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Abstract

Family Support as a named orientation is a relatively new concept in service provision for children and their families in the Republic of Ireland. Notwithstanding this, there are a number of practitioners across a range of disciplines and agencies within this arena who apply a Family Support approach in their day-to-day work. Furthermore, it is increasingly expected that these practitioners and agencies work together in a collaborative manner with the intention of providing the best possible assistance and support. Practitioners are also required to develop their knowledge and skills on an on-going basis while in practice. One model of postgraduate education which is responding to such developments is the Master's Degree in Family Support Studies. This programme is delivered in one University in the Republic of Ireland. In 2011, the programme was reviewed to assess its influence on participants understanding and knowledge of Family Support and on their practice. A mixed methods approach was used in this review, the results of which provide the basis for this article. At an overall level the programme is found to have a very positive influence on participants with a growing pool of practitioners who are skilled and confident in their practice.

Enhancing Family Support in practice through postgraduate education

Introduction

The aim of this paper is to consider the influence of a postgraduate education programme on practitioners who work in children and families services. As highlighted by Moriarty and Manthorpe (2014) there is a comparative lack of research into post qualifying programmes for practitioners who work in this field. The data presented in this paper is based on a review of a part time Master's Degree in Family Support Studies which is provided to a broad range of professionals working with children and families in the Republic of Ireland. The paper first considers the relevant literature in the area before presenting and discussing the review findings.

Postgraduate education for child and family practitioners

In Ireland, as elsewhere the need for ongoing professional development and training for practitioners in children and families services is reiterated in child care inquires and research reports on a continuous basis (Mc Guinness, 1993; Laming, 2003; The Roscommon Report, 2010; Munro, 2011). A recent report on a child care inquiry highlighted the need for a culture of professional development to be built into every discipline and agency working in child welfare and protection services (The Roscommon Report, 2010). There has also been a growing interest in the potential value of 'learning together' as a means to producing better professional relationships (Smith and Anderson, 2008). Moreover, the literature has highlighted that sustained programmes of on-going professional development including progression through postgraduate programmes requiring critical thought are more likely to change individual behaviour and practice than self-chosen short courses, meetings or one-off conference attendance (Zwarenstein, Reeves and Perrier, 2005).

However, in reality this is not always a priority in distributing human and financial resources. As Dolan, Canavan and Pinkerton (2006) caution, while the concept of experiential learning is not new in professional education and training programmes, opportunities to continue reflective learning post-qualification can be difficult, not least as a consequence of the increasingly bureaucratic context in which the helping professions now work.

Furthermore, Howe (1995) highlighted that while workers in the children and families arena are experienced in their field, they are often not adept at articulating the theory to inform their practice, with much of their work based on feeling and intuition. Connecting theory to practice is a significant challenge for all providers of education and training in applied areas. An aim of specialised postgraduate education in the children and families arena is to articulate the knowledge and experience from students' own individual settings within a wider theoretical context, and to account for, and evaluate their choice of interventions (Daniel, Wassell, Ennis, Gilligan and Ennis, 1997). Dolan et al. (2006) note that one of the core tasks of professional training is to ensure that wide populations of workers who interface with families have the necessary up-to-date knowledge and skills to meet need. Elaborating this viewpoint, Buckley (2000) suggests that the ultimate aim of postgraduate learning should be a preservation of the skills, values and knowledge which underpin practice, and an enabling of practitioners to operationalise them in an informed, confident, critical, yet optimistic manner. However, delivering effective interdisciplinary education is a complex task (Barr, 2003) with a need to ensure theoretical ideas are accessible to practitioners and research findings are presented as relevant and applicable to practice (Daniel et al., 1997).

Furthermore, one of the key defining features of adult education is the diversity of work, life and academic experience which students bring (Daniel et al., 1997). This raises important issues for the teaching practice in postgraduate education for an adult population, and supports the use of experiential learning, student autonomy in learning and self-directed learning (Fry, Ketteridge, and Marshall, 2007). The challenge includes pitching material appropriately to meet the diversity of need, and to further harness this diversity to enrich the impact of the material provided (Knowles, 1978; Fry et al., 2007). This issue is particularly marked in postgraduate programmes which are targeted at a wide range of disciplines with very different experiences of qualifying training. The eclectic mix of academic learning, practice knowledge and experiences brought to a multidisciplinary cohort of adult participants brings inherent challenges. It cannot be assumed that there is a common baseline of theoretical or practice knowledge or accepted human values.

