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Author(s)	Devaney, Carmel; McGregor, Caroline; Cassidy, Anne
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# **Early Implementation of a Family-Centered Practice Model in Child Welfare: Findings from an Irish Case Study**

## **Abstract**

This article reports on the outcomes of a research study on the early implementation of a strengths based family-centred model of practice in Ireland known as the Meitheal model. The paper aims to translate the key messages from this research to practice with families involved in the child welfare system. This is done by highlighting the process by which intervention focused on support and prevention using a strengths perspective has begun to occur in practice. Using data collected from stakeholders involved in the implementation of the practice model, the research provides insight into the opportunities and challenges involved at macro and micro levels of practice. The discussion links this development in Ireland to the wider international context, using three broad frameworks informed by the ecological model; a framework for determining thresholds in children's services and the continuum of intervention between support and protection to inform system change aimed at enhancing family support and better outcomes for children and families. Underpinning this is an emphasis on how Meitheal as a strengths based approach can influence the achievement of the principles of early intervention, prevention and family support in the child welfare system in Ireland.

## **Introduction**

The aim of this article is to report on the implementation of a strengths based family-centred model of practice in the context of a major child welfare system change in Ireland. This model, known as Meitheal, was introduced as part of the establishment of a wider programme of child welfare called Prevention, Partnership and Family Support (PPFS). This programme aims to enhance and complement existing child protection and welfare services delivered under the auspices of a newly established independent body, the Child and Family Agency called Tusla

(est. 2014, see [www.tusla.ie](http://www.tusla.ie)). The duties of Tusla are to ‘support and promote the development, welfare and protection of children’; ‘support and encourage the effective functioning of families’; and to ‘maintain and develop support services including support services in local communities’ (Child and Family Agency Act, 2012, Section 8, 1-4). The development of the PPFS programme means that for the first time in Ireland there is a nationalised, systematic strengths based approach to prevention and early intervention which has evaluation built into it from the onset. The strengths based approach asserts a fundamental belief that people have strengths and are motivated towards wellbeing and optimal functioning. It asserts that the focus should be on what is changeable and attainable rather than being daunted and disempowered by the size of the problem (O Connell, 1998). As Saleeby notes; ‘we must discover how people have managed to survive... tapping into the energy and imagination. The will and the promise is to help people to recover or command the power to change, using old skills or resources or discovering and developing new ones’ (1997, p.64).

A review of histories of child welfare services, highlights a reorientation from child protection towards support and prevention as a common theme globally (Lonne et al., 2009; Tunstill and Blewett, 2015). International comparisons of child protection and welfare such as that provided by Gilbert et al. (2011) consider child welfare systems broadly in terms of protection services and support or care services. Gilbert (2012) argues that most can be considered within a three dimensional context having features of support, protection and strengths based child-centred approaches. Devaney & McGregor (2016) provide an updated overview of this literature taking into account developments within Africa and Asia and note that a common theme across regimes internationally is an attempt to embrace specifically a children’s rights approach and within this, a commitment to preventing harm and abuse and supporting children and families in line with the ethos of the UNCRC.

The next section provides a detailed overview of the Meitheal model. The methods used in the study are then outlined. Following this, a summary of the findings are provided and the discussion considers these within the wider international literature using the influential work of Bronfenbrenner (1979) on ecological systems, Hardiker et al (1991) on thresholds for child welfare interventions and Gilbert and colleagues on orientations of child welfare systems (2011; 2012). The paper concludes with key messages in relation to system change aimed at achieving better outcomes for children and families.

### **Meitheal; A Model of Family-Centred Practice**

Meitheal is defined as: ‘a national practice model aimed at ensuring that the needs and strengths of children and their families are effectively identified, understood and responded to in timely way so that children and families get the help and support needed to improve children’s outcomes and to realise their rights’ (Gillen et al., 2013: 1). Practicing in a strengths based way as advocated by Meitheal requires a fundamental belief that people have strengths and are able to overcome adversity in their lives. A core aspect of the process of Meitheal is that an ecological approach (Bronfenbrenner, 1979) is utilised. Drawing on learning from the use of the ecological model in child protection and welfare systems in Ireland and the United Kingdom, Meitheal emphasises the importance of a holistic perspective being taken of the child’s life and their needs that accounts for their environment (exo-level), family circumstances (micro and exo levels), personal strengths (micro level), policy impact (macro level) and so on (Tusla, 2015).

