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# **Parenting Support: Policy and Practice in the Irish Context**

## **Abstract**

Increasing government interest in parenting support (Broadhurst, 2009) has emerged in response to the increasingly diverse form of families, a growing emphasis on children's rights and a policy shift towards prevention and early intervention. This has contributed to a range of stakeholder activity in the area, with the notion that parenting is a set of skills that can be learned now widespread (Daly, 2011). The need to establish 'what works' in parenting support (Shulruf *et al.*, 2009) has resulted in considerable research, with evidence supporting the provision of universally accessible supports for all parents which can be tailored for those with additional needs. Simultaneously, an increasing body of evaluation research has resulted in positive evidence-based outcomes for a range of parenting support programmes.

This paper presents an overview of the policy and practice of parenting support, exploring the international and national literature on what works in improving parental capacity, and detailing the wide scale emergence of parenting as a policy imperative. The paper presents the Irish context, describing the diversity of the population, mapping the current service provision landscape, and detailing the strategic direction and emerging parenting support programme of work within Tusla, the statutory Child and Family Agency.

## **Introduction**

It is accepted that parents play a critical role in influencing their children's lives, before and after birth. Parenting can influence children's social, emotional and physical outcomes (Department of Children and Youth Affairs (DCYA), 2015). Supporting parents and improving parental capacity can contribute to family wellbeing. Parenting support sits within family support, an umbrella term under which refers to a broad range of family focused services

and programmes, with an investment in all families in order to support parents and improve outcomes for children and young people (DCYA, 2015).

Increasing government interest in parenting support as a policy issue (Broadhurst, 2009) has contributed to a range of stakeholder activity and engagement in the area, while the notion of parenting as a set of skills that can be learned is now widespread (Daly, 2011). Programmes and practice provide a range of prevention, early intervention and targeted supports for parents in different contexts and in different parenting relationships. Both are increasingly subject to monitoring and evaluation as an emphasis on evidence-based outcomes persists. Increasingly, there has been a move to deliver services that are based on evidence of effectiveness. Group based programmes are known to deliver positive outcomes. Individual work undertaken by a practitioner complements group based work. While parenting support programmes are increasingly popular, professionals also act as key sources of support for children and families in contributing to positive outcomes (see Devaney, 2011; Devaney and Dolan, 2014). Individual work can be particularly effective where problems are more complex or parents are not ready or able to work in a group, where it can meet individual needs. The common underlying principle is that of empowering parents to support the development of their children. Such programmes have become well recognised as effective prevention and early intervention initiatives (Centre for Effective Services, (CES) 2014). Prevention and early intervention initiatives are seen to support today's children to become healthy, socially and economically engaged adults in the future (CES, 2012) .

## **Family Forms**

In Ireland, families live a variety of contexts, and in a variety of parenting relationships.

According to the 2011 census, there are 12 percent more families than five years earlier, with the number of children in families increasing by 9.4 percent (Central Statistics Office,

2012b). Enforced deprivation rates are also rising. The consistent poverty rate was 8.2 percent in Ireland in 2013, while enforced deprivation was experienced by 30.5 percent of the population. Those living in households with one adult and one or more children had the highest deprivation rate in 2013 at 63.2 percent. (Central Statistics Office, 2015).

We also know that the family in Ireland takes many forms and has changed considerably in the last number of years. There has been a 17.9 percent increase in lone parents with children from 2006 to 2011. In 2011, there were 215,300 families headed by lone parents with children, 87 percent of which were lone mothers (Central Statistics Office, 2012b). The 2011 Census Bill of Health (Central Statistics Office, 2012a) indicates that 5.4 percent of the population aged under 15 had a disability (Central Statistics Office, 2012a).

In addition, Ireland's ethnic profile is more diverse, and the number of residents born outside of Ireland is increasing. The number of Irish residents who were born outside Ireland stood at 766,770 in 2011 an increase of 25 percent on 2006 (Central Statistics Office, 2012b). The 2011 census data showed that that over half a million Irish residents spoke a foreign language at home. Interestingly, when those who spoke a foreign language at home were asked about their proficiency in English, one in six, or 89,561 persons, ticked the box 'not well' or 'not at all' (Central Statistics Office, 2012b).