The postgraduate Family Support Studies programme

At the time of introducing the Family Support (FS) programme there was a sense that Family Support was under-conceptualised at a policy and practice level with many practitioners continuing to work without a common view of its meaning. One of the core tasks of professional training is to ensure that the wide populations of workers who interface with families have the necessary up-to-date knowledge and skills in order to respond to such need (Dolan et al., 2006). To this end, a two-year part time Master's Degree in Family Support Studies was designed and developed. The programme is the only one of its kind in the Republic of Ireland. Family Support is defined in the Irish context as; a style of work and set of activities that reinforce informal social networks through integrated programmes. These include statutory, voluntary, community and private services and are generally provided to families in their own homes and communities. The primary focus is on early intervention, promoting the health, wellbeing and rights of children, young people and their families and paying particular attention to those who are vulnerable or at risk. This definition is also underpinned by a set of ten FS practice principles (Pinkerton, Dolan and Canavan, 2004).

A fundamental aspect of the FS programme is the multidisciplinary nature of the student group who are employed in a wide range of roles and agencies working on behalf of children and families. The multidisciplinary nature of the student group reflects the view that Family Support is an approach to working with children and families which is applicable across disciplines, roles and agencies as opposed to being the remit of one practitioner (Devaney, 2011). The overall aim of the Family Support programme is to further the education, training and skill enhancement of a multidisciplinary cohort of professionals currently working with children and their families with a common interest in Family Support. This includes the following key learning objectives:

1. To strengthen the knowledge base of Family Support theory, policy and practice;
2. To develop key skills in Family Support practice;
3. To enhance the quality of Family Support services delivered by relevant state, voluntary, community and private agencies;
4. To develop research, evaluation and report writing skills.

In order to be eligible for the FS programme students must have a minimum of three years of work experience in the health and social services area.

Programme content

The FS programme consists of seven modules in year one which are core to the programme and are offered in an advanced format in year two (see Table 1). Through the three core modules, students are provided with an overview of Family Support theory and practice which spans the concept of Family Support, the wider context in which it occurs and specific models of intervention. Policy considerations and sociological debate on contemporary issues relevant to children and families are explored in the Sociology and Policy module. Children's rights and the issues involved in upholding their rights are also considered in this module.

Table 1: Programme modules

Core modules - year one and two	
Family Support Theory Family Support Practice Children and Families in Ireland: Sociological Insights and Policy Perspectives	
Additional modules	
Year one	**Year two**
Child Protection, Alternative Care and Family Support Community Development and Family Support Understanding and Working with Specific Populations	Family Law Health Promotion and Family Support Social Science research

In addition to the three core modules, in year one students are required to complete a module on Child Protection and Alternative Care, Community Development and Understanding and Working with Specific Populations, all of which incorporate a specific emphasis on Family Support. In year two, Family Support and Health Promotion, Family Law, and a Social Science Research module are included.

Methodology

A mixed method approach was applied to this review process. Students of the FS programme over a seven year period (n= 77) were invited to complete an anonymous postal questionnaire on their experience on and learning from the programme and to participate in a one-to-one interview to further discuss the influence of the programme on their practice. A sequence of stratification in the sampling decisions and procedures was then adopted with this group of participants. Stratification refers to a system of controlling elements of the population included in the research (Creswell, 2007). A total of 12 practitioners were selected to participate in the interviews; two participants from each year of the six intakes of the programme. In order to achieve this aim, the researcher first stratified the consenting population according to programme intake. In addition, as the review also focussed on the influence of the FS programme across a broad range of disciplines and agencies the population stratified from each intake was then further stratified according to their discipline, role, or agency. Therefore, the consenting group of participants were purposively sampled in order to include the wide range of disciplines who participated in all intakes of the programme.

An unstructured narrative inducing face-to-face interview was used with participants (Wengraf, 2006). Interviews lasted approximately one and half hours and were digitally recorded and subsequently transcribed verbatim. The transcriptions were then imported into the Nvivo software package (version 8) for qualitative analysis. Nvivo is used as a tool to manage and organise the data analysis. The analysis framework used was that of inductive analysis which involved a process of discovering patterns, themes and categories in the data (Patton, 2002). Content analysis was conducted on the data relating to the experience of participation on the FS programme and its influence on practice which was then then selected and coded into themes and sub-themes. The statistical software package SPSS (version 18) was used to run statistical analyses on the survey data. The survey consisted of 23 questions (a number of which had sub-questions) with each answer being assigned a particular code. Reports were then run on the frequency of responses from participants on each question and sub-question.