As a practice Meitheal is focussed on early intervention and prevention. Dunst (2000) defined early intervention as ‘the provision of support and resources to families of young children from members of informal and formal social support networks, that both directly and indirectly

influence child, parent and family functioning’ (p.99). With this in mind, Meitheal is targeted at children and families in need of support who do not meet the threshold for child protection intervention. As such Meitheal is a deliberate and focused attempt to intervene early in the life of a child and also early in the genesis of a difficulty. It also reflects merging international perspectives on the need to re-orientate child welfare services from risk oriented to support within a children’s rights and child development framework (see for example, Gilbert, 2012).

Meitheal is not linked to a particular physical infrastructure or programme but rather revolves around the development of an approach that can be applied by disparate organisations within the community and voluntary sector, by statutory services and by Tusla (Tusla, 2015). Typically this involves establishing a multidisciplinary team ‘around the child’, which works together to deal with specified unmet needs. Families can be referred to Meitheal in a number of ways; a direct referral can be made by a practitioner or by a family member; or a referral can be made by the child protection social worker who has assessed that there are no child protection concerns or where child protection concerns are no longer an issue but further support would be beneficial. The principle of participation is central to Meitheal and involvement in the process is voluntary. A key principle is that the process is led by a ‘Lead Practitioner’ who has a prior relationship with the family and the family agree to them taking on this role (see Tusla, 2015).

Although Meitheal is aimed at families with a lower level of need than those who participate in Intensive Family Support programmes they share a common theoretical approach in focusing on strengths rather than risk. In order to position Meitheal in the international context discussion of Intensive Family Support programmes is provided. At the core of the shift towards strengths-based intensive family support programmes is Homebuilders, which has

operated in the USA for over forty years. Its approach differs to Meitheal in that contact is very intense but time-limited with emphasis placed on constant accessibility on the part of workers and low caseloads. It also focuses on dealing with an immediate crisis to enable changes to take place that would allow a family to stay together rather than the longer-term plans that are put in place in a Meitheal (Forrester et al, 2008). Research that has been carried out on the effectiveness of this approach has shown mixed results. A meta-analysis of 27 programmes demonstrated that although there was a positive impact on family functioning that it could not be demonstrated that this type of intervention led to improvements in long-term protective factors for children and young people. Furthermore, it did not reduce the level of out-of-home care for those families who participated in these programmes (Dagenais et al., 2004).

In Wales, an Intensive Family Preservation Service called Option 2, which has been adapted from the Homebuilders programme, supports families where there are issues of parental substance misuse. Option 2 differs from the original Homebuilders model in two specific ways, firstly that substance misuse is an issue for all families and secondly, it specifies a particular approach to be used (Motivational Interviewing and Solution-Focused approaches) whereas Homebuilders does not (Forrester et al., 2008). Similar to Dagenais et al.'s (2004) findings a study found that 40% of both the treatment and control groups were taken into care. However, those who participated in Option 2 were maintained in the home for longer prior to entering, spent less time in care and were more likely to be with their family at the follow-up stage (Forrester et al., 2008). It was notable that all parents who were interviewed for this study were positive about their experience of the programme and particularly valued their relationship with the practitioner. This was for a number of reasons including their perceived reliability and empathy and the practical advice and support they provided (Forrester et al., 2008).

The Resilient Families Service's approach in Australia is closer to the Meitheal model in that support is less intensively provided, lasts longer and the referral process is not as short as in the Homebuilders model. Similar to Meitheal the supports provided include concrete support that promote resilience and crisis management as well as linking families with other agencies and broad family support programmes (Leahy et al., 2016). An interim evaluation report that included 81 families who participated in the Resilient Families Service found that there were mixed results in terms of contact for children with the child protection system. While there were slight reductions in out-of-home care compared to a control group there were, for example, higher levels of risk assessments. However, outcomes were positively impacted in the areas of family functioning and wellbeing as well as improvements in parent/carers' skills and confidence (Leahy et al., 2016).