It is clear that the experiences and circumstances of parents in Ireland vary considerably and while there is considerable variation in the orientation, philosophy and practice of parenting support across Europe, there is some common ground in the identified need to provide both tailored and targeted supports. It is acknowledged that different parenting support strategies are needed in supporting parents because family circumstances and family needs are different (Rochford *et al.*, 2014). It is known that supports are needed for parents in specific contexts, including "parents living with illness or disability, parenting children with additional needs,

parents living with substance misuse, parents living with domestic violence, bereavement and parenting in different cultural contexts” (Child and Family Agency, 2013a, p.12). In addition, it is acknowledged that particular parenting relationships require support. This group includes adoptive parents, lone parents, step parents, parenting after divorce and separation and parenting in Lesbian, Gay, Bisexual and Transgender (LGBT) families (Child and Family Agency, 2013a). Daly emphasises that there must be special efforts made to target the most vulnerable families who will not necessarily present themselves or make their way to universal services (2011). Reaching out to low income and vulnerable families is acknowledged as particularly important (ibid.) ). This can include parents from lower socio-economic strata (Ghate and Hazel, 2004), younger and first time parents, ethnically diverse families and fathers has been acknowledged (Moran and Ghate, 2005; Rochford *et al.*, 2014).

The need to engage parents as service users is also recognised. Where a preventative service was not established in a way that engages potential service-users, it would struggle to attract users, thus compromising effectiveness (Katz *et al.*, 2007). Ghate and Hazel (2004) identified that while there is a need for greater diversity in the services available to parents, parents are not always aware of the availability of services in their area and that a proactive approach to raising awareness of available services is also imperative to support engagement. (Ghate and Hazel, 2004). Rochford *et al.* (2014) highlight the importance of the location of services in places that are accessible at times that suits their needs. In addition, the need for outreach work was identified a factor in supporting engagement with vulnerable or harder to reach groups (Rochford *et al.*, 2014). It is also important to note that families often access their own naturally occurring supports to cope, with informal sources of support for families an effective form of early intervention and prevention. Thus, the informal and formal sources of support must be recognised in the planning of services (Devaney, 2011; DCYA, 2015)

## **Defining Parenting Support**

Definitions typically identify parenting support as a broad range of activities, distinguishable but largely within the broader theme of Family Support. While the field of Family Support can be defined at one end by a concern about the quality of family life and at the other by a growth of a rights culture in relation to children (Council of Europe, 2006, Daly, 2011), it covers a broader range of family and parent focused services and programmes. “Parenting support may be regarded as intensely related to (but capable of being distinguished from) that wider concept” (DCYA, 2015, p.6). Parenting support focuses on the importance of improved parent wellbeing as contributing to improved child wellbeing. Tusla, the Child and Family Agency define parenting support as ‘a style of work and a set of activities that provides information, advice and assistance to parents and carers in relation to the upbringing of their children, in order to maximize their child’s potential’ (Child and Family Agency, 2013a, p.9). Parenting support thus includes advice, emotional and practical support, as well as formal support directed at individual parents, children or families (DCYA, 2015). The continuum of parenting support spans the lifecourse and ranges from home visits, to mother and toddler groups, to parenting programmes, supervised parenting and alternative care. This includes primary care services and family support services provided directly by the State but also a range of additional parenting and family support services provided by the community and voluntary sector and private providers. Services may take many forms, ranging from universal support in informal settings for self-referring parents through to more targeted and specialist services to support families in particular situations, dealing with specific problems that may present at different times in the life-course of the child (Devaney and Dolan, 2014; DCYA, 2015). For the purpose of their review of what works in parenting support, Moran et al. (2004) took parenting support to include “any intervention for parents or carers aimed at reducing risks and/or promoting protective factors for their children, in relation to their

social, physical and emotional wellbeing” (p.6). In total, this represents a suite of resources that aim to educate parents about child-raising, and at an interventionist level, engage them in activities that seek to change their approach (Daly, 2013).

