

**Table 6.2**

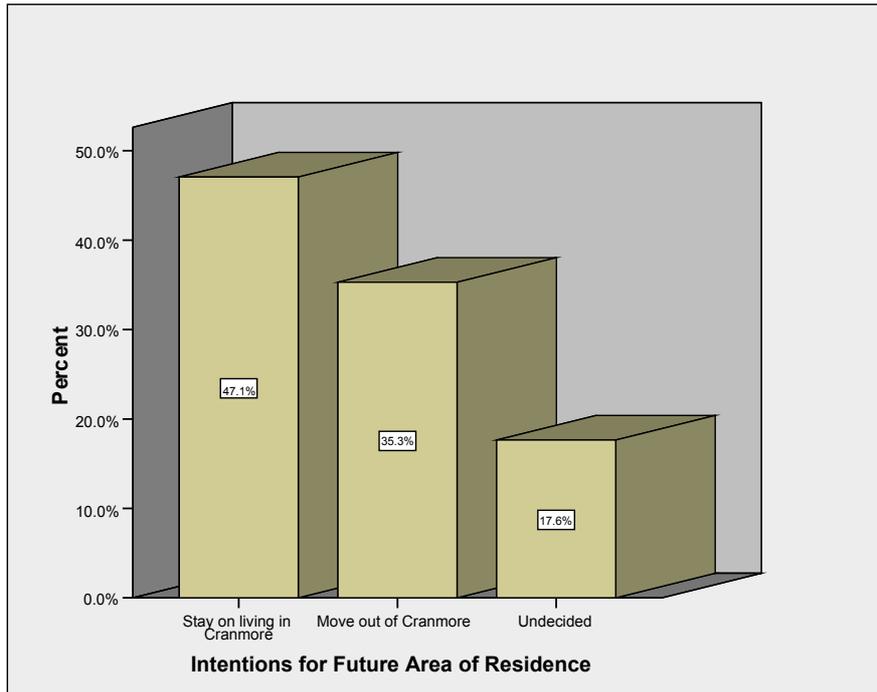
**Age of Respondents**

	Frequency	Valid Percent	Cumulative Percent
Under 24	10	24.4	24.4
25-30	9	22.0	46.3
31-35	6	14.6	61.0
36-40	3	7.3	68.3
41-45	5	12.2	80.5
46-50	1	2.4	82.9
51-55	2	4.9	87.8
56-60	1	2.4	90.2
61 or over	4	9.8	100.0
Total	41	100.0	

As the Resource House provides family support both to Cranmore residents and residents from the Sligo Town area, the respondents were asked where they lived. The results showed that 81% of them lived in Cranmore, with the remaining stating they lived outside the Cranmore area. At present, under the Cranmore Regeneration Project, radical changes are being proposed for the Cranmore area. In some cases, this could result in some of the Cranmore area being demolished. Coupling this with the other Cranmore-specific difficulties already documented in Chapter 3, it was decided to ask the Cranmore Residents, what their preference was, with regard to where they would see themselves living in the future. The figures revealed that just under half of the Cranmore residents (47%) stated they would stay on living in Cranmore for the foreseeable future. Some 35% indicated they were going to move out of the area, while a further 18% were undecided (See Figure 6.3)

**Figure 6.3**

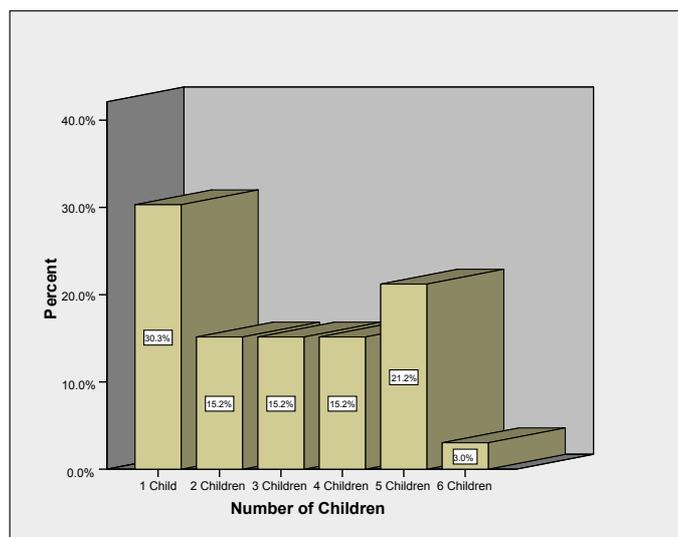
*Cranmore Residents' Preference for Area of Residence in the Future.*



It was also found that 81% of adults and parents interviewed had children under the age of 18. When this group of 81% was asked to indicate how many children they had in each age group, from under 1 to 18, it was found that just under one third (30%) had 1 child, while 15% had 2, 3 or 4 children respectively. A further 20% had 5 children while only 3% had 6 children under 18 (See Figure 6.4)

**Figure 6.4**

*Number of Children*



In an attempt to gauge the level of deprivation among the 42 participants, they were asked whether or not they had a medical card; the results showed that 93% of the

participants were in possession of one at the time of the interview. Related to this, Table 6.3 shows that 38% of respondents were either working full-time or part-time. A further 19% were looking after their home or family, while 12% were unemployed.

**Table 6.3**

**Present Status**

	Frequency	Valid Percent	Cumulative Percent
Working Fulltime	6	14.3	14.3
Working Part-time	10	23.8	38.1
Unable to work (illness or disability)	1	2.4	40.5
Retired	4	9.5	50.0
Unemployed	5	11.9	61.9
Student or Pupil	4	9.5	71.4
Looking after home/family	8	19.0	90.5
Other	4	9.5	100.0
Total	42	100.0	

The final part of the socio-demographic section asked the respondents to indicate if they were in receipt of any form of state-sponsored payment. Table 6.4 shows that the most common payments were ‘Child Benefit’ (n=19) and ‘Lone Parents’ (n=14), while the ‘Carer’s Allowance’ (n=1) and the ‘Domestic Carer’s Allowance’ were placed at the bottom of the receipts list.

**Table 6.4**

*Details of Payments received by Respondents*

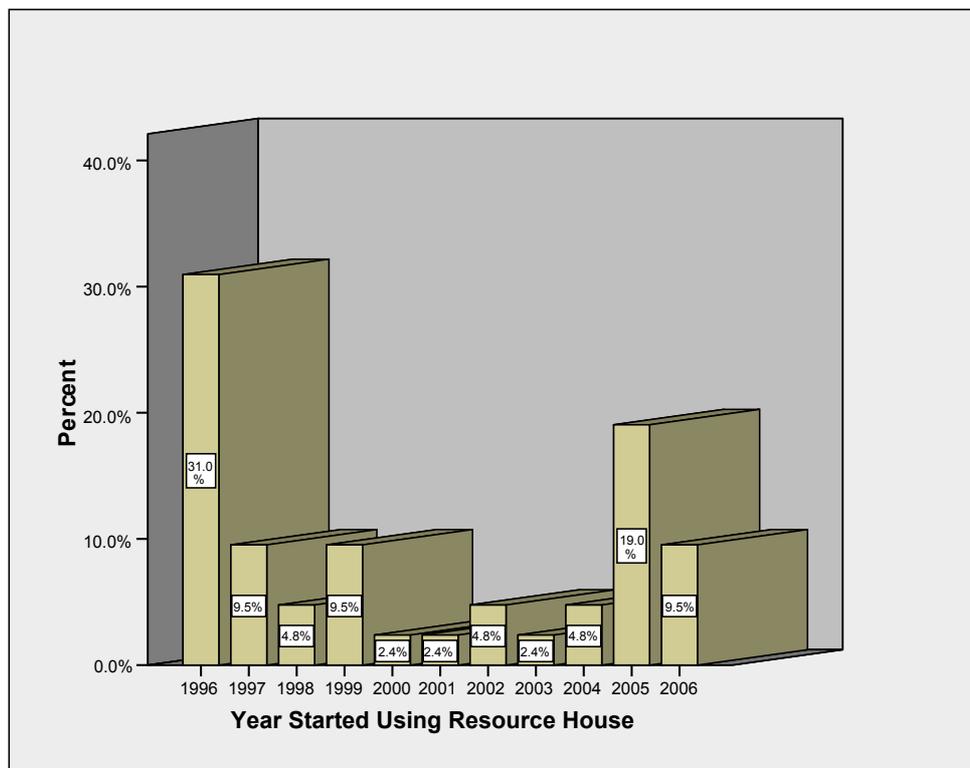
<i>Benefit Type</i>	<b>No. in Receipt of Payment</b>
1. Child Benefit	19
2. Lone Parents	14
3. Family Income Supplement	8
4. Other (e.g., Unemployment benefit, Child Care Allowance)	4
5. Job Seekers Allowance	3
6. Disability Allowance	2
7. Disability Benefit	2
8. Pension	2
9. Carer’s Allowance	1
10. Domestic Carer’s Allowance	0

## b. Contact with the Resource House

The aim of this section was to build a picture of the overall level of satisfaction adults and parents had, in relation to the Resource House. The initial question tried to ascertain when the respondents had made the 'First Contact' with the Resource House. The results showed that of the 42 respondents, 31% made their initial contact in 1996. Figure 6.5 presents the details of when the other respondents made their initial contact with the Resource House Project.

**Figure 6.5**

*When the Respondents made the 'First Contact' with the Resource House*



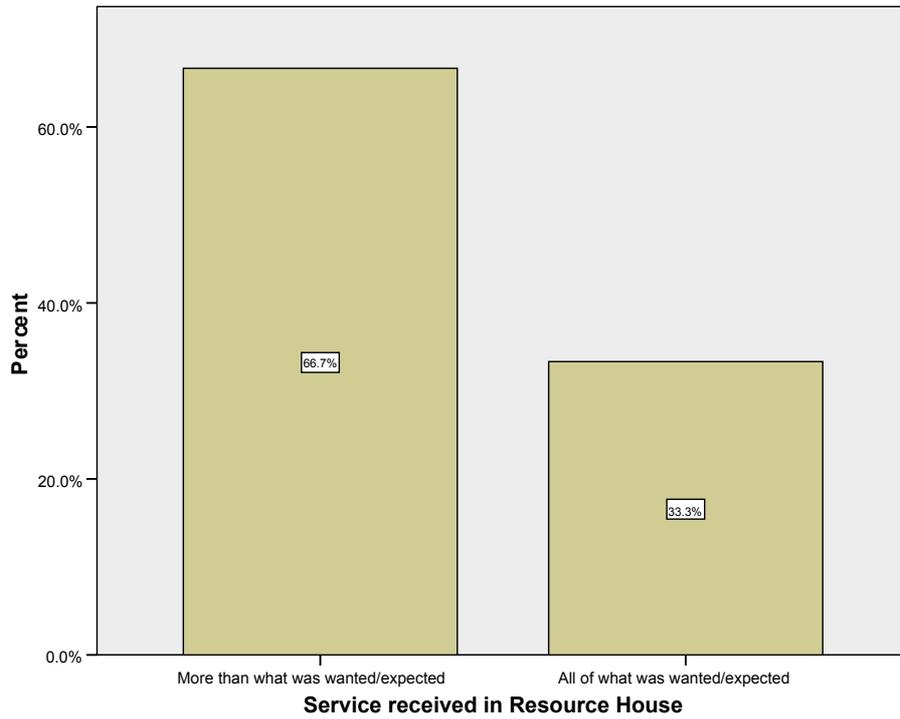
When asked to describe the reasons that led them to make contact with the Resource House, a comprehensive list of answers was created (See Table 6.5). The primary reasons cited were 'Taking part in Summer/Holiday Programme' (n=28), 'Child Attending Crèche' (n=25), 'To Get information' (n=24) and 'Advice on Personal Problems' (n=21).

**Table 6.5**  
*Reasons for Making Contact with the Resource House*

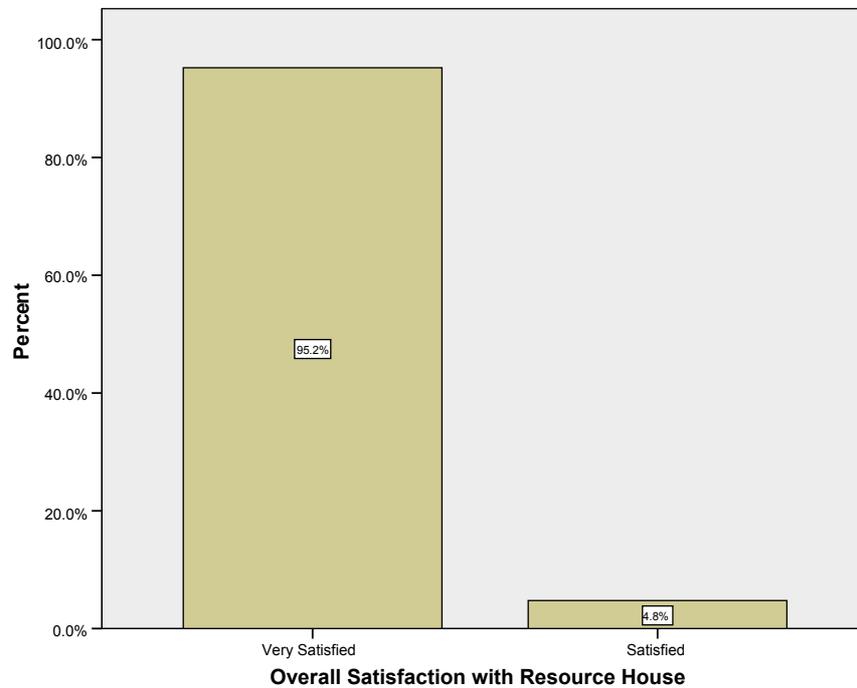
Reasons	Number of times Ticked
1. Taking part in Summer/Holiday Programme	28
2. Child attending crèche	25
3. To get information	24
4. Advice on personal problems	21
5. Child attending Homework Club	17
6. Meet & socialise with friends	16
7. Child attending activity-based programme	12
8. Learn a new skill	12
9. Use internet/computers	12
10. Support in dealing with my child/family	12
11. Get help with job applications/CV/Apply Course	11
12. FAS/Other Scheme/Placement	11
13. Help in dealing with other agencies	10
14. Was referred to Project for help/support	7
15. Family Access	6
16. Help with legal issues	4

The participants were then asked to consider the service they had received in the Resource House and to rate if their expectations were met. Figure 6.6 vividly illustrates that while considering the service they received in the Resource House Project, 67% of respondents stated that they had received ‘*More than*’ what they had expected, with the remaining 33% receiving ‘*All of*’ what they had expected. Following this, the group was asked to rate their overall level of satisfaction with the help they had received from the Resource House (See Figure 6.7). Again, the results were extremely positive for the Project, as 95% of respondents indicated they were ‘*Very Satisfied*’ with the Project, with the remaining 5% being ‘*Satisfied*’.