## **Methodology**

A case study approach was used in this study to examine how Meitheal was being implemented at an early stage (after 18 months in mid-2015). Full ethical approval for the study was granted to researchers external to Tusla by the relevant University Research Ethics Committee. The outcome of the model will be evaluated in full by the researchers in 2017 and early 2018. A purposive sampling method was used with key stakeholders identified as gatekeepers to a wide range of participants who were involved in the early implementation stages of Meitheal. A qualitative approach using semi-structured schedules on the following question areas was used:

1. Are the referral pathways operating and secondly are they operating as intended
2. Are there unintended consequences arising from the referral pathways in place
3. Are the necessary relationships/ partnerships to support the system in place?

4. Are the key interface points (in particular child protection, education and health) working well?
5. Is there evidence of enhanced multi agency-working?

In total 107 participants took part in the study with 43 interviews (25 face-to-face and 18 by telephone) and 13 focus groups were carried out. There were 56 participants from the child protection and welfare service Tusla and 51 from external agencies working with children and families in the community and voluntary sector and from other statutory services. On average the interviews and focus groups lasted for approximately one hour. The data was analysed deductively using a framework based on the question areas as outlined. The major themes that emerged included the implementation process, fidelity issues, the strengths and barriers to the Meitheal model and the interface between Meitheal and the child protection and welfare system (CPW). Participant anonymity required careful consideration and all data is attributed to roles so as to ensure this. Participants were afforded the opportunity to review a draft of the findings and respond to this. The analysis was framed using an ecological approach (Bronfenbrenner 1979; Bronfenbrenner & Morris, 1994) with a focus on findings from the point of view of micro-meso levels and the wider exo-macro level. Within this context, a specific focus was placed in consider the findings in the context of thresholds of intervention (based on the Hardiker Model) and the notion of ‘reorientation of child welfare services’ which is a global phenomena (Gilbert et al, 2011; Devaney & McGregor, 2016). The major question addressed is whether use of a strengths based approach such as Meitheal, can achieve the goals of re-orientation of child welfare services towards greater emphasis on prevention and early intervention at the local level of individual practice through to the wider level of organisational and policy developments. The intended outcome is that more children and families receive help at an early stage and that less children and families fall through the net where they do not meet the threshold for child protection and welfare services but do have a high level of need.



## Findings

The findings of the study established that the introduction of Meitheal was broadly welcomed by participants as providing a mechanism to intervene at an earlier point of time where a child or young person had unmet needs. One of its key strengths is that it builds a more effective and structured continuum of support for children, young people and their families from low to high levels of need. This in turn created unintended positive outcomes for practitioners such as stronger relationships with other workers and clearer channels for knowledge dissemination.

Participants who had taken part in Meitheal noted that there were benefits for children and young people in terms of improved outcomes and increased meaningful participation by them in the process. Similarly, parents' involvement in the process, for example, in developing actions plans was of significance as was the changed nature of their engagement with services.

As one social worker illustrated:

*I think it was about re-establishing themselves as worthwhile with people that they are worthwhile and are capable. It was a nice chance to shine a spotlight on things that had been done well.*

However, a number of challenges to the implementation process were noted which can be best captured in the context of the ecological model. In the two sub-sections that follow, we focus first of the macro and exo levels which relates to the agency and policy level and then on the micro and meso level which concentrates more on individual interactions between workers and service users, local practices. Throughout, relevant interactions throughout the system levels are observed as they are often mutually dependent and reinforcing.

*Impact on the child protection and welfare system: re-orientation towards prevention and family support.*

Considering the impact of Meitheal on the overall child protection and welfare system, effective implementation of Meitheal was viewed as having the potential to re-orient the child welfare system and reduce the child protection waiting list. The opportunities for structured early intervention and a more collaborative systematic approach in the system generally were emphasised. As one social worker explained:

*For us it was great to get a shared responsibility, we didn't seem to have that previously...For me there was a big shift in that as well seeing that there was actually working in partnership, that there was a shared responsibility of caseloads and case managements and taking responsibility for keeping cases*

Participants also suggested that as families are supported on an on-going basis through Meitheal while their level of need decreases this can prevent the potential for re-referrals to the CPW system.

Notably participants suggested that in many instances the introduction of the Meitheal model allowed for more prompt assessments with the practice of early intervention and prevention embedded in the system and social workers were available to work with families with high levels of need at an earlier stage than previously. Participants observed evidence of some systems change such as the fact that more appropriate referrals were being made as practitioners are more aware of the supportive responses available and the threshold for referrals to the child protection system. The data suggested that the model had already shown capacity and potential to effect the intended re-orientation of interventions towards prevention

and early intervention.