Full ethical approval was granted for this study by the relevant University Research Ethics Committee. Ethical issues which were considered by the researcher included the potential for bias in the sample group and the possible identification of participants through their narrative. The researcher applied a number of Ahern's (1999) strategies to identify areas of potential bias in the analysis and write up stages of the research. Specifically this involved:

- regularly questioning the process of reviewing the data;
- being open to re-interview or reanalyse transcripts upon recognising a bias or identifying material in data;
- consulting with others if there is a sense of "a block, desensitisation, or boredom" in the analysis; and
- reviewing the writing process to check if one respondent or discipline is quoted more than another (1999, p. 409).

In a further effort to eliminate bias and to validate the findings, an overview of the analysed data and the associated findings was forwarded electronically to each respondent with a request for feedback on the content. Respondents reported their satisfaction with the findings presented to them and agreed with the interpretation of their interviews.

As with any research study there are limitations to this review. While the intention was to consider the influence of the FS programme on the wide range of disciplines and service providers who have participated in the programme it was not possible to include the full group. The findings are self-reported by a sample of those who participated on the programme. Furthermore, the voice of the recipients of the services provided by the participants, children and their families are not included in this study.

Findings

Participant profile

A total of 62 participants completed the anonymous questionnaire yielding a response rate of 80 per cent. In certain sections of the questionnaire, respondents did not complete specific questions. Where the total number of respondents is less than 62, this is indicated in a footnote. 55 participants consented to participate in the one-to-one interview with 12 participants selected. The participants

selected were from a variety of disciplines, and employed in diverse roles in a wide range of statutory and voluntary agencies. The roles included public health nursing, child protection social work, social care, policing, early years child care services, health promotion, dedicated Family Support services, school completion, support services for asylum seekers and refugees, and community development. The majority of respondents (33 per cent) had between 11 and 15 years of experience prior to being accepted on the programme. A further 28 per cent had between six and 10 years of experience. Five respondents (eight per cent) had been working in the field for over 25 years, with four participants (seven per cent) having between three and five years' experience. One respondent did not answer this question.

Influence of learning

All respondents reflected on their general learning and overall experience of participating in the FS programme. There was a general sense expressed by participants that their perspective and practice had changed as a result of completing the programme. Specific comments made in their interviews included:

> *'now I see that if I can just get in and find one little thing that's happening well, we can effect change'* (P11).

There was consensus among participants on their overall increased confidence in using a Family Support approach to underpin their practice:

> *'I'm much more confident and competent in terms of what I am trying to deliver and how I hope to deliver it, and in the practice of supporting families in relation to a variety of needs'* (P7).

Respondents were asked to rate whether the programme had supported them to act as an advocate for Family Support. A large number of respondents (72 per cent) reported that the Family Support programme had a *very significant or significant influence* on their role as an advocate. A number of those interviewed also specifically referred to their increased confidence in advocating on behalf of Family Support.

'I have become a complete advocate for Family Support, but in a more confident and knowledge based way. I have given presentations at staff meetings and feel more able to articulate confidently things that I know now' (P5).

Programme modules

Participants were asked to consider and rate which of the programme modules influenced their practice. The findings on the three core modules is firstly presented and is illustrated in Figure 1[1]. A large number of respondents were *greatly influenced* or *influenced* by the Family Support Practice module (90 per cent) and by the Family Support Theory (87 per cent) with 68 percent reporting as being *greatly influenced* or *influenced* by the module on Sociological and Policy Perspectives. A smaller number of participants also reported being *somewhat influenced* by these three core modules.

Figure 1: Influence of the core Family Support programme modules
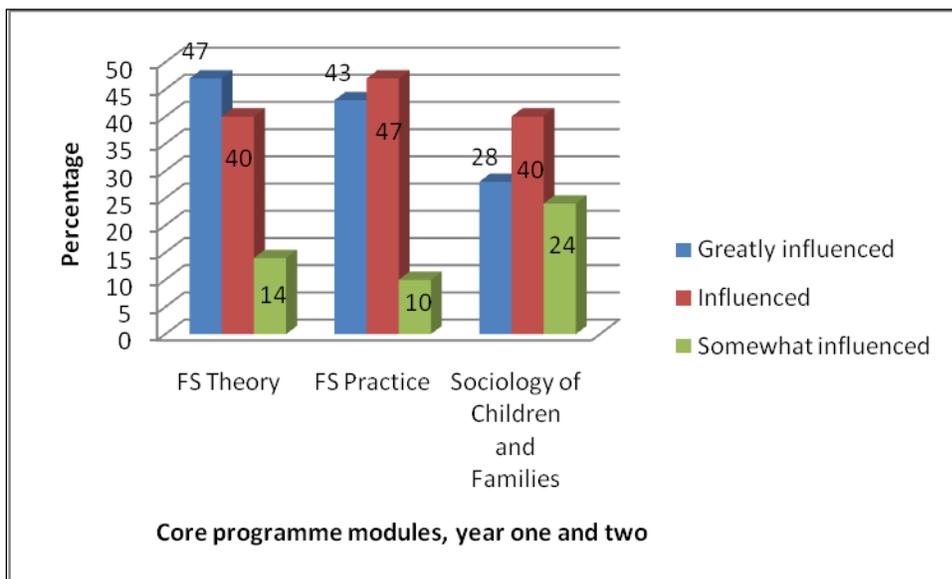
Respondents described having acquired a clearer understanding of what Family Support is and the characteristics of a Family Support approach, and highlighted this as an important and beneficial outcome of the programme. Participants referred to having clarity on what a Family Support approach means in practice, an overall change in their practice as a result of incorporating the