**Figure 6.6**  
*Expectations of Service in Resource House*



**Figure 6.7**  
*Level of Satisfaction with Help Received in Resource House*



The responses to the next set of questions turned out to be equally supportive of the work of the Resource House Project. All of the respondents (100%) were of the view

that the Resource House is respected and needed in the area. In addition, when asked to indicate if the support received in the Project had made any difference in their lives, 95% of respondents stated that the Project had made things for them ‘*Much Better*’ or ‘*Better*’ (See Table 6.6). Only 5% stated that the work of the Resource House Project had made no difference in their life and none of the respondents suggested that the Project made life worse for them. It was, therefore, not surprising to find that 86% of participants were of the view that the Resource House has had a positive impact on the community.

**Table 6.6**

**Impact of Help Received in Resource House**

	Frequency	Valid Percent	Cumulative Percent
Much Better	32	76.2	76.2
Better	8	19.0	95.2
Stay the Same	2	4.8	100.0
Total	42	100.0	

**Table 6.7**

**Resource has Positive Impact on Community**

	Frequency	Valid Percent	Cumulative Percent
Yes	36	85.7	85.7
No	6	14.3	100.0
Total	42	100.0	

Of the 42 respondents who took part in the interviews, it was also found that just under two thirds of them (61.9%) use or had used the Resource House on a ‘*Daily Basis*’, with 86% using the Resource House Project once a week or more often. This again reflects the need for the Project in the community (See Table 6.8)

**Table 6.8**

**Frequency of Use of Resource House**

	Frequency	Valid Percent	Cumulative Percent
Daily	26	61.9	61.9
Several times a week	6	14.3	76.2
Once a week	4	9.5	85.7
One-three times per month	3	7.1	92.9
Several times a year	2	4.8	97.6
Other	1	2.4	100.0
Total	42	100.0	

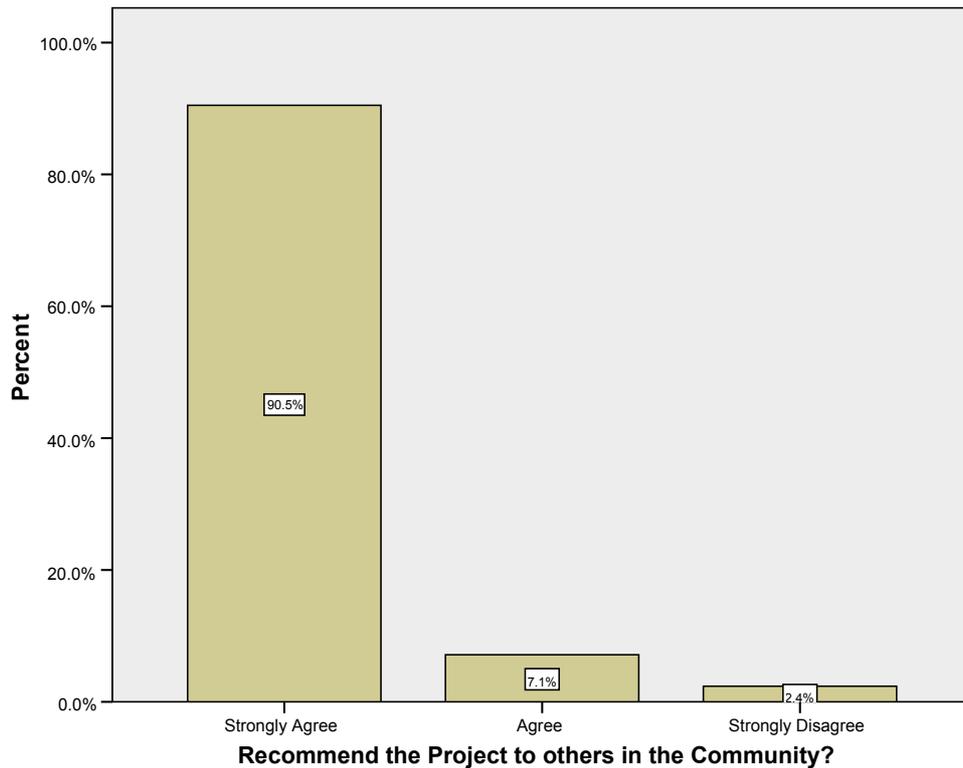
The overwhelming support for the Resource House was shown again, when the analysis was completed on ten statements, which were presented to the respondents, concerning the work of the Resource House Project. Without exception, as is shown by Table 6.9, well over 90% of respondents strongly agreed or agreed with the statements presented to them. Possibly one of the best examples is from Question 10, which asked the respondents if they would recommend the Resource House Project to people in the community. Some 98% stated that they would recommend (strongly agree and agree) the Project (See Figure 6.8)

**Table 6.9**  
*Rating of Various Statements about Resource House by Parents and Adults*

Various Statements	Strongly Agree %	Agree %	Don't Know %	Disagree %	Strongly Disagree %
<i>1. Staff listened to me</i>	79	19	0	0	2
<i>2. Staff understood what I was trying to say</i>	81	17	0	0	2
<i>3. I was treated with respect by staff</i>	93	5	0	0	2
<i>4. My child/children/family were treated with respect by staff</i>	91	9	0	0	0
<i>5. I was treated fairly by staff</i>	88	10	0	0	2
<i>6. My child/children/family were treated fairly by staff</i>	86	11	0	0	3
<i>7. Staff are good at what they do</i>	86	12	0	0	2
<i>8. Staff worked with me to make life easier</i>	81	14	3	0	2
<i>9. Staff were available to me when I needed them the most</i>	83	12	3	0	2
<i>10. I would be happy to recommend the Resource House Project to other people in my family or community who may be under pressure or be stressed.</i>	91	7	0	0	2

**Figure 6.8**

*Extend to Which Respondents would Recommend Resource House to Others*



During the final part of the interview, the respondents were invited to comment on two questions if they so wished, namely, ‘*What might have made your time with the Resource House Project better or more helpful?*’ and ‘*Have you any other suggestions relating to the Project you would like to make?*’ The following answers were given:

**Things that would have made their time with the Resource House Project More Useful**

- If the crèche was bigger and had a better play area.
- If the Project was open longer each day, particularly open in evenings and provided activities for the teenagers in the area.
- If it employed more staff.

**Any Other Suggestions**

- Encourage others outside the Racecourse View Area to use the Project.
- More after-school programmes for kids – not just homework based
- Open the Project during weekends.
- If the Project was given more funding, it could expand its programme of activities.

### **Summary of Findings from ‘Adults and Parents**

The following provides a summary profile of the responses from the Adults and Parents who participated in the evaluation:

- A total of 81% of those interviewed were currently living in Cranmore.
- Of the Adults and Parents who participated in the interviews, 47% stated that they wish to stay on living in Cranmore for the foreseeable future, while 35% were planning to leave the area.
- Some 81% of the group had children under 18.
- A total of 93% of the group had medical cards at the time of the interviews.
- In terms of work, 38% either had a full time or part time job, with a further 12% being unemployed.
- The most common reasons for making contact with the Resource House was for taking part in the summer programme, their child attending the crèche, to get information or to get advice on personal problems.
- With regard to their level of satisfaction with the Resource House, 95% were very satisfied while none of the respondents were unsatisfied. Similarly, 95% stated that the Project made things much better or better for them.
- The data showed that 62% of the respondents used the Resource House daily, with 86% of them doing so once a week or more often.
- Finally, 98% stated that they would have no problem in recommending the Project to other families in the area.

### **6.4 Conclusion**

The primary aim of this chapter was to present the views of the key stakeholders who link in with the Resource House Project. The data was divided into two main groupings, Non Participant Stakeholders and Participant Stakeholders, with a total of 113 individuals adding their views to the evaluation. The summary boxes identified at the end of each of stakeholder groups will be used as the basis for an overall discussion of the Project in Chapter 8.

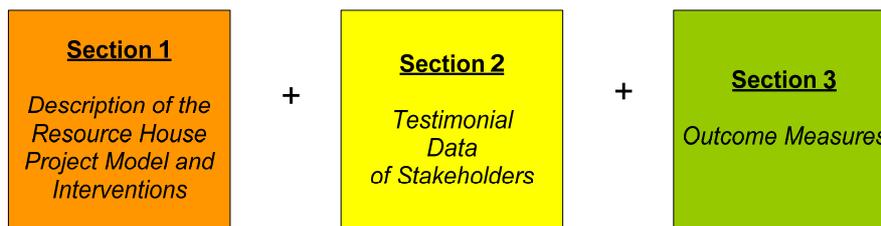
# Chapter 7

## Outcome Measures – Resource House Project

### 7.1 Introduction

As illustrated by Figure 7.1, the final component of this evaluation focussed on measuring outcomes for those who have used or continue to use the Resource House Project. This need is in line with recent trends within family support programmes across the western world, where increasingly more importance is being attached to *results based accountability* or outcomes. The ability of a Project such as the Resource House to generate and track positive life outcomes for its clients, provides credence for the Project’s way of working as well as providing better signposts on what works, for family support practitioners (See Chapter 2 for discussion of outcomes)

**Figure 7.1**  
*Key Components of Springboard Evaluation*



The chapter starts with a description of the methodology used to investigate the use of micro and macro level outcome measures in the Resource House Project. The section after that presents the findings, which resulted from the use of specific outcome measures with young people in the Resource House Project.

### 7.2 Methodology

The overarching aim of Objective 3 of the evaluation (See Chapter 1) was to *assess possible life outcomes for the Service users who engage with the Resource House Project*. In this section, the design of the research methodology employed to assess life outcomes for service users is explained.

### **7.2.1 Designing the Methodology**

In Chapter 2, the theory relating to using outcomes to better understand children's and families life was discussed. In particular, it was noted that in order to achieve the positive life outcomes for children as outlined in the UNCRC, policy makers, service providers, practitioners and policy makers should subject their work to questions such as (Bradley, 2008: 3):

- Are we making a positive difference for children? (*as a result of planning for the right outcomes*)
- Will we know it? (*by monitoring achievement of agreed outcomes*)
- How will we measure this (*through evaluation that gets us to full information or "the true story behind the apparent story"*)

Guided by these questions, the initial task in designing the methodology needed to measure outcomes among young people who use the Resource House, was to examine whether or not the Project was already assessing or measuring the outcomes. After detailed discussions with the Project Staff and Management, it became clear that no outcomes-measuring process was in place within the Resource House Project. In terms of the official client-based information recorded by the Project, be it for use internally or for forwarding onto its funders, figures on throughput, programmes provided, client groups worked with and referrals were the core details recorded. Therefore, in light of *Practice Principle No 10* for family support as discussed in Chapter 2, the absence of any such outcome-measures, established the need to do so for the Resource House Project.

After various meetings between the researcher and the Project Staff and Management, it was agreed that a two-tier system of outcome-measurement was needed. These two levels became known as *Micro-Level Outcome Measures* and *Macro-Level Outcome Measures*.

#### **a. Designing the Methodology - Micro-Level Outcome Measures**

It was decided that the period of the evaluation could best be used by piloting and implementing appropriate micro-level outcome measures for the Resource House Project. It was agreed that the focus of attention for the micro-level outcome measures would be on the children and young people who engage with the Project.

This decision was informed by the recognition of the importance of prevention and early intervention with children to better enable them to achieve positive life outcomes.

After a detailed analysis of the aims of the Resource House Project (as shown in Chapter 5), it became obvious that one of the key aims of the Project is to enhance the *Social Support* and *Self-esteem* of the children and young people who use the Project. Through this work, it is hoped that these children and young people would be better able to cope with life's challenges and be more resilient. Following this, appropriate standardised assessment tools, designed for measuring *Social Support* and *Self-Esteem* outcomes for children/young people were sourced. After consulting with the Project Staff and Management and the RAG, it was agreed that three standardised tools would be used:

### **1. The Social Provisions Scale – Child Version**

One of the first social thinkers to investigate the impact of social factors on physical health was the French Sociologist, Durkheim. He studied the prevalence of suicide in French society after the French Revolution (1789) and despite suicide being primarily a personal event, he argued that the macro social structure, had a deep and profound impact on the overall well-being of the individual. In the 1970s', while working on social support, Sidney Cobb commented that:

*“Social support is defined as information leading the subject to believe that he is cared for and loved, esteemed, and a member of a network of mutual obligations... It appears that social support can protect people in crisis from a wide variety of pathological states: from low birth weight to death, from arthritis through tuberculosis to depression, alcoholism and the social breakdown syndrome. Furthermore, social support may reduce the amount of medication required, accelerate recovery, and facilitate compliance with prescribed medical regimes”*

(Cobb, 1976: 300)

Cobb (1976) went on to suggest that social support can be seen as information, which falls naturally into three main categories:

- Information held by the subject believing that they or she is cared for.
- Information held by the subject that they are esteemed and valued.
- Information held by the subject that they belong to a network of communication and mutual obligation.

Following this, Weiss, another theorist in social support, developed a scale in the US in the 1970's, to measure what we receive from our relationships with other people, in other words *social support*. He called his scale the *Social Provisions Scale* (SPS) and it contained six key '*social provisions*'. In 1987, Cutrona and Russell further developed the SPS. From an Irish perspective Dolan and Cutrona produced a shorter version of the SPS for use with children and adolescents (2002), called the Social Provisions Scale – Child Version (CV SPS) This adapted scale measures the *type of social support* in the child's/adolescence's life, namely:

1. *Concrete Social Support*
2. *Esteem Social Support*
3. *Emotional Social Support*
4. *Advice Social Support*

In addition the scale measures the source of social support in the child's/adolescence's life, namely from Friends, Parents/Carers, Siblings, and support from an Other Adult (See Appendix 6 for the Scale)

## **2. The Pictorial Scale of Perceived Competence and Social Acceptance for Young Children**

The second scale chosen was the *Pictorial Scale of Perceived Competence and Social Acceptance for Young Children*. It was developed in the US in 1980 by Harter & Pike. The scale examines *Competence* and *Acceptance* of children, across Cognitive Competence (6 items), Physical Competence (6 items) and Peer Acceptance (6 items). There are two versions of the scale one for pre-school children and one for children up to 9 years of age, with there being a separate one for boys and girls. In addition, there is also a Teacher's/Project Workers Rating Scale, based on these 3 scales. This allows for a comparative analysis between the young person's scores and that of a Project Worker that works with them (See Appendix 7 for a copy of the Scales).