However, participants also cautioned about the impact of redeploying resources in a large scale toward preventative work and away from the child protection and welfare system which continues to be under great pressure in terms of referrals and resources available to respond to these referrals (see Tusla, 2016). Generally, a balanced approach to early intervention and prevention that recognises the complexity of the overall support system for families was advocated. Participants were cognisant of the fact that while some of the targeted families are potential referrals to child protection, many other families in need of prevention and early intervention would not have been involved at any level with the child protection system. It was also highlighted that there is a need to ensure referrals can come directly to Meitheal itself as a response as opposed to becoming only a referral process through child protection. This was considered important to avoid the model being perceived as either a pre- or post-child protection initiative. For example, one manager stated that:

*Obviously we think it was much more effective to intervene at that early stage and prevent the problems from getting out of hand. Some families might have never been referred to child protection but there is still a lot of need in the family... we wanted access for it to be a true early intervention model so we didn't create a culture of encouraging either a system of step down or divert until we were established.*

(Meitheal Coordinator)

Several participants recognised that Meitheal was a potential catalyst for the development of a stronger continuum of service provision from early intervention to child protection. This would allow more space for early intervention as well as creating a more fluid system of support for families in how they move up or down through the system and in how communication between the various strands is facilitated. General attitudes are represented in the following quote:

*I feel it is actually a very good programme because it is early intervention. If the support is given that the child needs at least or hopefully they will catch it in time, it has not gone to another level.*

(Lead Practitioner)

Practitioners reported that by being less rigid and allowing for greater emphasis to be placed on the relationships practitioners built with children, young people and their families within local community settings the Meitheal approach was impacting on the overall macro focus of the system. Respondents found that this community emphasis gave families a wider safety net and potentially integrated them into a more sustainable network of support. Some participants argued that families' attitudes towards services had changed as a result of their involvement with Meitheal as they felt more supported and had greater confidence in the system. In fact the separation of Meitheal from the child protection system seemed to be crucial for families' 'buy-in' to the process.

Similarly, there is a possibility that the introduction of the Meitheal model might change help-seeking patterns among families more broadly. This is due to the self-referral mechanism and that through Meitheal they could access services they were previously unaware of. As Meitheal is not targeted at particular need there is greater scope for a range of families to be drawn into

it, which in turn ‘normalises’ the idea of seeking help around parenting issues, et cetera. Furthermore, it was argued that if families have a positive engagement with the Meitheal model in how they are treated, the speed with which they are provided with a response, the centrality of their voice and the nature of their experience overall that they could be more likely to seek help if they need assistance in the future.

*Impact on child protection and welfare processes – impact on capacity to intervene and support children and families.*

In addition to a range of critical observations relating to the impact of Meitheal on the system at a wider level of agency, policy culture and structures the study also focused on the views of how the new model would impact on interactions with families and between professionals on a case by case basis. Social workers were generally very positive about the introduction of the Meitheal model to their day to day practice. Meitheal was perceived as a useful resource distinct from what an individual service could offer to a family with complex needs and when a child protection intervention was necessary. One social worker expressed the following views on the Meitheal model:

*If it doesn't work, if it turns out that Meitheal is scrapped, we'll be devastated!*

*We're hoping that this is going to be continued ... because it looks like it's going to work.*

(Social worker)

In some areas social workers reported they could focus on more complex, cases with a higher level of need. Many participants also suggested that it relieved some of the pressure on individual social workers as they knew that they could refer a family on rather than closing a

case or adding it to an often already lengthy waiting list. It was also noted that even in cases, which had to be referred into the child protection system from Meitheal that external agencies had not pulled away from the process. It has led to a reduction in the number of referrals coming into their department as other professionals, albeit slowly, begin to make direct contact with the Meitheal system rather than referring a family directly to them.

A number of participants argued that Meitheal could help to change the relationship between the child protection and welfare practitioners and community-based practitioners through facilitating opportunities for dialogue, learning and collaboration. One manager in the child protection department stated that:

*We have had reports from mental health [services] that have very much talked about the need to have a more integrated approach across services I think Meitheal provides a very good opportunity to develop that further.*

(Social Work Team Leader)

A number of social workers argued that there was a higher level of interactions at the individual practice level where referrers were now more comfortable with contacting the child protection system about a concern at a pre-referral stage as there was now a possibility that their concern would be dealt with outside of the system. In one area social workers noted that there had been a de-escalation of the language used with participants noting that referrers did not feel they had to phrase their concerns in such a way as to get the attention of the child protection team.