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[1] A total of 58 respondents completed these questions, rating the three modules as indicated.

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Family Support principles, a new found awareness of the level of Family Support inherent in their role and increased structure to their work. As one respondent explained:

'I came out of the programme with a much clearer idea in my mind about what constitutes Family Support, the models of practice, the theoretical basis and an accepted mindset or perspective on it, (P4).

The data relating to the additional five modules, delivered over year one and two of the programme, is illustrated in Figure 2[2]. The modules on Child Protection and Alternative Care *greatly influenced* 28 per cent of respondents, with Understanding and Working with Specific Populations and Community Development *greatly influencing* 13 and 14 per cent of respondents, respectively. Child protection and Alternative Care was rated as *influencing* 44 per cent of participants, Understanding and Working with Specific Populations as 30 per cent and Community Development as 36 per cent of participants. The research thesis completed in year two was rated as *greatly influencing* practice by 60 per cent of the respondents. Six per cent of respondents were *greatly influenced* by Health Promotion, with 31 per cent *influenced* and 18 per cent of respondents *greatly influenced* by Family Law with 46 per cent *influenced* by this module.

Figure 2: Influence of the additional modules on Family Support programme

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[2] A total of 58 respondents completed these questions, rating the additional modules in as indicated.
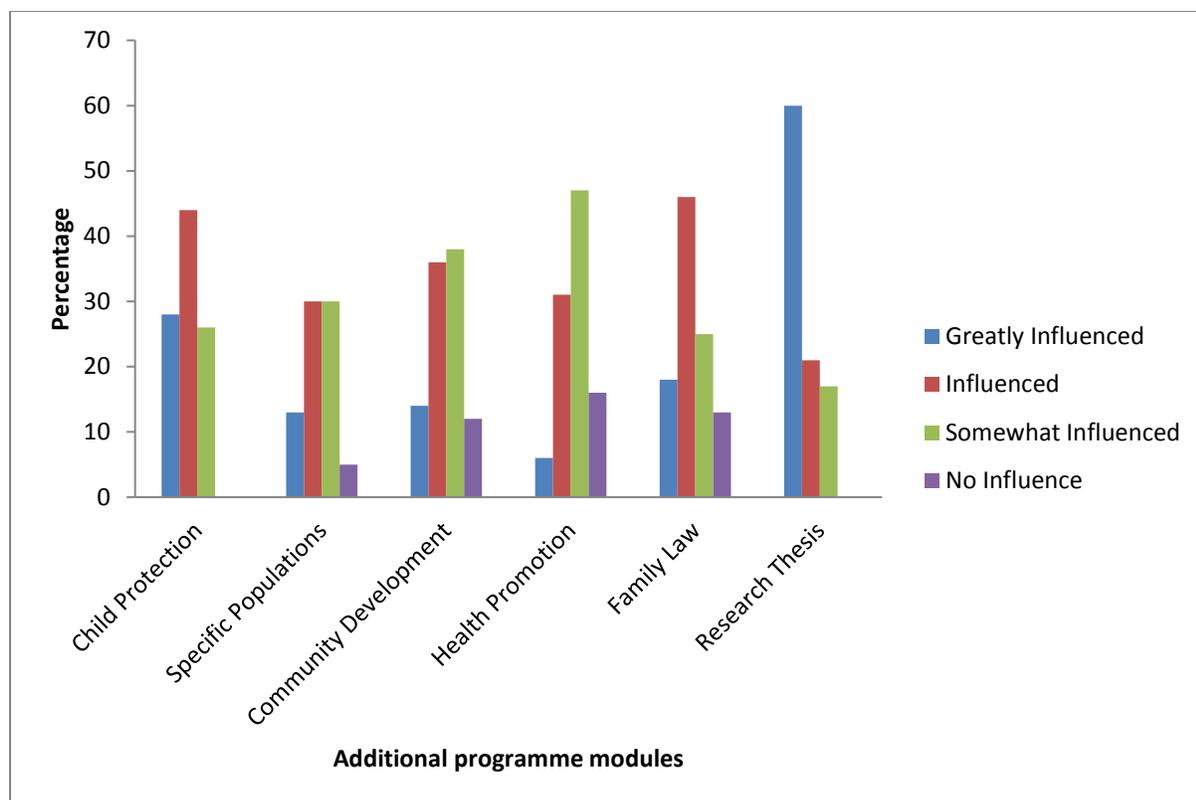
Of those who rated the research thesis as positively influencing their practice, a variety of reasons were attributed to this. These included:

- increased knowledge of national and international evidence on what works;

- a greater understanding of social science research and its impact on practice;

- developing of new skills and models of practice;

- an increased ability to apply theory to practice;

- an opportunity and ability to reflect on practice; and

- an ability to use research findings to inform practice.

A theoretical base to practice
Respondents were asked to report on the theories which actively inform their practice on a regular basis following their participation and learning on the FS programme. This data is presented in Figure 3. Resilience theory was reported as having a significant impact on practice, with 68 per cent of participants rating it as *always* informing their practice, and 29 per cent of participants as

sometimes informing their practice (97 per cent in total). Combining the two ratings, an *always* or *sometimes* rating was reported by the majority of respondents with regard to Social Support (94 per cent), Social Capital (90 per cent), Child Development (90 per cent), Social Ecology (89 per cent) and Attachment (82 per cent) as informing their practice.

Figure 3: Theories which inform practice of Family Support graduates
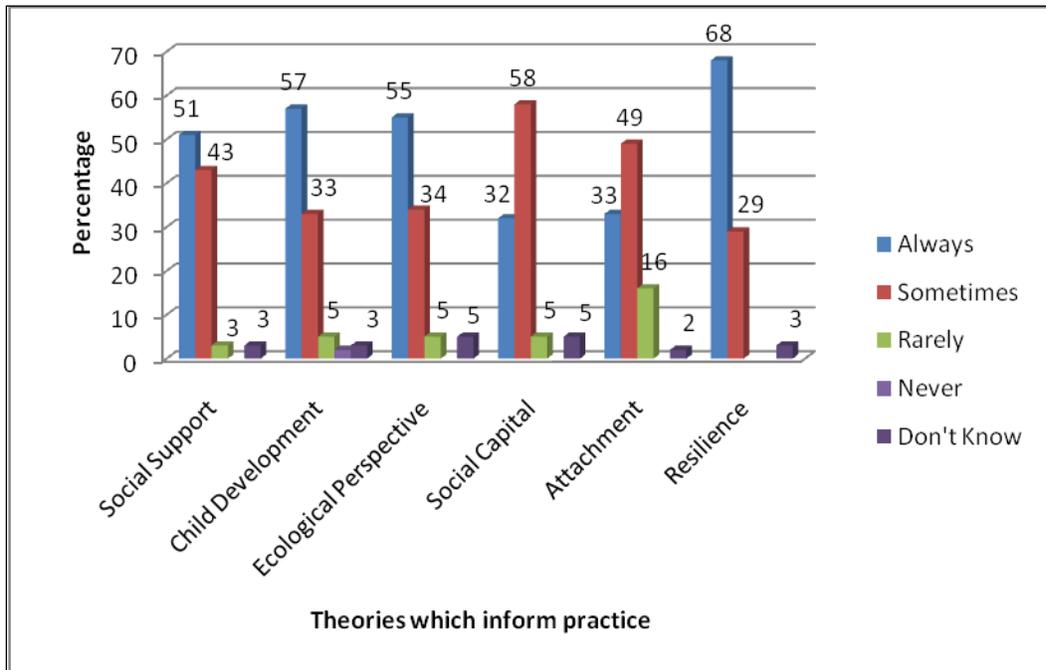
Participants emphasised the acquisition of a theoretical foundation for their practice as a significant and positive outcome of their involvement on the programme. As one participant highlighted:

'You can be out there on the ground all you like but you do need to be taught the theory as well... to actually know why things happen, that was the biggest plus for me doing the MA that I learned actually how and why these things can happen' (P3).

How Family Support is delivered: service and practice characteristics

Participants were asked to indicate if the characteristics of Family Support related to both service delivery and individual practices, as taught on the programme, are reflected in their work on a regular basis. For the purpose of clarity, the data on the service characteristics are presented first,

illustrated in Figure 4[3] followed by the data on characteristics of individual practice, illustrated in Figure 5.