## **3. Coopersmith Self-esteem Inventory (Short Form)**

The third scale was chosen for its ability to measure the self-esteem of children and young people. From the 1950s onwards a number of key psychologists, sociologists and personality theorists began to investigate the notion of self-esteem and its link to a person's overall behaviour in life. One of the primary motivations for this research was the realisation that some young people were exhibiting a distinct lack of

motivation in terms of their school life, with absentee rates, drug use and general misbehaviour, beginning to spiral out of control. The theorists found that a positive feeling about oneself did in fact, deter one from getting involved in these anti-social and troublesome behaviours (Coopersmith, 1981).

By utilising both sociological and psychological theories of socialisation and human development, it soon became clear that in general, a person is not born with a negative image of themselves. Instead, they develop these ideas from their interaction and experiences within society.

As Coopersmith (1981:1) noted, “*self-esteem is a set of attitudes and beliefs that a person brings with him or herself when facing the world*”. In practice, from an educational perspective, many studies both internationally and in Ireland have shown the link (Tovey & Share, 2003) between general success in education and high levels of self-esteem. Research among children under the umbrella of Early Childhood Care and Education (Hayes, 1999) also shows that children that possess a positive sense or image of themselves will succeed much more than a child lacking these attributes. On the other end of the scale, studies by Cleary, McDonald & Forkan (1999) and Forkan (2001) clearly indicate the *felt need* to belong and to receive positive reinforcement from family and peers for those in the early, middle and late teenage years.

As Coopersmith states, “*...building self-esteem is not a secondary, luxury option in schools’ programs, but is more of a basic component of programs geared to motivate learning*” (ibid). This among other reasons provided the justification for the decision by this evaluation to investigate the self-esteem of a sample of young people involved.

One of the key self-esteem measurement tools is the Self-Esteem Inventory (SEI), introduced by Coopersmith in 1967. For the purposes of this evaluation, *The School Short Form* was used. This was designed for use among students aged eight to mid-to-late teens and has a total of 25 items (See Appendix 8 for Scale).

**b. Implementing the Methodology - Micro-Level Outcome Measures**

Subsequent to sourcing all three micro-level outcome measures, a letter was sent to parents who had children aged 5-18, who used the Resource House Project. The letter asked parents for consent for their daughter/son to participate in the evaluation. Following this, 22 young people completed the SPS scale, 20 completed the Harter and Pike Scale while 21 young people completed the SEI. Table 7.1 indicates when baseline (T1) and follow up data (T2) were collected. A completion rate of 82% was achieved for the SPS, while 81% of the original cohort was re-measured for the SEI at T2. As the initial data collection for the Harter and Pike Scale took place in April/May 2007, there was no follow up data at the time of going to print with this report. This will be collected by the Staff in May 2008.

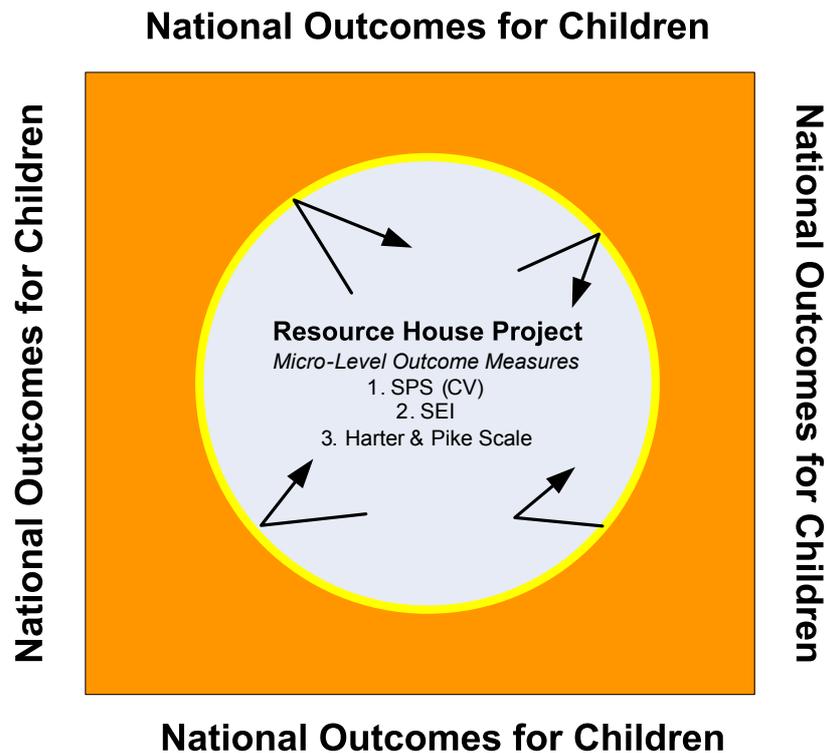
**Table 7.1**  
*Details of Data Collection for Micro-Level Outcome Measures*

Name of Measurement Tool	Phenomenon Measured	T1 Data Collection		T2 Data Collection		Completion Rate T2-T1
		Date	Number	Date	Number	
1. Social Provisions Scale (Child Version)	Types and Sources of Social Support	Nov 06	22	Nov/Dec 07	18	82%
2. Harter & Pike Scale	Perceived Competence and Social Acceptance	April/May 2007	20	NA	NA	NA
3. Coopersmith Self-Esteem Inventory (Short Form)	Self-esteem	Nov 06	21	Nov/Dec 07	17	81%

### **c. Designing the Methodology - Macro-Level Outcome Measures**

As suggested above, introducing micro-level outcome measuring tools in the Resource House Project aimed to enable the tracking of life outcomes, initially for its children and then later for the adults who use the Project. This activity in itself is useful and can reveal a considerable amount about the nature of a Project of this kind. However, as shown by the arrows in Figure 7.2, at present, there are few real links between outcomes such as these and the desired national outcomes for children for example, as set out in the National Children's Strategy (2000). In effect, if the outcomes aimed for by a Project of this kind are not related to the national outcomes for children, national progress for outcomes for children and young people will be virtually stagnant.

**Figure 7.2**  
**Linking Micro and Macro Outcome Measuring for Children**



The obvious way a Project like the Resource House can add its weight behind the push to achieve a focus on national outcomes, is through its reporting mechanism. In terms of the current reporting mechanism, the Resource House is only required to submit the following to the Information Officer in the HSE:

- 1. Number of new referrals to the Project on a monthly basis.*
- 2. A detailed account of who uses the Project, which is sent on a quarterly basis.*

Figure 7.3 shows the official form used to collect the more detailed account of who uses the Project. The key *performance indicators* used are the numbers and sources of referrals, type of work engaged in with clients, number of cases closed and level of need of families engaging with Resource House Project. The use of just *performance indicators* illustrates an absence of a formal focus on achieving outcomes for children in the North West. It also goes a long way in explaining the already alluded to absence of outcome measures being in place within the Resource House Project.

**Figure 7.3**

HSE Springboard Quarterly Performance Indicators																																			
Report Date:	31st December 2007																																		
Project Name:	Sligo Springboard																																		
LHO Area:	Sligo/Leitrim																																		
Project Leader:	Paula Gorman																																		
Management Organisation:	Board of Directors																																		
Referral Period:	1st October - 31st December 2007																																		
	Families	Parents	Children	Total (parents & children)																															
No. of families referred				0																															
No. of children/parents referred to the project for just group work (if applicable)				0																															
Source of Referral (Family Referrals):	<table border="1"> <tr><td>Social Work</td><td></td></tr> <tr><td>Health Board (other)</td><td></td></tr> <tr><td>Gardai</td><td></td></tr> <tr><td>Community Project</td><td></td></tr> <tr><td>Youth Project</td><td></td></tr> <tr><td>Self Referral</td><td></td></tr> <tr><td>Schools</td><td></td></tr> <tr><td>Family</td><td></td></tr> <tr><td>Other</td><td></td></tr> <tr><td>Total</td><td>0</td></tr> </table>					Social Work		Health Board (other)		Gardai		Community Project		Youth Project		Self Referral		Schools		Family		Other		Total	0										
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Youth Project																																			
Self Referral																																			
Schools																																			
Family																																			
Other																																			
Total	0																																		
Number of Children/Parents currently attending for:	<table border="1"> <tr> <td colspan="6"><i>Direct/Individual Work/One to One Contact With</i></td> </tr> <tr> <td>Children</td> <td></td> <td>Mothers</td> <td></td> <td>Fathers</td> <td></td> </tr> <tr> <td colspan="6"><i>Group Work Programmes With</i></td> </tr> <tr> <td>Children</td> <td></td> <td>Mothers</td> <td></td> <td>Fathers</td> <td></td> </tr> <tr> <td>Children</td> <td></td> <td>Mothers</td> <td></td> <td>Fathers</td> <td>Others</td> </tr> </table>					<i>Direct/Individual Work/One to One Contact With</i>						Children		Mothers		Fathers		<i>Group Work Programmes With</i>						Children		Mothers		Fathers		Children		Mothers		Fathers	Others
<i>Direct/Individual Work/One to One Contact With</i>																																			
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<i>Group Work Programmes With</i>																																			
Children		Mothers		Fathers																															
Children		Mothers		Fathers	Others																														
Breakdown of numbers of Non-Referred families attending for less intensive interventions:																																			
Details of number of cases closed:	<table border="1"> <tr> <td>Cases Closed Completely</td> <td></td> <td>Cases Closed from High Intensive Work to Low Intensive</td> <td></td> <td>Cases Closed from Low to Generic</td> <td></td> </tr> </table>					Cases Closed Completely		Cases Closed from High Intensive Work to Low Intensive		Cases Closed from Low to Generic																									
Cases Closed Completely		Cases Closed from High Intensive Work to Low Intensive		Cases Closed from Low to Generic																															
List of current programmes of work currently operating (bullet points only)																																			
Level of Need Families Present with at REFERRAL STAGE (this quarter only)	<table border="1"> <tr> <td>Level of Need</td> <td>Number of Families</td> </tr> <tr><td>LEVEL 1 (Primary)</td><td></td></tr> <tr><td>LEVEL 2 (Secondary)</td><td></td></tr> <tr><td>LEVEL 3 (Tertiary)</td><td></td></tr> <tr><td>LEVEL 4 (Quarternary)</td><td></td></tr> </table>					Level of Need	Number of Families	LEVEL 1 (Primary)		LEVEL 2 (Secondary)		LEVEL 3 (Tertiary)		LEVEL 4 (Quarternary)																					
Level of Need	Number of Families																																		
LEVEL 1 (Primary)																																			
LEVEL 2 (Secondary)																																			
LEVEL 3 (Tertiary)																																			
LEVEL 4 (Quarternary)																																			
Level of Interventions Provided to NEW Families AFTER ASSESSMENT Stage( this quarter only)	<table border="1"> <tr> <td>Level of Interventions</td> <td>Number of Families</td> </tr> <tr><td>LEVEL 1 (Primary)</td><td></td></tr> <tr><td>LEVEL 2 (Secondary)</td><td></td></tr> <tr><td>LEVEL 3 (Tertiary)</td><td></td></tr> <tr><td>LEVEL 4 (Quarternary)</td><td></td></tr> </table>					Level of Interventions	Number of Families	LEVEL 1 (Primary)		LEVEL 2 (Secondary)		LEVEL 3 (Tertiary)		LEVEL 4 (Quarternary)																					
Level of Interventions	Number of Families																																		
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LEVEL 3 (Tertiary)																																			
LEVEL 4 (Quarternary)																																			
Report Prepared By:																																			

To overcome this gap, due to the restructuring of the North Western Health Board Region in 2002, a multi-disciplinary North West Children and Young People's Committee was established, charged with agreeing and prioritising an integrated strategic approach to children and young peoples services at a regional level. This Committee evolved into the *Children's Health and Well-Being Network* in early 2006. One of the key aims of the Network was to establish "...a series of inter-agency child based outcome targets, as there is now a general consensus that the well-being of children and young people goes beyond any one organisation" (Children's Health and Well-Being Network, 2006: 41). Since then, the Network set out *Five Outcome Statements*, in addition to supporting indicators, which they hope can be achieved for children and young people in the region. The Five Outcomes are:

1. *Being Healthy*
2. *Staying Safe*
3. *Enjoying and Achieving*
4. *Making a Positive Contribution*
5. *Achieving Economic Well-being*

As this report is being written, in addition to the work of the Network, four pilot sites have emerged as part of the Children's Services Committees initiative and Towards 2016. Their aim is to examine how best to bring about positive outcomes for children in Ireland. What is being aspired for is that each child and family support Project in Ireland, will re-orient itself where possible, to an outcomes based approach. The individual Projects will then feed their micro-level outcome scores, in addition to other key in-house statistics, into a centrally held national database. This can then be monitored closely to assess whether or not the desired outcomes have been reached, regionally and nationally.

#### **d. Implementing the Methodology - Macro-Level Outcome Measures**

Despite the fact that these regional and national outcomes have not yet been agreed, it was suggested that the evaluation of the Resource House Project could begin to examine how the Project could begin to develop its own macro outcome framework. After focussing on the four stated aims of the Resource House Project (See Chapter 5), a key question was asked: - *If the Springboard Project was stripped back to its core, what key outcomes would it want to achieve for families, adults and children?* Using the logic behind the Outcomes and Indicators model developed in Vermont by Hogan (See Chapter 2 for discussion), the following Outcomes and Indicators have been suggested for use in the Resource House Project, by the Project staff and the

RAG. The indicator-data is information that is already known by the Project about the families, adults and children who engage with them. Therefore, if this system was implemented, outcomes could then be tracked on an annual basis. This statistical information could be combined with the results of micro-level outcome measures from above, and fed into the regional databank relating to outcomes for children and families. It is hoped that this way of working will link the micro level work of the Resource House Project to the macro aims of society for children and families.