Tusla report that supporting parents can enhance family wellbeing; contribute to better outcomes for children; and reduce the prevalence of problems later in a child’s life. In addition, at a community level, parenting support can support healthy communities and promote social inclusion. At a societal level, support for parents can ensure a more effective use of resources, serve to reduce inequalities, and can develop and promote human and social capital (Child and Family Agency, 2013a, p.4)

### **Parenting as a Policy Imperative**

Matters relating to family and welfare are present ‘in a transversal manner in a number of EU policy areas including social inclusion and exclusion, active employment, labour law and working conditions, reconciliation of work and family life, pensions, social care, gender equality and migration’ (Daly, 2011). The orientations vary from child protection to family welfare, from prevention to intervention. This can be influenced by actors in the national context such as the welfare state model; the prevailing philosophy and approach to child welfare and family; and the traditions or the service organisation (*ibid*). Despite this, similarities can be found in the focus on at-risk or vulnerable families, and the implementation of support through local bodies. In addition, many countries focus policies on young children, from birth to school entry (Shulruf *et al.*, 2009). ]

Different philosophical models have prevailed and influenced the direction of policy at different times. Recent years have seen considerable research output in the field (Lucas, 2011) supporting the principles of prevention and early intervention. (Rochford *et al.*, 2014).

There has been support for an approach whereby services are provided to all parents but also tailored to level of need (Rochford *et al.*, 2014).

Parenting support is often underpinned by a conceptual frame of the ecology systems theory (Bronfenbrenner, 1979, Moran *et al.*, 2004). The ecological approach supports flexible packages of support tailored to parents' needs to enable them to enhance their parenting skills, knowledge and familiarity with available services (Rochford *et al.*, 2014). Considering the challenge of any parenting support initiative tackling an entire ecology (Moran *et al.*, 2004), the need for further national policies that address the broader social inequalities and issues affecting the impact of parenting programmes for vulnerable families has been acknowledged (Moran and Ghate, 2005, Daly, 2011), while approaches tailored to children of different ages and development stages have also been supported (Rochford *et al.*, 2014). An emphasis on integrated and partnership working can also be associated with the move towards ecological thinking (Lucas, 2011). It has recently been recognised in the Irish context that parenting and family support services should work jointly to enable parenting capacity (DCYA, 2015).

Parenting support policies have been considered an outcome of a climate of greater concern about how people act in their private lives, and a manifestation of a greater willingness on the part of the public authorities to intervene (Daly, 2011, p.1). Clavero (2001) argues that parenting has come to occupy an important place on the policy agenda for a number of reasons. Firstly, families are increasingly diverse in form. Secondly, concern with the shift in parent-child relations and its perceived implications for social cohesion is present. In addition to a growing emphasis on children's rights and the policy shift towards prevention and early intervention in the fight against social exclusion has contributed to the policy imperative Lucas also notes the impact of thinking around social conclusion on the development of parent training approaches (Lucas, 2011). The policy shift has in part been driven by the



longstanding interest of international organisations including the Council of Europe and the UN on this diversification of family forms- the increasing participation of mothers in employment, the transmission of dysfunctionality across generations, and the fact that families experiencing or at risk of social exclusion face multiple levels of difficulty (Daly, 2011).

The United Nations Convention on the Rights of the Child has dominated contemporary thinking on children and their rights, and has figured as a large factor in influencing reform in family policy (Abela and Daly, 2007). Recommendation REC (2006)19 in support of positive parenting underlines parents' primary responsibility in their children's upbringing (Daly, 2011). At a European level, The Council of Europe has had a focus on parenting, advising governments to adopt legal provisions complying with them and guaranteeing legal equality between parents within the family. Recommendation (2006)19 provided a definition of positive parenting as ensuring the fulfilment of the best interests of the child 'that is nurturing, empowering, non-violent and provides recognition and guidance which involves setting of boundaries to enable the full development of the child'.

At a national level, parent education and support policies are not typically standalone policies. They are often associated with different policy portfolios. Policy directives and initiatives relevant to parenting are typically dispersed across a range of government agencies (Shulruf *et al.*, 2009). Daly (2011) notes that there are variations in how countries understand and make provisions, referring to a continuum of parenting support, with general support, or general parenting support at one end and behavioural change interventionist measures at the other end. Within this frame, modes of organisation also vary across Europe and, correspondingly, modes of access vary. In addition, because some mainstream programmes and activities address a multiplicity of issues, they can impact on several policy areas as the underlying problems they intend to tackle are in general multidimensional. Across Europe,

approaches include health promotion; early intervention through education; improvement of the communication between parents and children; and protection of children against smacking and other forms of corporal punishment (Molinuevo, 2013, p.20).