A flexible service (73 per cent) with multiple referral routes (37 per cent) and offered at an early stage in a difficulty (23 per cent) was reported as *always* a feature of the practice of participants. A time limited approach was reported as *always* being a feature of service delivery by nine per cent of participants. Participants also reported characteristics reflective of a strengths-based (74 per cent and 23 per cent), preventative (59 per cent and 49 per cent), needs-led (58 per cent and 39 per cent); and participative (58 per cent and 32 per cent) service as *always* or *sometimes* informing practice. An evidence base for practice was reported by 35 per cent of participants as *always* informing practice.

Figure 4: How Family Support is delivered; service characteristics

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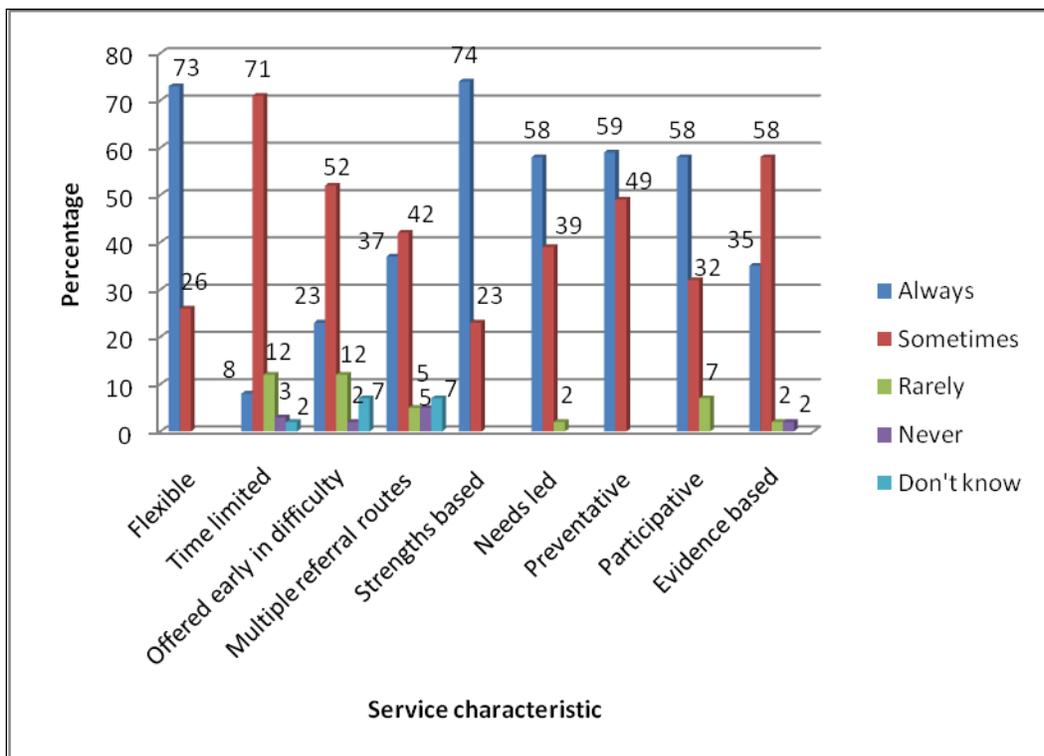
[3] A total of sixty-one respondents rated the service characteristics as indicated.

Participation of children in matters which affect them and opportunities to express their opinions featured strongly in respondents' comments, and was attributed as a direct outcome of their learning on the programme. Specific examples of how the programme encouraged their practice of giving a voice to the children and parents they work with in a meaningful way were articulated:

'I would now make sure I consult with the children first… what they would like, what would be important for them… then at the same time try and consult with the parents and see what is it they want' (P12).

Elaborating on this point, respondents further suggested that their approach to consulting with children and families changed almost immediately upon commencing the programme. Prior to this, participants recalled how, in many instances, while they attempted a process of consultation it was often more tokenistic than meaningful. Participants described how they are currently engaging in more varied and meaningful approaches to involving children and families, and ensuring that their views and opinions are sought and listened to.

A number of respondents also noted in their interviews that, as a result of their learning on the FS programme, their practice is increasingly underpinned by a strong evidence base with a focus on outcomes. One participant highlighted:

'I have the knowledge now that the research shows that the core methods used in Family Support actually work and are effective, and can have positive outcomes for children and their families' (P8).

Specific characteristics of Family Support were reported as informing individual practice and are illustrated in Figure 5[4]. Reflective practice was reported as *always* being a feature of practice by 44 per cent of participants, with a further 45 per cent reporting it as *sometimes* being a feature of practice. A respectful approach to working with children and families was reported as *always* informing the practice of the majority of participants (94 per cent). A number of participants (76 per cent) reported a relationship base to their practice.