## **OUTCOME 1 – ADULTS ACHIEVE THEIR FULL POTENTIAL**

### **Indicators**

- % Adults in employment (full or part-time)*
- % Adults who left education early*
- % Adults who avail of adult education/literacy schemes*
- % Adults in receipt of Social Welfare Payments*
- % Adults affected by domestic violence*
- % Adults in receipt of psychological/counselling /support services*
- % Adults involved in leisure activities*
- % Adults involved in criminal activities*
- % Adults experiencing emotional stress*
- % Adults experiencing environmental stress*
- % Adults experiencing physical stress*
- % Adults with healthy family support systems*
- % Adults with healthy social support systems*
- % Adults living in suitable accommodation*
- % Adults actively seeking support/ education/ training facilities*
- % Adults involved in anti-social activity*

## **OUTCOME 2 - CHILDREN ACHIEVE THEIR FULL POTENTIAL**

### **Indicators**

- % Children immunised*
- School attendance rate*
- % Children assessed (Psychological/Educational)*
- % Children receiving Psychological Counselling/Support Services*
- % Children receiving additional educational support in schools*
- % Children receiving additional social/personal development support in schools*
- % Children attending leisure activities*
- % Children attending Breakfast Club/ After School Support*
- Retention rate at secondary school*
- % Children involved in criminal activity*
- % Children in part/full time care placement*
- % Children experiencing emotional stress*
- % Children experiencing environmental stress*
- % Children experiencing physical stress*

*% Children affected by Domestic Violence*  
*% Children involved in antisocial activity*  
*% Children living in the care of adults under severe stress*

### **OUTCOME 3 - FAMILIES ARE STRONG SAFE AND SECURE**

#### **Indicators**

*% Families experiencing emotional stress*  
*% Families experiencing physical stress*  
*% Families experiencing environmental stress*  
*% Families live in suitable accommodation*  
*% Families have healthy social/extended family networks*  
*% Families receive adequate financial support*  
*% Families affected by serious illness*  
*% Families involved with Child Welfare Services*  
*% Families involved with Psychological Counselling/Support Services*  
*% Families who consistently work together towards common goals*  
*% Families involved in anti-social activity*  
*% Families traumatised by (family unit) break up*

### **OUTCOME 4 - FAMILIES LIVE IN SAFE, SUPPORTIVE COMMUNITIES**

#### **Indicators**

*Access to GP's, HSE Developmental Clinics*  
*Access to schools*  
*Accessibility of Support/ Leisure Services*  
*Accessible childcare*  
*Addiction Outreach*  
*Community Police Officers*  
*Employment/ Training Opportunities*  
*Family Support Services*  
*Home/Youth Liaison*  
*Local political representation*  
*Maintained Green Areas*  
*Neighbourhood Watch*  
*Play facilities*  
*Public Transport*  
*Public/Media Profile*  
*Rate of Burglaries*  
*Rate of Violent crime*  
*Referral to Child Protection/Child Welfare Services*  
*Reported Anti-Social behaviour*  
*Reported crimes against the person*  
*Reported Vandalism*  
*Residents Association*  
*Social Networks*  
*Social outlets/ activities/ Groups*  
*Social Welfare Profile*  
*Youth Services*

### 7.3 Findings of Micro-Level Outcome Measures

As discussed earlier in the chapter, three specific outcome measures were chosen, namely the SPS, the SEI and the Harter and Pike Scale. This section presents the results for each tool.

#### 7.3.1 Results for Social Provisions Scale – Sources and Types of Support

The results below present information on the total score for perceived social support as well as scores for the sources and types of perceived social support of the participants, between T1 & T2.

##### a. Total Scores for Perceived Social Support at T1 & T2

The maximum total score possible in the SPS (CV) is 48. When analysed, the results showed that the mean total score of perceived social support at T1 for the group was 45.55. This had fallen by 1.99 points to an average score of 43.56 at T2. As shown in Tables 7.2 & 7.3, the range for the scores at T1 was 12 with it rising to 15 at T2. Therefore, the mean scores and range show a slight fall in perceived social support for the respondents between T1 and T2.

**Tables 7.2 & 7.3**

Overall Social Support Score (T1)				Overall Social Support Score (T2)			
	Frequency	Valid Percent	Cumulative Percent		Frequency	Valid Percent	Cumulative Percent
36	1	4.5	4.5	33	1	5.6	5.6
41	1	4.5	9.1	35	1	5.6	11.1
42	1	4.5	13.6	40	1	5.6	16.7
43	2	9.1	22.7	41	3	16.7	33.3
45	3	13.6	36.4	44	2	11.1	44.4
46	3	13.6	50.0	45	3	16.7	61.1
47	4	18.2	68.2	46	2	11.1	72.2
48	7	31.8	100.0	47	2	11.1	83.3
Total	22	100.0		48	3	16.7	100.0
				Total	18	100.0	

With regard to the rate of ‘*Optimal Perceived Social Support*’ (See Table 7.4), the figures also reveal a decrease from T1 to T2. The percentage of respondents at the optimal level (37-48) had decreased by 6% from T1 to T2 while the percentage of respondents in the 25-36 score range had increased by 6% from T1 to T2.

**Table 7.4**

*Perceived Rate of Optimal Support from Network Members by Young People at T1 & T2*

<b>Score</b>	<b>T1</b>	<b>T2</b>	<b>T2-T1 Range</b>
<b>37-48</b>	95%	89%	-6%
<b>25-36</b>	5%	11%	+6%

**b. Perceived Support from Friends**

The results showed that friends were perceived as strong sources of support across all types of support, with 59% of respondents rating friends as providing them with all forms of support at T1 (See Table 7.5). In addition, 82% of respondents indicated that friends offered them all forms of support at the highest rating score or next highest rating score at T1. At T2, there was an 8% increase in perceived support from friends across all types of support at the optimal level. There was also a 1% increase in perceived social support from friends at the optimal or next highest rating score. The mean score for support from friends went from 11.32 to 11.27 from T1 to T2.

**Table 7.5**

*Perceived rate of Optimal Support from Friends by Young People at T1 & T2*

<b>Score</b>	<b>T1</b>	<b>T2</b>	<b>T2-T1 Range</b>
<b>12</b>	59%	67%	+8%
<b>11-12</b>	82%	83%	+1%

In relation to the four different types of support, at T1, friends were perceived as always providing 95% concrete support, and 91% emotional and advice support (See Table 7.6). The lowest perceived level of support at T1 from friend was esteem support (64%). At T2, there was a 14% increase in perceived esteem support from friends. Perceived concrete (6%), emotional (2%) and advice support (14%) from friends fell between T1 and T2.

**Table 7.6***Levels of Perceived Support from Friends by Type of Support at T1 & T2*

<b>Support Type</b>	<b>Yes</b>	<b>Sometimes</b>	<b>No</b>
Concrete Support T1	95	5	0
Concrete Support T2	89	11	0
<b>T2-T1 Range</b>	<b>-6%</b>	<b>+6%</b>	<b>0</b>
Emotional Support T1	91	9	0
Emotional Support T2	89	11	0
<b>T2-T1 Range</b>	<b>-2%</b>	<b>+2%</b>	<b>0</b>
Esteem Support T1	64	27	9
Esteem Support T2	78	22	0
<b>T2-T1 Range</b>	<b>+14%</b>	<b>-5%</b>	<b>-9%</b>
Advice Support T1	91	9	0
Advice Support T2	77	17	6
<b>T2-T1 Range</b>	<b>-14%</b>	<b>+8%</b>	<b>+6%</b>

**c. Perceived Support from Parents**

The results showed that parents were perceived as very strong sources of support across all types of support, with 73% of respondents rating parents as providing them with all forms of support at T1 (See Table 7.7). In addition, 100% of respondents indicated that parents offered them all forms of support at the highest rating score or next highest rating score at T1. At T2, however, there was a 6% decrease in perceived support from parents across all types of support at the optimal level and a 17% decrease in perceived social support from parents at the optimal or next highest rating score. The mean score for support from parents fell from 11.73 to 11.44 from T1 to T2.

**Table 7.7***Perceived rate of Optimal Support from Parents by Young People at T1 & T2*

Score	T1	T2	T2-T1 Range
12	73%	67%	-6%
11-12	100%	83%	-17%

In relation to the four different types of support, at T1, parents were perceived as always providing 100% of emotional and advice support, and 91% concrete support (See Table 7.8). The lowest perceived level of support at T1 from parents was esteem support (82%). At T2, there was an overall decrease in concrete (2%), emotional (6%) and advice (17%) support from parents, with a 1% increase in esteem support from parents.

**Table 7.8***Levels of Perceived Support from Parents by Type of Support at T1 & T2*

Support Type	Yes	Sometimes	No
Concrete Support T1	91	9	0
Concrete Support T2	89	11	0
<b>T2-T1 Range</b>	-2%	+2%	0
Emotional Support T1	100	0	0
Emotional Support T2	94	6	0
<b>T2-T1 Range</b>	-6%	+6%	0
Esteem Support T1	82	18	0
Esteem Support T2	83	17	0
<b>T2-T1 Range</b>	+1%	-1%	0
Advice Support T1	100	0	0
Advice Support T2	83	11	6
<b>T2-T1 Range</b>	-17%	+11%	+6%

#### **d. Perceived Support from Siblings**

The results showed that siblings were perceived as moderate sources of support across all types of support, with 55% of respondents seeing siblings as providing them with all forms of support at T1 (See Table 7.9). In addition, 68% of respondents indicated that siblings offered them all forms of support at the highest rating score or next highest rating score at T1. At T2, there was a 22% decrease in perceived support from siblings across all types of support at the optimal level. There was also a further

13% decrease in perceived social support from siblings at the optimal or next highest rating score. The mean score for support from siblings fell from 10.82 to 10.16.

**Table 7.9**

*Perceived rate of Optimal Support from Siblings by Young People at T1 & T2*

Score	T1	T2	T2-T1 Range
<b>12</b>	55%	33%	-22%
<b>11-12</b>	68%	55%	-13%

In relation to the four different types of support, at T1, siblings were perceived as always providing 81% of concrete and emotional support, with 72% of respondents always receiving advice support from siblings (See Table 7.10). The lowest perceived level of support at T1 from siblings was esteem support (68%). At T2, there was a decrease in all types of perceived support from siblings, with the largest decrease seen in the level of concrete support (20%).

**Table 7.10**

*Levels of Perceived Support from Siblings by Type of Support at T1 & T2*

Support Type	Yes	Sometimes	No
Concrete Support T1	81	14	5
Concrete Support T2	61	33	6
<b>T2-T1 Range</b>	-20%	+19%	+1%
Emotional Support T1	81	14	5
Emotional Support T2	77	17	6
<b>T2-T1 Range</b>	-4%	+3%	+1%
Esteem Support T1	68	23	9
Esteem Support T2	61	22	17
<b>T2-T1 Range</b>	-7%	-1%	+8%
Advice Support T1	72	23	5
Advice Support T2	56	33	11
<b>T2-T1 Range</b>	-16%	+10%	+6%

### e. Perceived Support from an Other Adult

The results showed that other adults were perceived as strong sources of support across all types of support, with 77% of respondents rating other adults as providing them with all forms of support at T1 (See Table 7.11). In addition, 91% of respondents indicated that other adults offered them all forms of support at the highest rating score or next highest rating score at T1. At T2, there was a sharp decrease (-38%) in perceived support from other adults across all types of support at the optimal level. There was a further 19% decrease in perceived social support from other adults at the optimal or next highest rating score. The mean score for support from other adults went from 11.68 to 10.66.

**Table 7.11**

*Perceived rate of Optimal Support from an Other Adult by Young People at T1 & T2*

<b>Score</b>	<b>T1</b>	<b>T2</b>	<b>T2-T1 Range</b>
<b>12</b>	77%	39%	-38%
<b>11-12</b>	91%	72%	-19%

In relation to the four different types of support, at T1, other adults were perceived as always providing 100% of concrete support, with 95% of respondents always receiving advice support and 91% emotional support from other adults (See Table 7.12). The lowest perceived levels of support at T1 from other adults, was esteem support (86%). At T2, there were decreases in perceived support from other adults in all four areas of support, with the largest decline being the 30% decline in optimal emotional support from T1 to T2.

**Table 7.12***Levels of Perceived Support from an Other Adult by Type of Support at T1 & T2*

<b>Support Type</b>	<b>Yes</b>	<b>Sometimes</b>	<b>No</b>
Concrete Support T1	100	0	0
Concrete Support T2	83	11	6
<b>T2-T1 Range</b>	-17%	+11%	+6%
Emotional Support T1	91	9	0
Emotional Support T2	83	11	6
<b>T2-T1 Range</b>	-8%	+2%	+6%
Esteem Support T1	86	9	5
Esteem Support T2	56	33	11
<b>T2-T1 Range</b>	-30%	+24%	+6%
Advice Support T1	95	5	0
Advice Support T2	72	22	6
<b>T2-T1 Range</b>	-23%	+17%	+6%

**Summary of Changes in Perceived Social Support from T1 and T2**

Despite the fact that the total perceived level of social support fell slightly (2pts) between T1 & T2, the results clearly illustrate that the Resource House Project is associated with the maintenance of high levels of perceived social support for the respondents, over a one-year period.

To summarise the findings relating to Social Support, Table 7.13 rank orders the respondents perceived source of support, using the top 'yes' rating from the social provisions scale. In doing so, the following key points emerge:

- From the four possible sources of support, other adults were perceived as the strongest sources of concrete and esteem support at T1.
- Parents were perceived as providing the greatest source of emotional and advice support at T1.
- At T2, parents, apart from being tied with friends for concrete support, were perceived as providing the best sources of emotional, esteem and advice support.

- Other adults consistently surpassed siblings as sources of support, with siblings never getting above an 81% score.

In terms of the types of support:

- The score for concrete support fell between T1 and T2 across all sources.
- Emotional support scores fell between T1 and T2 across all sources.
- Esteem support scores increased for parents and friends, while it fell for other adults and siblings.
- Advice support fell between T1 and T2 across all sources.

**Table 7.13**

*Comparison of Types of Support x Source from T1 to T2*

Support Type	Parents	Friends	Other Adult	Siblings
Concrete Support T1	91	95	100	81
Concrete Support T2	89	89	83	61
<b>T2-T1 Range</b>	-2%	-6%	-17%	-20%
Emotional Support T1	100	91	91	81
Emotional Support T2	94	89	83	77
<b>T2-T1 Range</b>	-6%	-2%	-8%	-4%
Esteem Support T1	82	64	86	68
Esteem Support T2	83	78	56	61
<b>T2-T1 Range</b>	+1%	+14%	-30%	-7%
Advice Support T1	100	91	95	72
Advice Support T2	83	77	72	56
<b>T2-T1 Range</b>	-17%	-14%	-23%	-16%

### 7.3.2 Results for Coopersmith Self-esteem at T1 & T2

The maximum score possible on the SEI scale is 100. The following were the key findings.