This points to a move towards the sharing of responsibility around child protection among the wider community. There have been some indications of change whereby agencies that previously had automatically referred child protection concerns into the child protection

department had begun to view themselves as having a proactive part to play in working to resolve issues. Many participants believed that the introduction of the Meitheal model helped facilitate the management of risk in the community as there was greater support available with a structured process to draw on.

Participants highlighted issues relating to thresholds of need that impact on the implementation of Meitheal. Discrepancies exist in how the child protection system and other stakeholders generally interpret intervention thresholds. As a participant from the community and voluntary sector outlines:

*I won't take on a Meitheal where I know there is a very clear obvious child protection issue. So if it is very clearly within the threshold then that is ok.*

Several participants noted that disputes over whether the Meitheal workers or the workers in the child protection team should 'hold' a family had resulted in delays in decision making. Fundamental to this seems to be the fact that child protection social workers are focused mostly on the immediate challenges of risk management while, the community and voluntary sector are concerned that their enhanced role through Meitheal will result in too much burden being inappropriately placed on them.

There are also concerns about the standardised threshold as applied to Meitheal, which relates back to the exo and macro level. Practitioners expressed concern that the threshold that Meitheal operates at will rise over the lifetime of the model with a sense emerging that this had already started to occur. There was also a belief that nationally there were differences in the thresholds applied to Meitheal. A number of participants argued that the level of need in current

referrals from the child protection system into Meitheal were too high and required a child protection intervention. Practitioners were also worried that in taking on this type of role, their carefully constructed relationships with the community would be eroded.

Interacting together in Meitheal has resulted in improved relationships amongst practitioners from different agencies with greater synergy brought to work practices and approaches. This relationship was commented on:

*I can only see it bringing different sectors closer together. With all of our defensiveness, our egos, our need to appear a certain way, we are only people trying to do the best that we can for the children that we are talking about.*

(Social Worker)

The increased opportunities for engagement and dialogue between the child protection system and the wider support services through, for example, attendance at allocation meetings was seen as improving communication, trust and professional relationships. As one practitioner explained:

*One of the key things I see with Meitheal is that clearly the responsibility is not just with the child protection department, it is a sharing that responsibility out to all the other services that acknowledge that we do have a key role to play within the lives of these children by becoming part of this process*

(Educational Welfare Officer)



A structural challenge identified, relating to the system as a whole, from the micro to macro level, concerned communication at this interface. This sometimes resulted in a lack of joined up services for children referred between Meitheal and the child protection department. Participants suggested that much of the responsibility for communication and the implementation of Meitheal appears to lie with individuals rather than being organised in a formal, structured systems-level way. This raises questions about the sustainability of the model as in the absence of structured processes it overly relies on relationships between individuals.

A further challenge noted is where a child protection concern has been raised during a Meitheal process there is no specific response from the child protection system to this. In some areas, such a referral is added to the waiting list for assessment in the same way as any other. Several participants argued that the ensuing delays in the initial assessment caused potential conflict between Meitheal and the child protection system and created tension over whether or not a child protection referral should be made. During this interim period, where the official Meitheal process is suspended and the assessment is not complete the child and their family may not receive any support. This not only increases the risk to the child or young person but also means that any progress made during the Meitheal could be lost.

## **Discussion**

Gilbert et al. (2011) and Gilbert (2012) capture a framework of child welfare systems that triangulates support, protection and a strengths based approach which promotes children's rights. The Meitheal model can be understood within this framework with an emphasis on re-

orientation focused on a strengths based approach to promoting the overall well-being of the child. Shifting from the position of the 'expert' the strengths based practitioner understand that parents or other family members are best served by collaborative responses that recognise the ability of people to find their own solutions and become experts in their own lives (Connolly and Harms, 2015) The strengths based perspective also holds that a family member will have a greater investment in working towards goal achievement if the goals belong to them (Connolly and Harms, 2015)