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[4] Similarly a total of 61 respondents rated the practice characteristics.

Figure 5: How Family Support is delivered; practice characteristics
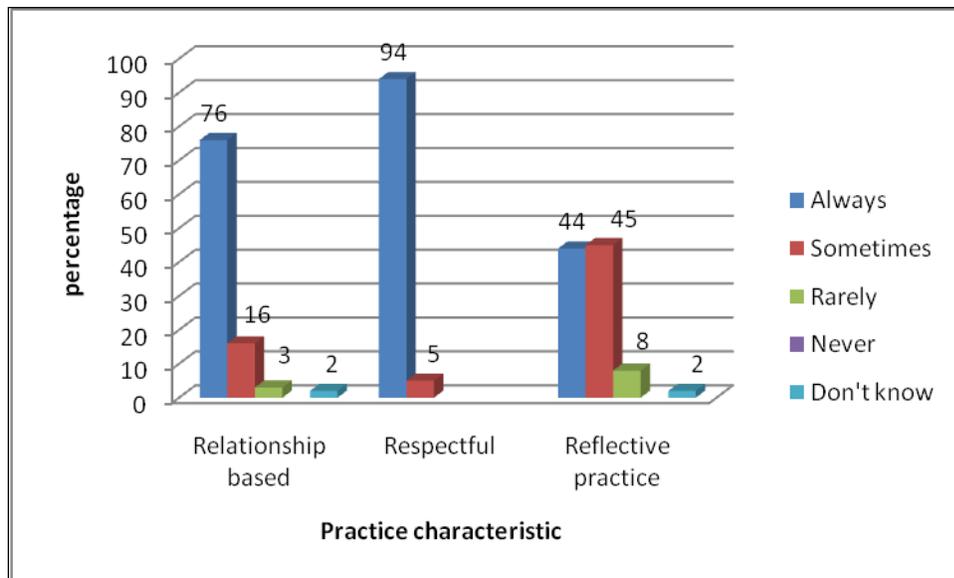
Respondents also commented on their use of models of reflective practice on a regular basis following their learning on the programme:

> *'I am more likely now to go away and think about the implications of what is happening with children and families. I have the theory and the knowledge now, but I also now reflect on the different aspects of a given situation and consider it from all angles'* (P9).

Finally, respondents highlighted the overall influence the programme had had on their practice and indicated the level of this change. Areas where their practice had changed due to the influence of the programme included:

- an increased use of assessment tools;
- adopting a model of reflective practice;
- an awareness of policy and its implications for practice;
- understanding of the impact of environmental factors;
- a focus on outcomes and indicators of change;
- accessing informal supports and families' own strengths;
- underpinning practice initiatives with a theoretical basis; and

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- the use of Family Support principles as criteria to guide practice.

The increased knowledge base and theoretical framework to underpin practice are clearly identified as increasing respondents' sense of confidence. However, the overall recognition of the Family Support approach at a Master's Degree level is also acknowledged as a contributing factor to this. The academic endorsement of Family Support at this specialised postgraduate level is viewed as an indirect outcome of the programme overall, contributing to a sense of confidence in participants to practice, promote and advocate a Family Support approach.

Aligned with this a number of respondents also referred to the fact that their personal and professional development in relation to the Family Support practice is an ongoing process, with the postgraduate programme one component of that. Reference was also made to their experience of working in partnership with practitioners who have completed the programme, describing a common approach used with a strong focus on families' strengths. One participant noted how practitioners who have participated on the programme are:

'fully aware of the benefits of Family Support, they are engaging with families in a partnership, it's respectful, it's not patronising, you know that families' opinions will be valued and that people will be looking for solution...it's essentially working your way out of a job' (P2).

The potential for the longer-term and wide-ranging influence of the programme on how practitioners work with families is suggested as '*monumental'* (P8), as increased numbers of practitioners participate in the programme and adopt the Family Support approach in their practice.

Discussion

Working with children and families who experience a range of circumstances and difficulties which create disadvantage, cause distress, and influence their ability to function safely or adequately, requires a knowledge and skill base (Connolly, 2004). Specialised high quality training and education for practitioners working in this field is essential in order to provide the necessary supports and services to address such issues. In recent years there has been an increased impetus towards more consistent and effective interdisciplinary working across all areas of human services

(Smith and Anderson, 2008). The postgraduate FS programme reviewed in this paper aims to provide this high quality knowledge and skill base to a broad range of experienced professionals working in children and families social services.