#### a. Total Scores for Self-esteem and T1 & T2

When the results in relation to the Self-Esteem of the respondents were analysed, they revealed that mean self-esteem score at T1 was 69.14. This had increased by 1.92 points to an average score of 71.06 at T2. As shown in Table 7.13, the range of scores was 56 both at T1 and T2. Therefore, the mean scores show an improved position in relation to self-esteem, while no change in the range shows stability in self-esteem among the group, between T1 and T2.

**Table 7.13**

*Self-esteem Score at T1 & T2*

Self-Esteem Score (T1)				Self-Esteem Score (T2)			
	Frequency	Valid Percent	Cumulative Percent		Frequency	Valid Percent	Cumulative Percent
40	1	4.8	4.8	40	1	5.9	5.9
44	1	4.8	9.5	48	1	5.9	11.8
48	2	9.5	19.0	56	1	5.9	17.6
52	1	4.8	23.8	64	2	11.8	29.4
56	1	4.8	28.6	68	3	17.6	47.1
60	2	9.5	38.1	72	2	11.8	58.8
64	1	4.8	42.9	76	2	11.8	70.6
68	3	14.3	57.1	80	1	5.9	76.5
76	1	4.8	61.9	84	1	5.9	82.4
80	1	4.8	66.7	88	2	11.8	94.1
84	2	9.5	76.2	96	1	5.9	100.0
88	3	14.3	90.5	Total	17	100.0	
92	1	4.8	95.2				
96	1	4.8	100.0				
Total	21	100.0					

With regard to the rate of change in self-esteem from T1 to T2, the figures show that the percentage of respondents in the 76-100 quartile at T2 had fallen by 2% since T1. However, there was a related increase in the numbers in the 51-75 quartiles, moving from 38% at T1 to 47% at T2, thus showing an improvement in the growth of self-esteem over the two periods (See Table 7.14)

**Table 7.14**

*Quartile Scores for Self-Esteem at T1 & T2*

Quartile Score	T1	T2	T2-T1 Range
Scores 26-50	19%	12%	-7%
Scores 51-75	38%	47%	+9%
Scores 76-100	43%	41%	-2%

**b. Total Scores for Self-esteem at T1 & T2 by Sex**

The figures relating to the self-esteem scores at T1 and T2 for males and females are shown in Table 7.15. The percentage of males in the top quartile (76-100) at T2, fell by 31% from T1, while 24% of males had moved into the 26-50 Quartile from T1 to T2. These figures reveal a decline in the highest level of self-esteem among the male group. For the females, the percentage of them in the top quartile (76-100) grew by 20% from T1 to T2 and there was no female in the 26-50 quartile (drop of 17%) at T2. Therefore, the trends show a greater level of improvement in optimal self-esteem among the female participants.

**Table 7.15**

*Quartile Scores for Self-Esteem by Sex at T1 & T2*

	T1	T2	T2-T1 Range	T1	T2	T2-T1 Range
Quartile Score	Male	Male	Male	Female	Female	Female
Scores 26-50	22%	29%	+7%	17%	0%	-17%
Scores 51-75	33%	57%	+24%	42%	40%	-2%
Scores 76-100	45%	14%	-31%	41%	60%	+20%

**Summary of Findings – Self-esteem**

- The results clearly illustrate that the Resource House Project is associated with the maintenance of a high degree of self-esteem for the respondent group as a whole, over a one year period. Between T1 and T2, the top level of self-esteem only fell minimally (2pts) with the number in the 26-50 range decreasing by 7%.
- The results, however, showed a sharp decline in self-esteem for males (top scores down 31%), while there was an increase in the top band (up by 20%) for females.
- The usefulness of the Self-esteem Index as an outcomes measurement tool will only become apparent, when the Resource House Project begins to measure the self-esteem of its clients longitudinally.

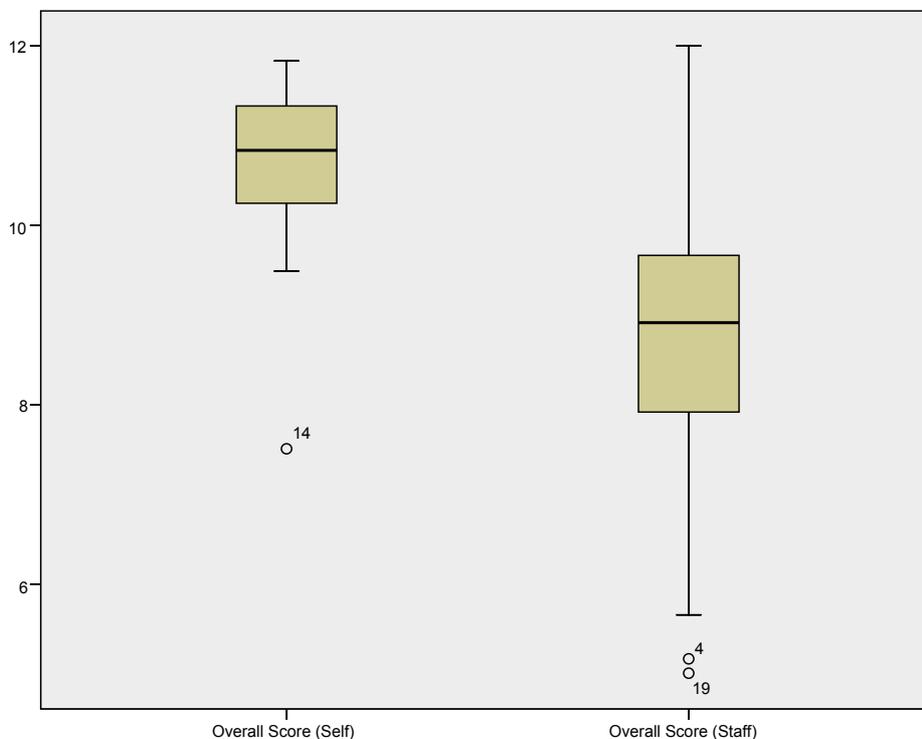
### 7.3.3 Results for Perceived Competence and Acceptance Scale

As shown earlier in the chapter, baseline data were collected with the 5-9 year old child using the Harter and Pike scale, in April/May 2007. Considering this, the results here only relate to T1, as T2 will not be collected by the Project staff until April/May 2008. One of the benefits of the Harter & Pike scale is that it allows comparisons between the children's scores and the Project Worker's scores. For comparative purposes, the results are presented in this format below.

When a mean score was calculated for all 20 respondents for all three areas of the scale, it was found to be 10.68 (Dark black line in Overall Score (Self) Boxplot), with 12 being the highest possible score (See Figure 7.4). However, when the mean score as perceived by Staff was calculated, it was found to be 8.59 (Dark black line in Overall Score (Staff) Boxplot), some 2.09 points lower than the children's score. This finding provides interesting reading as it shows a considerable gulf between the overall perceived competence and acceptance as perceived by the child and the Project Workers.

**Figure 7.4**

*Comparison of Overall Perceived Score in all Areas of Competence and Acceptance by Children and Project Staff*



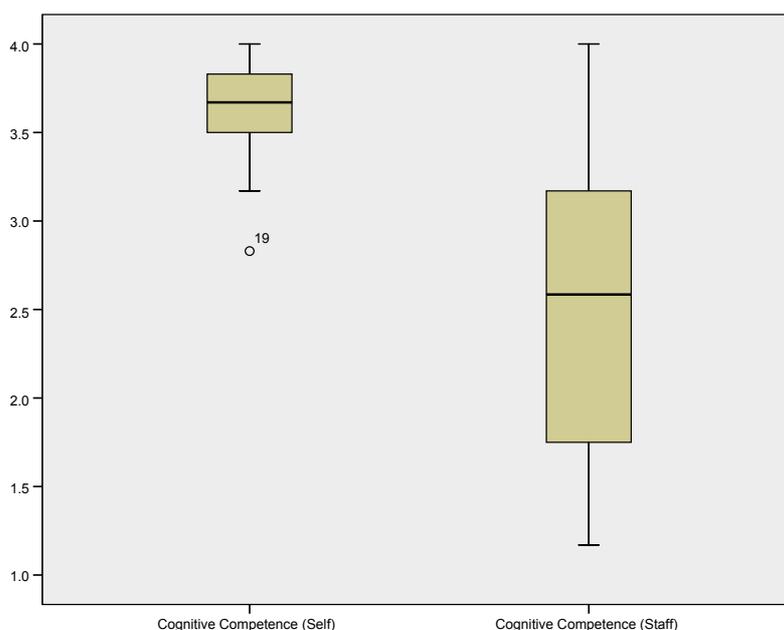
**a. Cognitive Competence**

The range of scores relating to ‘*Cognitive Competence*’, as perceived both by the children and staff, are shown in Table 7.16. The analysis shows that the mean score achieved by the children for ‘*Cognitive Competence*’ was 3.63, out of a total possible of 4. Staff, on the other hand scored ‘*Cognitive Competence*’ at 2.55, again below that as perceived by the children themselves (See Figure 7.5).

**Table 7.16**  
*Perceived Cognitive Competence for Children as Perceived by Themselves and Staff at T1*

Cognitive Competence (Self)				Cognitive Competence (Staff)			
	Frequency	Valid Percent	Cumulative Percent		Frequency	Valid Percent	Cumulative Percent
2.83	1	5.0	5.0	1.17	1	5.0	5.0
3.17	1	5.0	10.0	1.33	1	5.0	10.0
3.33	2	10.0	20.0	1.50	1	5.0	15.0
3.50	5	25.0	45.0	1.67	2	10.0	25.0
3.67	2	10.0	55.0	1.83	2	10.0	35.0
3.83	5	25.0	80.0	2.33	1	5.0	40.0
4.00	4	20.0	100.0	2.50	2	10.0	50.0
Total	20	100.0		2.67	2	10.0	60.0
				2.83	1	5.0	65.0
				3.00	1	5.0	70.0
				3.17	2	10.0	80.0
				3.67	2	10.0	90.0
				4.00	2	10.0	100.0
				Total	20	100.0	

**Figure 7.5**  
*Comparison of Overall Perceived Score for ‘Competence Competence’ by Children and Project Staff*



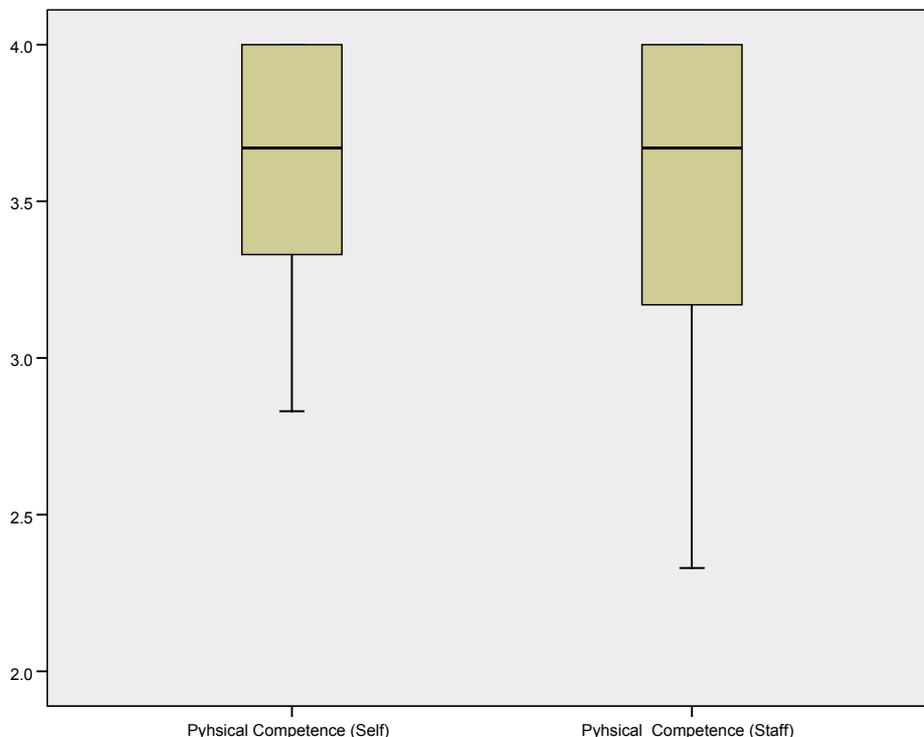
**b. Physical Competence**

The range of scores relating to ‘Physical Competence’, as perceived both by the children and staff, are shown in Table 7.17. The analysis shows that the mean score achieved by the children for ‘Physical Competence’ was 3.63, out of a total possible of 4. Staff scored ‘Physical Competence’ at 3.50 which was very close to that scored by the children (See Figure 7.6). However, the range of scores suggested by staff was larger than that perceived by the children (See Vertical lines in Figure 7.6).