How to promote family support and resist a narrow approach of preventing harm and abuse has been extensively researched and discussed in various international contexts (for example, Devaney et al. 2013; Tunstill and Blewett, 2015; Churchill and Fawcett, 2016) and Meitheal provides an excellent example of this dilemma in action. Indeed, the findings of this study bring to life three broad well-known theoretical frameworks from international research and literature on child protection and welfare which will be the focus of the discussion. The first is the ecological model conceptualized by Bronfenbrenner (1979) as an overarching framework for understanding interactions between different parts of the system. The second is the framework of need as developed by Hardiker and colleagues in 1991 and on which current models of thresholds for intervention are designed (see, for example, Hayes and Spratt, 2014). The third framework is the interface between child protection and welfare and family support developed by authors such as Gilbert et al (2011) among others. In this discussion, we will present the three theoretical frames briefly and identify how the results of this study can be applied in each instance to inform practitioners involved in similar practices and the ongoing evaluation of the Meitheal model.

The ecological model has become an accepted dominant model for assessment in child welfare (Tusla, 2015) and is based on a broad generic framework that seeks to capture micro, meso, exo and macro levels of practice. Using the traditional four layers offered by Bronbrenfenner

(1979), the findings can be used to map the importance of interactions between the individual systems of the family and from within the wider neighbourhood as the Meitheal model become embedded. One of the main strengths emphasized by respondents of this new practice model and wider system of working through networks has been to recognize the great importance of the specific context of interactions with individuals and families. The family strengths based perspective can be located within this ecological framework. Folgheraiter (2004) reveals how it is the strength of these networks and their capacity which can generate helpful partnerships with practitioners which can drive forward necessary change for children. Many consider this new approach as a way of improving the connections between the micro-meso level made up mostly of the family and informal help systems and the exo and macro made up of the more formal processes of education, welfare, formal services, law and policy. At the same time, there remains a challenge to work out the connections between and within those levels. For example, a finding from the study has been that Meitheal relies greatly on co-operation across a range of different systems and agencies many who are operate in a similar space on the exo and macro level but not necessarily in a co-ordinated way.

Although the ecological model is excellent for framing relations and goes some way to helping to identify how interactions and connections can be improved it is limited in helping to perhaps work out the more in-depth interactions in relation to levels of need and support required at the micro level. Some families can do very well with excellent universal services while others need targeted intensive supports for some or all of the time. This is where the Hardiker et al model (1991) and adaptations of it comes into significance. Considering their four levels of need ranging from Level 1 (universal need) to Level 4 (high level of need and risk) (Devaney et al., 2013), one can see how Meitheal is a clear attempt to decrease the numbers of children and families receiving inputs at Level 3 and 4 and increase interventions at Level 1 and 2. Although, as the findings highlight, Meitheal is not simply a 'step down' from high level to

lower level intervention but also a widening of the support net to families who would never be classified as in need of child welfare intervention at a Level 3 or 4. It is now accepted that even in the most troubled of families' with high levels of need, islands of strength and resilience can be found. Supporting family members to be involved in identifying their own needs, with a focus on their strengths promotes a sense of engagement and joint working (Devaney and Dolan, 2014). The findings provide a rich illustration of the challenges of a system effectively broadening its support function while keeping strong its' protective and risk management system. The interface between Meitheal and child protection system permeates the findings and emerges as an overarching theme. Embedded in this, the value of having a 'structured continuum' has been strongly emphasized and represents the third core conceptual devise to consider the findings within. The discussion in this paper mirrors and indeed enlivens very clearly the continuum of support depicted by Gilbert and colleagues between the two main orientations of child welfare services: family support and child protection triangulated with child development and children's rights (Gilbert et al, 2011; Gilbert, 2012). The value of this study is that it has illuminated the way in which this orientation is literally worked out through the day-to-day practices of those charged with designing and implementing a strengths based family intervention model aimed at focussing the child welfare system in Ireland towards a stronger parenting, prevention and family support ethos while still maintaining an effective child protection service.

## **Conclusion**

This paper has reported on the early implementation of the Meitheal model of child welfare intervention in Ireland to give an example of a strengths based family-centred practice that is currently being developed. It has focused on the views of practitioners to give insight into the

specific on the ground dilemmas that illuminate the benefits and limits of the theoretical frames that inform this work. In doing this, we have provided an insight into the detailed working out of a specific attempt to re-orientate child welfare practices. The extent to which this has been achieved is not yet known but the findings show, notwithstanding the many challenges that need to be addressed that the genuine potential for a shift in services has been established and the ground work laid to develop ongoing evaluations of its implementation.

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