Prior to the development of this Family Support programme, practitioners in the field were practicing in a vacuum regarding specific theories, research and practice resources. There is solid evidence provided in this paper that the original four key learning objectives of the programme are being achieved. An original objective of the programme was to educate participants in respect of the core theoretical ideas underpinning Family Support and all respondents report being positively influenced by the core theory module. An amalgam of a suite of related theories taught on the programme provides a basis for interventions and activities with children, young people and their families.

Two further objectives of the programme are to develop the practice and policy knowledge base of Family Support and key skills in this area. These objectives have also been achieved with participants indicating that their day-to-day practice had changed as a result of the learning accrued on the programme. This finding mirrors the outcome of similar studies on in-service training programmes for social care practitioners (McSweeney, 2014). Specific areas where practice had changed included using assessment tools and models of reflective practice, a focus on outcomes and indicators of change, insight into the impact of broader policy and environmental issues on children and families, and regular application of the Family Support principles to inform specific interventions and as an overall criterion to guide practice.

The social science research project conducted in year two is highly regarded and positively influenced all respondents indicating success in achieving a further objective of the programme. The expectation that the programme would develop students' research and report writing skills, and provide them with evaluation skills is achieved through the process of designing, implementing, analysing and reporting on an applied research study. The research project had a wide reaching impact on respondents with a new found knowledge on the application of theory to practice issues, an understanding how research can improve practice and the use of national and

international evidence on what works in practice reported as additional outcomes of completing their research thesis.

The final programme objective is to enhance the quality of service delivery and evidently this has also been achieved. The academic learning attained has had a direct impact on the manner in which Family Support is delivered in practice. The characteristics of service delivery and individual practice were reported to have strong relevance for the participating practitioners with positive findings reported on their use in daily practice. This finding reflects research with social workers who have undertaken post-qualifying programmes which consistently shows they believe their knowledge and skills have improved (Moriarty and Manthorpe, 2014). Participants reported that they offer support early in the stage of difficulty, offer multiple routes of referral, and increasingly use an evidence base with a focus on outcomes on which to base their practice. Participants also readily offered examples of partnership and preventative work and clearly espouse this approach in practice. Practice characteristics reported as used regularly by participants included reflective practice, and a respectful approach which involved a relationship base to their involvement with children and families. The use of social science research and evidence based practice is also being applied by respondents in an effort to enhance the quality of the services being delivered. This is an important finding and can only lead to a higher quality, consistent, outcomes-focused service being provided to children.

However, it is worth noting that while participants report that their practice has improved it is difficult to ascertain whether this translates into improved services for children and families (McLaughlin, 2013). In their systematic review of research, Zwarenstein et al. (2005) have shown that there is very little evidence of sufficient quality to conclude that postgraduate education programmes such as this have a long term positive impact on client care. Carpenter (2005) developed a framework for analysing the outcomes of postgraduate education programmes and suggests that an evaluation of a programme should answer the following questions:

1. Does "it" work? In other words, do students learn the outcomes which we as educators hope they do?
2. Are students able to put their learning into practice?
3. If so, does it make a difference to the lives of service users and carers?

This review of the FS programme has indicated a positive response to questions one and two in Carpenters' framework however has not addressed question three. The findings presented in this paper have provided the perspective of the student / practitioner with no evidence as to whether the reported influence of this programme was experienced by the children and families they work with. A challenge remains for education providers and researchers in demonstrating if learning from postgraduate courses has been translated into practice (Moriarty and Manthorpe, 2014).

Nonetheless, this review has indicated that at an overall level participants who have completed the programme now advocate for, and practice Family Support with expertise, confidence and conviction. The challenges involved in providing a postgraduate programme to a multidisciplinary cohort of adult learners appear to have been overcome. Indeed, working in collaboration with colleagues who have also completed the programme is highlighted as a wider benefit of involvement in the programme. As noted by McLaughlin (2013) inter-disciplinary education is one way of promoting effective interprofessional practice. Although beyond the remit of this review, further research on the wider influence of the FS programme, given its multidisciplinary and applied nature, would add value to the debate on the impact of, and challenges associated with inter-disciplinary practice within the children and families arena.

Conclusion

The FS programme is one model of postgraduate education attempting to instill expertise and confidence in those working with children and their families. The programme is shown to have a very positive impact on the multidisciplinary group of participants in this review process. This is evident in their overall knowledge levels and skill base and also in their conviction in their practice. While welcoming the positive outcome of this review process it is nonetheless important to remain realistic and critical of the influence of postgraduate education programmes and to continue to evaluate their influence as part of the ongoing effort to provide the best possible supports to the children and families involved in social services.

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