**Table 7.17**  
*Perceived Physical Competence for Children as Perceived by Themselves and Staff at T1*

Pyhsical Competence (Self)				Pyhsical Competence (Staff)			
	Frequency	Valid Percent	Cumulative Percent		Frequency	Valid Percent	Cumulative Percent
2.83	1	5.0	5.0	2.33	2	10.0	10.0
3.17	1	5.0	10.0	2.67	2	10.0	20.0
3.33	5	25.0	35.0	3.17	2	10.0	30.0
3.50	2	10.0	45.0	3.50	3	15.0	45.0
3.67	2	10.0	55.0	3.67	2	10.0	55.0
3.83	2	10.0	65.0	3.83	1	5.0	60.0
4.00	7	35.0	100.0	4.00	8	40.0	100.0
Total	20	100.0		Total	20	100.0	

**Figure 7.6**  
*Comparison of Overall Perceived Score for ‘Physical Competence’ by Children and Project Staff*



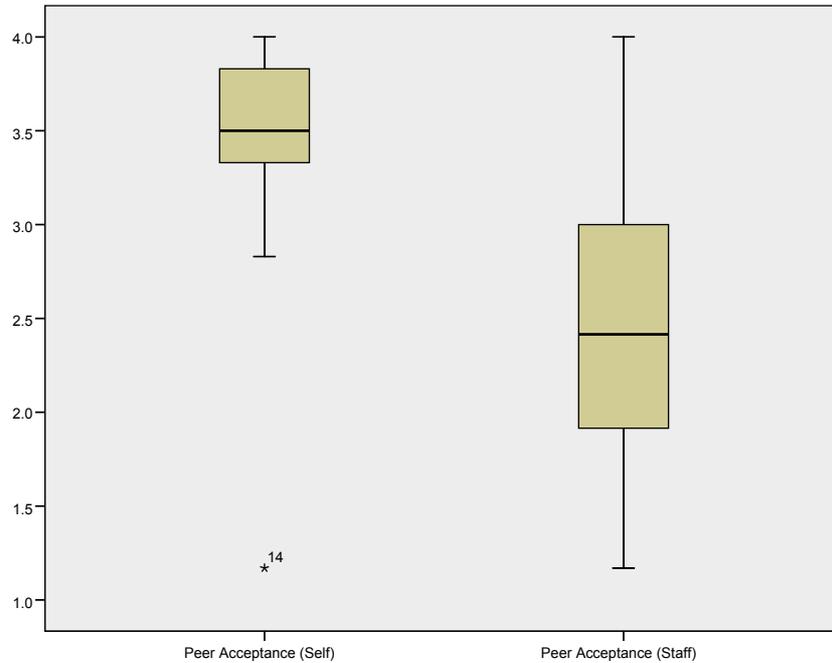
**c. Peer Acceptance**

The range of scores relating to ‘Peer Acceptance’, as perceived both by the children and staff, are shown in Tables 7.18. The analysis shows that the mean score achieved by the children for ‘Peer Acceptance’ was 3.42, out of a total possible of 4. Staff scored ‘Peer Acceptance’ at 2.53, which was below that as perceived by the children themselves (See Figure 7.7).

**Table 7.18**  
*Perceived Peer Acceptance for Children as Perceived by Themselves and Staff at T1*

Peer Acceptance (Self)				Peer Acceptance (Staff)			
	Frequency	Valid Percent	Cumulative Percent		Frequency	Valid Percent	Cumulative Percent
1.17	1	5.0	5.0	1.17	2	10.0	10.0
2.83	1	5.0	10.0	1.50	1	5.0	15.0
3.00	2	10.0	20.0	1.67	1	5.0	20.0
3.33	4	20.0	40.0	1.83	1	5.0	25.0
3.50	3	15.0	55.0	2.00	2	10.0	35.0
3.67	3	15.0	70.0	2.17	1	5.0	40.0
3.83	2	10.0	80.0	2.33	2	10.0	50.0
4.00	4	20.0	100.0	2.50	2	10.0	60.0
Total	20	100.0		2.83	1	5.0	65.0
				3.00	3	15.0	80.0
				3.83	2	10.0	90.0
				4.00	2	10.0	100.0
				Total	20	100.0	

**Figure 7.7**  
*Comparison of Overall Perceived Score for ‘Peer Acceptance’ by Children and Project Staff*



### **Summary of Findings – Harter and Pike Scale**

- The overall perceived competence and acceptance scores for the children showed that the children scored positively in this regard. However, Project staff did not score the children as high as they did themselves, thus illustrating a mismatch in perceptions between the two parties.
- Apart from physical competence, where the staff and children's scores were very similar, the scores given by staff to the children for cognitive competence and peer acceptance were considerably lower.
- The usefulness of the Harter and Pike Scale as an outcomes measurement tool will only become apparent, when the Resource House Project collects data at T2 and also begins to measure the self-esteem of its clients longitudinally.

### **7.4 Conclusions**

This chapter set out to design and implement a methodology which would allow the Resource House to begin to use outcome measures as a way of working. Three standardised assessment tools were chosen, based on the stated aims of the Resource House Project. These tools focussed on measuring social support, self-esteem and perceived competence and acceptance. The results of these micro-level outcome measures indicated that in general, the Resource House Project is associated with the maintenance of high levels of perceived social support and self-esteem for the participants. The need to use these tools longitudinally is recommended. The issue of developing a methodology of using outcomes measures to feed into national outcomes for children and families was also discussed, in light of the work of the Children's Services Committees across Ireland.

# Chapter 8

## Discussion and Recommendations

### 8.1 Introduction

As noted already in this evaluation report, the past 10-15 years has heralded a considerable expansion and development in the extent of child and family support services available in Ireland. The Springboard Model, introduced in 1998 is an example of one such system of support. Despite this proliferation of support services, build on the ever expanding legislative base, little is still known about the impact of models such as Springboard and as to whether or not the wide variation of services such as that, offer real and meaningful support to the families with whom they work (Canavan, Dolan and Pinkerton, 2000 and Dolan Canavan and Pinkerton, 2006).

In January 2006, this evaluation set out to *conduct a comprehensive review of the work of the Resource House Project*. In more specific terms, the evaluation set out to achieve the following:

1. *To gain an overall insight into how the Resource House Project is meeting the needs of the identified community and identify any barriers to this process.*
2. *To establish the perceptions of all stakeholders and service users involved with the Resource House Project in relation to all aspects of the work of the Project.*
3. *To assess possible life outcomes for the Service users who engage with the Resource House Project.*
4. *To investigate how the capacity and behaviour of the participants engaging with the Resource House Project is affected in any way.*
5. *To examine the overall position of the Resource House Project with a view to its current and future compatibility with other local family support services.*

In total, some 155 people participated in the evaluation process. Of these, 113 gave their views on the nature of the Resource House Project. In addition, 42 children participated in an assessment of outcomes. The overall purpose of this report was to **EVALUATE** the work of the Resource House Project. This chapter discusses the key findings emanating from the preceding chapters pointing out where appropriate,

recommendations for consideration by the Resource House Staff and Board of Directors.

## **8.2 Does the Resource House Project meet the needs of the children, families and adults with whom it works?**

Writing as the evaluator who has spent a considerable amount of time in the Resource House Project over the last two years, it is my view that the Project does meet the needs of the children families and adults with whom it works. The single biggest reason for the success of the Project is that the children families and adults who use it or have used it, perceive it as a *'safe place'*. This goes beyond the simple notion of protection from the elements and somewhere to go. The Project has developed and fostered an ethos where anybody who walks through the door knows that irrespective of the reason behind their visit, the Project offers a safe place to hang out, do homework, interact with peers, thrash out problems and get help and support when needed. As was reflected in the data in Chapter 6, the Staff team is highly skilled and has perfected the art of being *'intelligent'* about how they conduct their work with children families and adults. This has made the Project very successful.

### **8.2.1 Description of the Project Model**

As discussed in Chapter 5, one of the stated aims of the Resource House Project is that the Project will work to ensure that all families are supported and empowered in achieving their full potential. An analysis of the pattern of referrals to the Project for 2006 showed that 108 families engaged with the Project. In investigating how the Project works towards supporting and enabling their children families and adults the *'log of family support work'* was developed. This documented the fact that the Project engages in fourteen interdependent areas of work, namely:

Type 1 – Crèche

Type 2 - One-to-One Scheduled Work with Adults and Children

Type 3 – Access: Facilitation, and in some instances, supervision of access between separated parents and their children.

Type 4 - Unscheduled work with adults and children

Type 5 - Centre-based programmes

Type 6 - Holiday Programmes

Type 7 - Staff Supervision

Type 8 - Informal Staff Discussion/ Information Sharing

Type 9 - Interagency Work

Type 10 – Housekeeping

- Type 11 – Administration
- Type 12 - Staff Training
- Type 13 - Programme Planning and Evaluation
- Type 14 - Facilitating Community to use Resource House Facilities

The range of activities engaged in and the subsequent linkages of the Project with other agencies, clearly illustrate the proactive nature of the Project in trying to enable the children, families and adults it works with to achieve their full potential. The Log of Family Support Tool developed as part of the evaluation (See Chapter 5) revealed that on one particular day, the most common forms of work engaged in by five core staff was ‘*unscheduled work with adults and children*’ (13%), ‘*informal staff discussion/information sharing*’ (21%) and ‘*administration*’ (31%). The amount of time spent on administration was shown to be high. As this was the first time the Project tracked its typical workload, the following recommendation is made:

**Recommendation No. 1**

It is recommended that the Project adopt the Logging Tool of family support work, into its normal practice and way of working. This could then be used to track the nature of work of the Project over time, in addition to being a useful management tool for monitoring the workloads of individual staff members.

### **8.2.2 Perceptions of Adult and Parent Service Users**

There are a number of ways to portray the feelings of the adult and family service users. Quantitatively, there was overwhelming support for the work of the Project among the adults and parents who participated in the evaluation. When asked, 95% of them stated that they were ‘*very satisfied*’ with the level of help they received from the Project. Another finding showed that 95% of the group felt that the Project had made things ‘*much better*’ or ‘*better*’ for them. This view was supported by the fact that as reported in Table 6.9, the adults and families stated that the staff listened to them, understood what they were trying to say and respected them highly. It was not surprising to find, therefore, that nearly two thirds of this group had used or use the Resource House Project on a daily basis. The fact that 98% of respondents would have no problem in recommending the Project to other families in the area was yet another strong affirmation of the work of the Project.

The main recommendation made by the group was in relation to the Crèche available in the Resource House Project.

### **Recommendation No. 2**

It is recommended that the Project investigate the need for an expansion of the physical space, currently used by the crèche. Additional space would allow more parents in the locality to avail of the sessional childcare services on offer.

## **8.2.3 Perceptions of Other Stakeholders**

### **A. Perceived Strengths of the Resource House Project**

Chapter 6 presented data from non-participant stakeholders, in relation to their perceptions of the work of the Resource House Project. Viewed as a whole, there was definite consensus from the Board of Directors, Statutory Agencies, Education Representative and Community and Voluntary Agencies, about the value and overall success of the Resource House Project. In naming these, the key perceived strengths of the Project that emerged were:

- The Project is a community-based family support Project, which acts as a neighbourhood resource and offers a menu of support service to families.
- The Project acts as an advocate for families in good times and bad.
- The Project is trusted and respected in the community.
- The work of the Project is preventative-based and works from a strengths-perspective.
- The majority of the work of the Project is done in an informal, sensitive way.
- The Project continually links with external agencies in supporting families and acts as a ‘*knowledge base*’ on families and the broader Cranmore community for these other support agencies.
- The Project continually develops innovative ways of working with families (*for example the Summer Programmes & Family Outings*)
- The Project is needs-led, and thus is always open to community-led programme development.

- There is clear evidence of the successful progression in life of those who have used the Project, be that in the form of further education, employment, parenting or general life satisfaction.
- The Project enables children, families and adults to become more resilient and cope more appropriately with issues in their life.
- The staff group is exceptionally talented at their work and is *'intelligent'* in how it deals with the needs of families.
- The Project is developmentally focussed, providing long-term support to families, to enable their continuing development and progression.

It is clear from this summary that the Project is valued and respected by other professional groups across Sligo. Two of the key aims of this evaluation were to investigate if the capacity of those engaging with the Project was affected in any way and to assess the life outcomes for those who engage with the Project. When viewed as a totality, the summary of points above reveal a Project that supports children, adults and families to be the best they can, in a respectful, patient and caring manner. The following two quotations taken from Chapter 6 add ample support to this view:

*"I know of one family that has come on in leaps and bounds. The Project has worked with this family and pulled all of the services together to build a plan [which led to] real positive change for this family"*

and

*[The Resource House Project] "...is about changing families by increasing their options, for example, if children are getting their homework support, it helps them to participate more effectively in school which may in turn lift them out of the education system/cycle the parents would have gone in to. It is increasing their options and enabling them to stay on in education and then change the whole poverty thing. I think there is a lot of that going on here"*

## **Perceived Weaknesses, Threats and Opportunities**

In addition to the impressive and justified list of perceived strengths of the Resource House Project, this group of stakeholders also identified a number of perceived weakness, threats and opportunities in and for the Project (See Chapter 6).

### **B. Perceived WEAKNESSES of the Resource House Project?**

A list of the main perceived weaknesses will be presented, accompanied by a response from the staff group.

#### **B1. Inadequate Participation of the Community on the Board of Directors**

The stakeholders suggested that despite being named as members of the Project's Board of Directors, there was little evidence of community participation on the Board. When asked about this, the staff noted that they were very open and supportive of the idea of the community being on their Board. It was noted that "*The residents who are supposed to be on the Board are working or in College and don't have the time*". In addition, it was suggested that "*Maybe it is the business of the Board and what is discussed – maybe they don't feel a role in it*". Furthermore, the staff group was of the view that "*I don't see it as a weakness – I don't think it affects the community ownership of the Project, ...as the community ask for things – shows community ownership*". In essence, the staff argued, therefore, that despite not being directly and actively involved on the Board of Directors, there is community ownership of the Project, evidenced through the success of the Project over the past 10 years.

#### **Recommendation No. 3**

Despite significant levels and signs of community ownership in the day-to-day work of the Project, it is recommended that the staff group work with the Board of Directors and the community, in examining the role of the community on the Project Board. This is in line with the personal, social and community development aim of the Resource House Project.

#### **B2. The Resource House Project is Exclusionary**

A common perception held either by many of the stakeholders themselves or by families in the locality, is that the Resource House Project is only for the Greater Racecourse View Area. However, as shown in Chapter 3, this is just a perception and does not bear out

factually. Figures relating to the families who used the Project in 2006 showed that 55% of families came from the general Cranmore Area. In more specific terms, of this 55%, 39% came from the greater Racecourse View Area (Racecourse View, Langan Drive, Mc Neill Drive, Benson Drive and Carroll Drive), with the remaining 16% of families coming from the wider Cranmore area. The other 45% of families came from outside Cranmore.

#### **Recommendation No. 4**

Despite the perception of the Project as being exclusionary being untrue, the perception still holds with some families and professionals in the community. This may result in a family ‘*falling between the stools*’, as they may perceive the project as not being for them, while other support services may think that the Resource House Project was dealing with the family. It is recommended that the Project investigate strategies on how to dispel this perception completely.

### **B3. The Resource House Project is Creating a Dependency Culture**

In each of the focus groups, participants were reminded that one of the core aims of the Resource House Project is to bring about personal, social and community development with the families and community with whom it works. However, a potential problem with a Project of this nature is that it can lead to a dependency culture being created among the families and young people who avail of its services. To test this idea, the homework club for children was chosen for discussion and the researcher asked the group whether or not they thought the Resource House Project was creating a dependency culture by doing homework with children and not actively involving all parents in this activity.