There is considerable variation in the orientation of approaches across Europe. In a Eurofound study of parenting support (Molinuevo, 2013), it was noted that parenting support aligned to the child protection policy area in Portugal, mental health in Sweden and youth welfare in Austria. France is host to a variety of tools, schemes and actions in parenting support, supported mainly by the family branch of social security and the ministry in charge of families. Daly (2011) emphasises the limits of the French generalist and non-interventionist approach, identifying the need to improve the capacity to reach vulnerable groups. In addition, approaches have changed over time. Gilbert (2011) notes that while countries previously identified with the child protection orientation have often shifted to taking on some of the elements of the family service orientation. In contrast there is also evidence that countries that had previously operated a family service orientation have made resolute efforts to respond to increasing concerns about harm to children. Gilbert cites Northern European countries and the Nordic countries (with the possible exception of Sweden) as examples (Gilbert *et al.*, 2011). Similarly, the use of international standardised programmes to deliver parenting support has varied across Europe, with greater popularity in the United Kingdom and Sweden and less popularity in Austria and Germany (Molinuevo, 2013). In Ireland, parenting support and parental participation activities fall within the remit of Tusla, the Child and Family Agency while the Department of Health and Children and the Department of Education also hold some responsibility in relation to supporting parents.

### *The Irish Policy Context*

Since the 1990's, family policy in Ireland has become a policy imperative. In 1998, *Strengthening Families for Life: The Final Report of the Commission on the Family* (Commission on the Family, 1998) recommended a public policy focus on preventative and support measures to strengthen families in carrying out their functions to prevent difficulty. This included provisions for parents, through the development of family support services, including a range of information provision and supports for parents, in addition to an emphasis on collaboration with parents. In 2000, a ten year plan was published as a blueprint for improving the lives of children. *The National Children's Strategy: Our Children- Their Lives* had three main goals, including that children had a voice in matters that affect them; that their lives would be better understood and benefit from evaluation and research; and that they would receive quality supports and services to promote all aspects of their development. It identified as a statement of support to parents, emphasising the 'whole child' perspective, and the need to provide appropriate supports to parents. In 2001, the Family Support Agency Act emphasised the need to promote information about issues, including parenting. By 2004, the *Family Support in Ireland Definition and Strategic Intent* paper (Pinkerton *et al.*, 2004) focuses on the strategic implementation of family as a policy choice. The establishment of the Office of the Minister for Children (OMC) within the Department of Health and Children in 2005 was an expression of the Government's wish to advance an agenda in relation to children's services, implementing in part the National Children's Strategy (Department of Health and Children, 2007). *The Agenda for Children's Services: A Policy Handbook* (Department of Health and Children, 2007) focused on a new way of working with children, their families and their communities, designed as a working tool with reflective elements.

In 2011, the first Minister for Children and Youth Affairs was appointed in Ireland, and a new DCYA established, cementing child welfare as a policy imperative. The work of the Department focuses on key areas of policy and provision for children, young people and families. The DCYA commits to a range of activities including the provision of universal and targeted services for children and families; high-quality arrangements for focused interventions for dealing with child welfare and protection, family support, adoption, school attendance and the reduction of youth crime; and the harmonisation of policy and provision across Government and with related providers. *Better Outcomes, Brighter Futures – The National Policy Framework for Children and Young People* was published in 2014 (DCYA, 2014), setting out the Government's key commitments to children and young people up to the age of 24. The framework highlights the importance of parents in a child's life and the benefits of positive parenting, while promoting better support for parents as a priority. The priority will be delivered through commitments made to increase the provision of supports to all parents “through universal access to good-quality parenting advice and programmes, and access to affordable quality childcare, as well as targeted, evidence-based supports to those parents with greatest needs” (DCYA, 2014).

The DCYA also commits to advancing parenting support. High level objectives include the need to develop strengthen and align policies, legislation and resources in order to achieve better outcomes for children and young people and provide support for parents and families. In addition, a *High Level Policy Statement on Parenting and Family Support* (DCYA, 2015) was formulated, envisaging the development of a system of supporting parents and families that seeks to build on family strengths, wherever possible, and values informal support networks; and can readily deliver supports to children and their families, that are based on inter-agency, cross-organisational and inter-disciplinary working. The Statement promotes

the availability of a coherent continuum of local supports to all parents and families which can be accessed easily and in a timely way. It supports the shift of ‘Parenting and Family Support’ to greatest prominence in Tusla’s discharge of its statutory child welfare and protection responsibilities. While the policy framework acknowledges that the majority of families have the capacity to cope with challenges that arise, it emphasises that some families need more help than others. The approach is proactive, preventative, and based on evidence, with parents, children and young people as key actors in the process. In addition, the Statement underlines the significance of the Children and Young Person’s Services Committees as a key forum for engagement between providers. Throughout, interagency working and working in partnership with community and voluntary providers is highlighted as important to the policy framework (DCYA, 2015).