The general feeling from the focus groups was that “*Being practical and realistic, the parents do not have the skills in Irish or maths to help their kids. The Resource House needs to give a leg up to these kids. The Resource House reinforces the work they do in school everyday. Hopefully, by the time these kids leave school,...they will have the skills to do it – it is generational and will take time*”.

In response to this, the staff group suggested that they were not creating a dependency culture and in fact stated that “*Some of the parents have done homework facilitation courses and there are parents doing literacy skills via the VEC*”. More importantly,

they noted that the Project is more than just a homework club for the young people. *“It is a safe place. They will meet nice adults, get slagged off and have fun...The term says homework but that has very little to do with what the project really achieves with these children. We are making them stronger and more resilient and homework is just part of this. When our kids grow up, they will be much more interested to help their kids with homework. If you have a 6 year old in here, they come in for Homework, their self-esteem improves, in 10 years time, these kids are better equipped to deal with life. It is a generational thing”*. *“The idea of disempowering parents is not true – we have parents in here all the time washing dishes, helping out.....we play for the long ball. That is what Springboard was invented for – preventative work”*. Finally, the staff group noted that, *“not every parent of every child comes into the homework club, but we would have contact with them through other groups. It is about a choice too – some parents would prefer not to have to do homework with them”*.

#### **B4 – The Project is Holding onto Families Too Long**

In the focus group with the Statutory Agencies, the point was made by a member of the Social Work Team from the HSE, that they were concerned about the lack of referrals to Social Work from the Resource House Project. The participant noted that the HSE – Social Work Department does have a wider responsibility both for child welfare and family support also. However, *“...very often by the time we become aware of case, it is a crisis which makes it very difficult for us to engage in any form of family support. I think this is very much linked to the referrals procedure”*. Therefore, in their view, the Project was *“holding onto families too long”*, when they should be referring them to Social Work.

When asked to discuss the claim that they were holding onto families too long, the staff were confused as to the basis for these claims. The team felt that this suggestion was, in fact, quite contrary to what it practices in addressing issues of child and family welfare, namely, in referring and liaising regularly and consistently with Social Work. As a preventative, early-intervention family support project, the staff stated their belief that referrals to Social Work are made in an appropriate manner in accordance with Child Protection guidelines. They also noted that they have worked hard at developing and maintaining a proactive relationship with the Social Work

Department. All of the staff agreed that there was a need for the Project to link with Social Work. However, there is a great deal of misunderstanding between how the Project works and how Social Work functions. *“Sometimes it really seems as if our legitimate concerns regarding child and family welfare are not taken seriously when referred”*.

One staff member suggested that *“It is hugely frustrating when people are brave enough to come in and talk about an issue”* and then tell us they do not get an adequate response from Social Workers when referred on by the Resource House. The Resource House can only do so much with families and as one staff member noted, *“There comes a time when the Social Worker needs to point out [to the family] there are consequences if you don’t tow the line. We talk with Social Work regularly, to discuss plans and interventions for families involved with both or either service – it’s a two-way street”*. All of the team acknowledged that a lot of good work takes place when the agencies work together, and see this way of working with common identified needs as the most useful and effective way to support families.

#### **Recommendation No. 5**

By their very nature and work with families, the Resource House Project and the Social Work Department in the HSE are interdependent on each other. Despite this, there is a clear lack of understanding of the roles of each agency, between each agency. It is recommended, that both agencies clarify their respective roles for the good of the families they support.

#### **B5. The Resource House Project does not actively target Fathers**

In one of the non-participant stakeholder focus groups, the issue was raised that the Resource House did not actively target fathers as part of its work. In response to this, the staff group agreed that *“We don’t differentiate between who comes in the door. We are not here to build our stats up, it is not the buzz word [that we are just interested in]– if you need something we are here. We have a lot of dads coming in for a chat, to make a call, simple or more important things. We don’t mark it down – we don’t label. I don’t think we will ever change. They do come in all the time – dads bringing kids to crèche”* and offering to help the Project in any way they can. It was

also noted that the Project works with fathers outside of the Resource House and also offers support with Access visits to their children. However, the point was made by a staff member, that some men may have a perception that the Project is “...a space just for women and children”.

#### **Recommendation No. 6**

The policy within the project of not actively seeking-out fathers, is based on the view that it will not just provide help to fathers because they are fathers, but instead, will work with any child, adult or family who needs help, irrespective of a label. As in recommendation 4 above though, there is a danger that fathers in this case, may ‘*fall between the stools*’, due to their perception that the Project is just a space for women and children. It is recommended that the Project consider strategies on how best to advertise its nature, extent and work to the wider community in a non-labelling way, to ensure that this eventuality does not occur.

#### **C. Perceived OPPORTUNITIES for the Resource House Project?**

A list of the main perceived opportunities will be presented, accompanied by a response, where appropriate, from the staff group.

##### **C1. Formal Community/Voluntary & Statutory Forum to co-ordinate services**

Some of the participants in the non-participant stakeholder focus groups had the opinion that there was an opportunity for the Resource House Project to provide further services for young people in the locality. For example, Community Street Workers, aimed at 10-16 year olds from 4-9pm could be introduced via the Project as well as making the Project a Drop-in-Centre during evenings and weekends for young people. In response to this, the staff was happy that since the focus groups were conducted with these stakeholders “*A lot of this stuff has now been done by the Platform*” [Community Platform]. As the Project is a family support Project, the staff agreed that this more youth oriented work is better being done by agencies that specialise in youth work.

## **C2 Information of Nutrition for Parents and Parenting Classes**

Some of the participants in the stakeholder focus groups were of the opinion that there was an opportunity for the Resource House Project to engage a qualified nutritionist in the project. This person could help parents and families *“and provide them with skills on domestic economy – just the basic skills”*. Responding to this, the staff pointed out that the current Project building was not suitably equipped to offer nutrition classes for parents. To overcome this, however, the Project is providing a *fun with food group* for the children in the Project. The idea is that when they go home they will encourage their parents to cook the recipe in question. *“We get asked for our recipes”* and in trying to get young children to eat their vegetables, *“we hide vegetables in the food...”* In relation to parenting classes, the staff noted that *“Parenting isn’t about sitting in a room for an hour – it is about the other time. That is what we do – we help them parent their child as part of our work...it is ongoing all the time”*. In addition, they suggested that other agencies offer parenting classes, which are available to parents in the area.

## **D. Perceived THREATS for the Resource House Project**

A list of the main perceived threats will be presented, accompanied by a response, where appropriate, from the staff group.

### **D1. – Delayed Funding and Lack of Secure Funding.**

The majority of the participants in the stakeholder groups acknowledged the fact that in the recent past, the Resource House Project has had some difficulties with funding. These difficulties were summed up by the following quote, cited earlier: *“...trying to do development work is linked to the issue around funding because you are not too sure how far you can stretch the boundaries”*. The lack of financial security does not *“...allow them to sit down and develop a blueprint for 5 year plan – that is just not an option for them. The same around staff – is there going to be funding for me next year? It is very unfortunate because if people aren’t secure in where they are, it is very difficult for them to give of their best. They are giving their best now, but psychologically it is difficult for them to give it their all”*.

In response, that staff group agreed that the project operates on a strict budget and is given “...interim payments until the budget is set. That is a huge cloud over the project and every year, the requirements of the budget is different. We try and get money elsewhere and we don't go overboard”. Expanding this further, the Project Manager noted that they have always worked within the budget they are given. However, the time delay in getting the budget agreed and actually getting the money is not acceptable. Coupled with that, the implications of this evaluation may require additional funding. The points were also made that security of funding, and funding rising in line with inflation are absolutely necessary, as well as a situation where funding should be secured for a five year period and then reviewed after that period.

The employment terms and conditions of the staff group do not include a structured career path or pension entitlements. If current legislation requires staff to have pensions and clearly defined career paths, the staff agreed that current funding would not allow this to occur. The Project cannot offer pay rises to its staff on the same level as other equally qualified staff and suggested that if it wanted to keep the current staff group, “we should be able to compete with the pay of social workers and should be able to give pay rises, contribute to pensions and pay maternity benefits without it eating into the programme budget”.

**Recommendation No. 7**

It is recommended that the funders of the Project provide funding in a more-timely manner to the Resource Project, to enable the continued growth and development of the Project. The funding provided should be indexed linked and take account of the potential extra spending required to operationalise the recommendations from this evaluation. In addition, the employment terms and conditions of the staff group need to be reviewed in line with current legislation in this area. The funders will also need to make allowances for this in the provision of funding to the Project.

### **8.3 What Impact has the Project on the Life Outcomes of Children and Young People?**

Central to this evaluation was the use of three standardised outcome measuring tools with children and young people engaged with the Project. The results showed that for perceived social support and self-esteem, the Project is associated with the maintenance of high scores in each domain, among the children who participated. As suggested in Chapter 7, due to the fact that the difference between T1 and T2 was merely one year, a more complete picture of outcomes will emerge when tracked over a number of years. On this basis, the following recommendations are made:

#### **Recommendation No. 8**

As three outcome measurement tools have now been used in the Project, it is recommended the Project continues measuring outcomes for children on a longitudinal basis. This will enable the Project to meet and understand the optimal needs of the children and young people in terms of their perceived social support, self-esteem and perceived competence and acceptance. The process will also provide valuable *sign-posts* to the family support community on what works. In addition, the outcomes can be used as a form of ‘*results based accountability*’ with funders.

#### **Recommendation No. 9**

It is recommended that the Project develop a plan for the application of outcome measures to adults who use the Project. When tracked over time, it will also provide valuable knowledge for the Project on how best to support adults through its work.

#### **Recommendation No. 10**

It is recommended that the Project continue to develop its *Vermont Style Outcomes and Indicators* model, by linking with the Children’s Services Committee in Sligo as well as with the HSE (NWA). It is recommended that this information can then be used with the micro level outcomes, as a new reporting mechanism to its funders, replacing the existing system referred to in Chapter 7.

## **8.4 Positioning of the Resource House Project into the Future**

It is clear from the preceding chapters that the Resource House Project offers a crucially important family support service to the families, adults and young people with whom it works. The sheer support for the Project as expressed by those families and adults who use the Project as well as from key stakeholders was exceptionally positive and provides an excellent structure upon which to progress into the future.

Coupling the fact that all families need help at some stage with the rapidly changing social landscape in contemporary Ireland, the continued work of the Resource House Project into the future has never been as important. This evaluation has shown that the onward journey of the Project will face a number of challenges, namely the re-examination of the meaning of community involvement on its Board of Directors, the need to eradicate the perception that the Project is just for people from a specific geographical location and the need to ensure that support to fathers does not fall between two stools. By far, however, the largest difficulties to be rectified is the Project's working relationship with the Social Work Department within the HSE and the need for secure, adequate and timely funding for the work of the Project.

It is without doubt that the successful positioning of the Resource House Project in a future landscape of family support, will be dictated by continuing to do what it does well, in addition to a determined effort by all concerned to overcome the problems it faces.

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## **Appendices**

# Appendix 1



## **HSE (NWA) & CFRC**

*Research Evaluation – Resource House Project, Sligo*

### **Terms of Reference - Advisory Group**

1. The CFRC will engage in a research evaluation of the Resource House Project, Sligo, starting in January 2006 and finishing in December 2007.
2. The Advisory Group will advise and support the Project Leader in assisting the researchers from the CFRC to conduct the evaluation. The Advisory Group does not have a management function over the researchers from the CFRC.
3. The Advisory Group should consist of no more than 8-10 people from the following categories:
  - Project leader
  - HSE Representative
  - CFRC Representative (Cormac/Pat)
  - Service Users
  - Other Key Stakeholders/Agencies
4. The Advisory Group will meet 4 times during the course of the research, to support and advise at the following stages:
  1. *Completing Research Design*
  2. *Data Collection (Assisting in accessing study populations)*
  3. *Final Analysis of Research Findings*
  4. *Format of Final Report*
5. The Advisory Group will also raise any other relevant pertinent to the research process.
6. Each Advisory Group meeting will last 1 hour.
7. Key decisions only, will be recorded at each meeting, with minutes being forwarded afterwards.



# Appendix 3

## Resource House Project, Sligo

*Evaluation*



### Generic Topic Guide – Non-Participant Stakeholders

1. Considering the current range of family support services available in Sligo town, what would you see as the main **strengths and weaknesses** (*gaps in service, duplication etc*)
2. Where does the **Resource House Project fit** within all of this? Comments re strength of links.
3. What do you see as the **overall aim** of the Resource House Project? (empowering preventative, social integration – and individual, family and community development)
4. How would you describe the **profile of the Resource House Project** in the community? (among families and other services)
5. What do you see as the **most successful aspects** of the Resource House Project? (Main benefits/Quality of the Service/**Successful** in achieving its main aims/objectives? (empowering, preventative etc)
6. Has the Project made an **impact on the lives of families** it has worked with?
7. What do you see as the **main challenges** facing the Project – presently or into the future?
8. Are there any **other suggestions** you would like to make regarding the Project? (areas to be further developed?)
9. Have you any thoughts on the following **specific characteristics** of Resource House Project:
  - i. *Method of working* (Targeted provision within universal provision)
  - ii. *Intensive work v's group work, individual work*
  - iii. *Referral Procedures*
  - iv. *Qualities of Project Mgt & Staff*
  - v. *Board of Directors?*
  - vi. *Location in the community?*
  - vii. *Links with the community?*
10. Would you **recommend the Project** to another agency or to a family in need of support? Why?

# Appendix 4



## Resource House Project, Sligo Evaluation Questionnaire

### Adults & Parents

#### Section 1 - Socio-Demographic Questions

1. Sex of Respondent            1. Male             2. Female

2. Which category best describes your age?

1. Under 24	<input type="checkbox"/>
2. 25-30	<input type="checkbox"/>
3. 31-35	<input type="checkbox"/>
4. 36-40	<input type="checkbox"/>
5. 41-45	<input type="checkbox"/>
6. 46-50	<input type="checkbox"/>
7. 51-55	<input type="checkbox"/>
8. 56-60	<input type="checkbox"/>
9. 61 or over	<input type="checkbox"/>

3a. Do you live in Cranmore?            1. Yes             2. No

*(If NO, Please Go To Q4; If Yes, Goto Q3b)*

3b. Do you intend to:

1. Stay on living in Cranmore for the foreseeable future?	<input type="checkbox"/>
2. Move out of Cranmore in the foreseeable future?	<input type="checkbox"/>
3. Or are you Undecided?	<input type="checkbox"/>

4. Do you have a Medical Card?            1. Yes             2. No

5a. Do you have children under 18 years of age?            1. Yes             2. No

*(If NO, Please Go To Q6; If Yes, Goto Q5b)*

**5b. If Yes, can you please fill in the number of children and their ages.**

Ages	U-1	1 yr old	2 yr old	3 yr old	4 yr old	5 yr old	6 yr old	7 yr old	8 yr old	9 yr old	10 yr old	11 yr old	12 yr old	13 yr old	14 yr old	15 yr old	16 yr old	17 yr old	18 yr old
No. Of Children																			

**6. How would you describe your present principal status?**

- 1. *Working fulltime*
  - 2. *Working part-time*
  - 3. *Unable to work due to permanent illness or disability*
  - 4. *Retired*
  - 5. *Unemployed*
  - 6. *Student or pupil*
  - 7. *Looking after home/family*
  - 8. *Other*
- (Please explain \_\_\_\_\_)

**7. Are you in receipt of any of the following payments? (Tick as many as are appropriate)**

- 1. *Child Benefit*
  - 2. *Lone Parents*
  - 3. *Job Seekers Allowance*
  - 4. *Carer's Allowance*
  - 5. *Disability Allowance*
  - 6. *Disability Benefit*
  - 7. *Pension*
  - 8. *Family Income Supplement*
  - 9. *Domestic Carer's Allowance*
  - 10. *Other*
- (Please specify \_\_\_\_\_)

## Section 2 – Contact with the Resource House

**8. When did you first come to the Resource House?**

*Year*

\_\_\_\_\_

**9. What best describes your reasons for making contact with the Resource House?**

*(Tick as many as are appropriate)*

Reasons	Tick
1. Child attending crèche	
2. Child attending Homework Club	
3. Child attending activity-based programme	
4. Taking part in Summer/Holiday Programme	
5. Was referred to Project for help/support	
6. Meet & socialise with friends	
7. Learn a new skill	
8. Get help with job applications/CV/Apply Course	
9. Get information	
10. Advice on personal problems	
11. Support in dealing with my child/family	
12. Help with legal issues	
13. Help in dealing with other agencies	
14. Use internet/computers	
15. FAS/Other Scheme/Placement	
15. Family Access	
17. Other (specify _____)	

**10a. In considering the service you got in the Resource House, did you get:**

- |  |                          |
|--|--------------------------|
| 1. <i>More than what you wanted/expected</i> | <input type="checkbox"/> |
| 2. <i>All of what you wanted/expected</i>    | <input type="checkbox"/> |
| 3. <i>Some of what you wanted/expected</i>   | <input type="checkbox"/> |
| 4. <i>None of what you wanted/expected</i>   | <input type="checkbox"/> |

**10b. How satisfied are you with the help you received from the Resource House?**

- |                          |                          |                          |                          |                                |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------------|
| 1. <i>Very Satisfied</i> | 2. <i>Satisfied</i>      | 3. <i>Don't Know</i>     | 4. <i>Not Satisfied</i>  | 5. <i>Not at all satisfied</i> |
| <input type="checkbox"/>       |

**11. Did the kind of help and support you received from the Project make things:**

- |                          |                          |                          |                          |
|--------------------------|--------------------------|--------------------------|--------------------------|
| 1. <i>Much better</i>    | 2. <i>Better</i>         | 3. <i>Stay the Same</i>  | 4. <i>Worse</i>          |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**12. Do you think the Resource House is respected in the Area?**

1. *Yes*
2. *No*

**13. Do you think the Resource House has had a positive impact on the community?**

1. Very Positive     2. Positive     3. Don't Know     4. Negative     5. Very Negative

**14. Do you think the Resource House is needed in the Area?**

1. Yes   
2. No

**15. How often do you/did you use the Resource House?**

1. Daily   
2. Several times a week   
3. Once a week   
4. One-three times per month   
5. Several times a year   
6. Other

(Please specify \_\_\_\_\_)

**16. In relation to the Staff in the Resource House, to what extent would you agree with the following statements:**

	Strongly Agree	Agree	Don't Know	Disagree	Strongly Disagree
1. Staff listened to me	1	2	3	4	5
2. Staff understood what I was trying to say	1	2	3	4	5
3. I was treated with respect by staff	1	2	3	4	5
4. My child/children/family were treated with respect by staff	1	2	3	4	5
5. I was treated fairly by staff	1	2	3	4	5
6. My child/children/family were treated fairly by staff	1	2	3	4	5
7. Staff are good at what they do	1	2	3	4	5
8. Staff worked with me to make life easier	1	2	3	4	5
9. Staff were available to me when I needed them the most	1	2	3	4	5
10. I would be happy to recommend the Resource House Project to other people in my family or community who may be under pressure or be stressed.	1	2	3	4	5

**17. What might have made your time with the Resource House Project better or more helpful?**

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**18. Have you any other comments or suggestions relating to the Project you would like to make?**

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# Appendix 5



## **Resource House Project, Sligo**

*Follow Up Questionnaire – Non-Participant Stakeholders*

1. What do you see as the **overall aim** of the Resource House Project in Sligo? \_

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2. What do you regard as being the **most successful aspects** of the Resource House Project to-date? \_\_\_\_\_

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3. What do you see as the **main challenges** facing the Project? \_\_\_\_\_

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4. Have you any **suggestions** you would like to make regarding the further development of the work of the Project? \_\_\_\_\_

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## Appendix 6



### Social Provisions Scale (Child Version)

#### Official Use Only

Respondent Number: \_\_\_\_\_ Age: \_\_\_\_\_ Years

Sex of Respondent :      M      F      Date:     /     / 06

Total: \_\_\_\_\_

In answering the next 4 questions, please think about your current relationships with your friends. If you feel a question accurately describes your relationships with your friends, you would say "yes." If the question does not describe your relationships, you would say "no." If you cannot decide whether the question describes your relationships with your friends, you may say "sometimes."



1. Are there friends you can depend on to help you, if you really need it?

NO                      SOMETIMES                      YES



2. Do your relationships with your friends provide you with a sense of acceptance and happiness?

NO                      SOMETIMES                      YES



3. Do you feel your talents and abilities are recognised by your friends?

NO                      SOMETIMES                      YES



4. Is there a friend you could trust to turn to for advice, if you were having problems?

NO                      SOMETIMES                      YES

In answering the next set of questions, please think about your current relationships with your parent(s)/carer.



5. Can you depend on your parent(s)/carer to help you, if you really need it?

NO                      SOMETIMES                      YES



6. Do your relationships with your parent(s)/carer provide you with a sense of acceptance and happiness?

NO                      SOMETIMES                      YES



7. Do you feel your talents and abilities are recognised by your parent(s)/carer?

NO                      SOMETIMES                      YES



8. Could you turn to your parent(s)/carer for advice, if you were having problems?

NO                      SOMETIMES                      YES

In answering the next set of questions, please think about your current relationships with your brother(s) and/or sister(s).  
Again mark either No Sometimes or YES



9. Can you depend on your brother(s)/sister(s) to help you, if you really need it?  
NO                      SOMETIMES                      YES



10. Do your relationships with your brother(s)/sister(s) provide you with a sense of acceptance and happiness?  
NO                      SOMETIMES                      YES



11. Do you feel your talents and abilities are recognised by your brother(s)/sister(s)?  
NO                      SOMETIMES                      YES



12. Could you turn to your brother(s)/sister(s) for advice, if you were having problems?  
NO                      SOMETIMES                      YES

In answering the next set of questions, please think about your current relationships with any other adult person in your community for example a teacher, sports coach or other adult who you know and who supports you.



13. Can you depend on other adult(s) you know to help you, if you really need it?

*NO* \_\_\_\_\_ *SOMETIMES* \_\_\_\_\_ *YES*



14. Do your relationships with this adult(s) provide you with a sense of acceptance and happiness?

*NO* \_\_\_\_\_ *SOMETIMES* \_\_\_\_\_ *YES*



15. Do you feel your talents and abilities are recognised by this adult?

*NO* \_\_\_\_\_ *SOMETIMES* \_\_\_\_\_ *YES*



16. Could you turn to another adult for advice, if you were having problems?

*NO* \_\_\_\_\_ *SOMETIMES* \_\_\_\_\_ *YES*

## Scoring Details

This measures types and levels of support. There are four sections with four questions in each:

- (a) Friends
- (b) Parents/Carers
- (c) Brothers and/or sisters
- (d) Any other adult

Each of the questions are categorised according to types of support.

All questions under the sun relate to concrete support.

All questions under the umbrella relate to emotional support.

All questions under the factory relate to esteem support

All questions under the penguin relate to advice support.

The score is as follows:

No	= 1
Sometimes	= 2
Yes	= 3

Scoring can be examined in two ways

**(A) Source of support:** The top score for each section is 12, while the minimum is 4. To get a total score, add up all the scores on the four sections (maximum = 48, minimum = 16). This indicates where the young person accesses support and/ or where they have little / no perceived support.

**(8) Types of support:** Scores can also be found for the four types of support by totalling the scores relevant to each type across the four sections. This is very helpful as you can then see what types of support they are getting and where the gaps are, which will then inform your care plan and intervention. A balance is required across the four areas of support.

**Score Summary (sources and levels of support)**

<b>Friends</b>	Maximum	12	Minimum	4
<b>Parents/Carers</b>	Maximum	12	Minimum	4
<b>Siblings</b>	Maximum	12	Minimum	4
<b>Other Adults</b>	Maximum	12	Minimum	4

Total: Maximum 48                      Minimum 16

(50% guide)

**Types of Support**

<b>Concrete</b>	Maximum	12	Minimum	4
<b>Emotional</b>	Maximum	12	Minimum	4
<b>Esteem</b>	Maximum	12	Minimum	4
<b>Advice</b>	Maximum	12	Minimum	4

Total: Maximum 48                      Minimum 16

(50% guide in each category)

# Appendix 7

## The Pictorial Scale of Perceived Competence and Acceptance for Young Children

*Harter and Pike Scale (1980)*

### INSTRUCTIONS

The child is given a sample item at the beginning of the booklet and instructed as follows:

I have something here that's kind of like a picture game and it's called WHICH GIRL IS THE MOST LIKE ME. I'm going to tell you about what each of the girls in the picture is doing.

Sample: In *this* one (examiner then points to picture on the left), this girl is usually kind of *happy*, and this girl (examiner points to the picture on the right) is usually kind of *sad*. Now, I want you to tell me which of these girls is the most like (Child's Name).

After the child has pointed to the picture appropriate for her, the examiner points to the circles directly below that picture and emphasizes the key qualifying words to help the child refine her choice further. The examiner should always start with the extreme (larger) circle and proceed to the smaller circle. Thus, if the child points to the happy picture in response to the question concerning which is most like her, the examiner would say:

Are you *always* happy? (pointing to the larger circle).

Or are you *usually* happy? (pointing to the smaller circle)

Occasionally a child will point to the middle of the two pictures and say that both are like her. The examiner should then say: Yes, sometimes we do feel both ways, but if you had to pick which one of these girls is the way you are *most* of the time, which one would you choose?

The number value corresponding to the child's choice should be recorded on the Scoring Sheet for Individual Child Responses. Any comments should be recorded in the space provided at the bottom of the sheet.

The examiner continues for each plate, reading the descriptions, verbatim, as she/he points to the picture accompanying each description. In some pictures there is a target child central to the description, designated by an arrow pointing to that child. Be certain that on these items you point to that particular child.

For copyright reasons, it is not permitted to include a copy of the instrument in the appendix.

# Appendix 8

## Coopersmith Inventory

### School Short Form

Name (Print): \_\_\_\_\_

Age: \_\_\_\_\_ Years

Sex: MF

Date: \_\_\_ / \_\_\_ /06

**Like**    **Unlike**  
**Me**    **Me**

- |                          |                          |   |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | 1. Things usually don't bother me.                              |
| <input type="checkbox"/> | <input type="checkbox"/> | 2. I find it very hard to talk in front of the class.           |
| <input type="checkbox"/> | <input type="checkbox"/> | 3. There are lots of things about myself I'd change if I could. |
| <input type="checkbox"/> | <input type="checkbox"/> | 4. I can make up my mind without too much trouble.              |
| <input type="checkbox"/> | <input type="checkbox"/> | 5. I'm a lot of fun to be with.                                 |
| <input type="checkbox"/> | <input type="checkbox"/> | 6. I get upset easily at home.                                  |
| <input type="checkbox"/> | <input type="checkbox"/> | 7. It takes me a long time to get used to anything new.         |
| <input type="checkbox"/> | <input type="checkbox"/> | 8. I'm popular with kids my own age.                            |
| <input type="checkbox"/> | <input type="checkbox"/> | 9. My parents usually consider my feelings.                     |
| <input type="checkbox"/> | <input type="checkbox"/> | 10. I give in very easily.                                      |
| <input type="checkbox"/> | <input type="checkbox"/> | 11. My parents expect too much of me.                           |
| <input type="checkbox"/> | <input type="checkbox"/> | 12. It's pretty tough to be me.                                 |
| <input type="checkbox"/> | <input type="checkbox"/> | 13. Things are all mixed up in my life.                         |
| <input type="checkbox"/> | <input type="checkbox"/> | 14. Kids usually follow my ideas.                               |
| <input type="checkbox"/> | <input type="checkbox"/> | 15. I have a low opinion of myself.                             |
| <input type="checkbox"/> | <input type="checkbox"/> | 16. There are many times when I'd like to leave home.           |
| <input type="checkbox"/> | <input type="checkbox"/> | 17. I often feel upset in school.                               |
| <input type="checkbox"/> | <input type="checkbox"/> | 18. I'm not as nice looking as most people.                     |
| <input type="checkbox"/> | <input type="checkbox"/> | 19. If I have something to say, I usually say it.               |
| <input type="checkbox"/> | <input type="checkbox"/> | 20. My parents understand me.                                   |
| <input type="checkbox"/> | <input type="checkbox"/> | 21. Most people are better liked than I am.                     |
| <input type="checkbox"/> | <input type="checkbox"/> | 22. I usually feel as if my parents are pushing me.             |
| <input type="checkbox"/> | <input type="checkbox"/> | 23. I often get discouraged at school.                          |
| <input type="checkbox"/> | <input type="checkbox"/> | 24. I often wish I were someone else.                           |
| <input type="checkbox"/> | <input type="checkbox"/> | 25. I can't be depended on.                                     |

**Total:**



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