### **Programmes and Practice in Parenting Support**

Group based parenting programmes have become popular, provided by an expanded workforce of health, education and welfare professionals (Broadhurst, 2009). At the same time, a body of literature documenting the scientific evaluation of parent support programmes has also emerged (Moran *et al.*, 2004). It is acknowledged that parents can benefit from the social aspect of engaging with other parents. Programmes are known to be effective where they are carefully structured, delivered by trained and skilled staff and backed up by good management and support (Moran *et al.*, 2004). Despite their popularity, dropout rates can be high, particularly where the programme is aimed at families with multiple difficulties (Centre for Effective Services, 2012). Nevertheless, a review of the evidence shows that the provision of such parenting programmes represents an important pathway to helping parents (Moran *et al.*, 2004).

The evidence indicates that preventative, universal programmes work and are perceived by service providers and parents to be effective (Coen *et al.*, 2012; Fives *et al.*, 2014). The evidence base also highlights positive outcomes for parents in particular contexts, including parents of adolescents (Nitsch *et al.*, 2015); parents at risk of social exclusion and poverty (Belsky *et al.*, 2006); low-income families (Cefai *et al.*, 2010) and immigrant and minority parents (Coen and Canavan, 2012, Dolan *et al.*, 2013). Different parenting relationships can also benefit from supports. Programmes supporting separated parents proved effective (Parents Plus, 2014) in addition to programmes for teen parents (Riordan, 2002). In addition, indirect supports such as mentoring for young people with complex needs (Devlin *et al.*, 2014) are also deemed effective family supports by parents and service providers.

While the provision of such parenting programmes represents an important pathway to helping parents, the complete picture should also account for those who are not engaged by programmes, those for whom there are limited programmes and those who withdraw from programmes and may not therefore be included in longitudinal studies. Those who are not engaged by programmes may encounter cultural or language barriers, geographical barriers, may feel stigmatised or may find that programmes do not meet their needs. For example, there is a limited evidence base of the success of interventions aimed directly at fathers, despite evidence that fathers are increasingly concerned about their roles as parents (Parentline, 2015). It is also important that parents are aware of services, with evidence to show that this is not always the case and that parents may not access them until crisis point (Coen *et al.*, 2012). In addition, while the evidence shows that programmes are effective in disability settings (Hand *et al.*, 2013), there is limited evidence of their application in such settings.

Identified also as important is individual work undertaken by the practitioner which provides one-to-one tailored support (Moran *et al.*, 2004). The role of the ‘expert’ is identified as

essential in providing advice to parents (Broadhurst, 2009). Parents may be dealing with a range of issues which cannot be catered for solely by a programmatic approach but “requires observation, attention, and discrete interventions from key professionals and services” (Fives *et al.*, 2014, p.15). Professionals play a key role in working with families, in addition to utilising proven programmes as a key source of support. In this sense the practice wisdom of practitioners can complement programmatic work with parents (Fives *et al.*, 2014). Tusla, the Child and Family Agency (2013a) recommend that the configuration of parenting support must consider all services, in addition to individual practice and programmatic approaches. Tusla emphasises the need for partners to work together with parents and other agencies to provide an effective continuum of evidence informed parenting supports (*ibid*, p.8).

It is acknowledged that evidence of what works is vital in the delivery of services to families and that enhancing the evidence base is an integral part of service arrangements (DCYA, 2015) and there has been considerable research output in the field (Lucas, 2011). The distinction between evidence-based and traditional evidence-informed practice, where knowledge is generated from subjective experience, rather than empirically demonstrated outcomes is also identified as significant (Child and Family Agency, 2013b). In part, there is an emphasis on the importance of making a case for how value for money can be attained (Daly, 2011). Approaches based on reliable and robust evidence and the undertaking of high quality evaluations of local initiatives are identified as important in ensuring the greatest possible social and economic return and avoiding adverse outcomes and costly investments (Centre for Effective Services, 2012). Programmes can be funded in a variety of ways, including by the State, and the NGO sector. Value for money studies can show that resources used are justified on the basis of what is achieved.

Tusla is increasingly moving towards the delivery of services that are based on evidence of effectiveness. Utilising Veermen and van Yperen’s (2007) classification of levels of

evidence, Tusla's Parenting Support Strategy advocates balance between "the need for evidence based programmes and evidence informed interventions, placing an emphasis on the role and skills of the practitioner in working directly with children and parents" (Child and Family Agency, 2013a, p.14). The Veermen and van Yperen developmental model (2007) for establishing an evidence base clarifies the levels of evidence associated with different types of research. The four levels are descriptive, theoretical, indicative and causal. The parameters of descriptive research include that the basic elements of the intervention have been made explicit. At the top level, the parameters of causal research require that there is sound and substantial evidence that the outcome is caused by the intervention and/or clear evidence showing which ingredients of the intervention are responsible for the outcome (as with a randomised control trial).

### *Delivering Parenting Supports in Ireland*

The delivery of parenting supports in an Irish context has traditionally been non-integrated and provided by a range of different agencies, statutory, voluntary and community, serving a range of different population groups. While the role of State services has been increasing, community and voluntary organisations play an important role in service provision (Clavero, 2001). Supports for parents are funded in a number of ways. A suite of services are provided at a statutory level by Tusla. Alternatively, Tusla also provides funding through service level agreements and grant aid agreements to non-statutory services, including community and voluntary agencies. This funding covers a broad range of parenting support services, delivered at national and local levels. In addition, services may be funded by charitable organisations or funded privately. In addition, the Department of Education and the Departments of Public Health, Health Service Executive provide parenting support services. The types of supports provided to parents include direct supports aimed exclusively at



improving parental skills and capacities and indirect supports aimed at individual parents or families. Supports can range from advice and support, home based and individual support, group based support and parenting education groups, programmes and courses. Again, providers may vary. Transversally, this can include support to meet particular needs or support for particular parenting relationships. In addition, services can support parents directly or indirectly towards better outcomes for their families.

The Parenting Support Strategy (Child and Family Agency, 2013a) sets the strategic direction of the Child and Family Agency in its role in supporting parents to improve outcomes for children and young people. The Strategy emphasises a continuum of support, from universal support, to targeted and specialist services applying a progressive universalist approach. “In the case of Tusla, parenting and family support is a constituent element in all aspects of its work, including social work activity, early years, community-based youth work, foster care, residential care, special care, Family Resource Centre programmes, educational welfare and school support services, and local services to women in situations of domestic abuse” (DCYA, 2015, p.8). This can be as simple as signposting to services/information or alternatively providing more intensive support. Parenting support is understood as consistent with the style of work in the family support approach, potentially formal, semi-formal or informal. The activities can range from basic signposting through to more intensive supports. The principle is of minimum intervention and is driven by the needs of the family (Child and Family Agency, 2013a).

The Strategy identifies the Hardiker model (1991) as helpful for reflecting on the configuration of support services. The focus is on services delivered at a level of need. Families may move up or down on this continuum. The levels are identified as follows:

4. Corporate parenting where the Agency provides alternative care for children and young people. The need for parenting support is most acute at this point.
3. Supervised parenting where the Agency carries out its statutory function to address child protection concerns
2. ‘Top-up’ parenting support for families with additional needs- secondary prevention and early intervention
1. Preventative support to all parents at a universal level

(Child and Family Agency, 2013a)

In addition, parenting support is also considered across the lifecourse from preparing for and becoming a parent; birth to 5 years; 6-12 years and 13-17 years. The lifecourse and whole child/ whole system approach encourages partnership and is underpinned by five national outcomes (Family Support Agency, 2013). This include that the child is healthy, both physically and mentally; supported in active learning; safe from accidental and intentional harm/ secure in the immediate and wider physical environment; economically secure; and part of positive networks of family, friends, neighbours and the community/ included and participating in society. It is also acknowledged that parents in different contexts may need more support across the lifecourse.

This parenting support programme is part of Tusla’s Mainstreaming and Development Programme for Prevention, Partnership and Family Support (PPFS) which was developed with the intention of placing greater emphasis on early intervention and Family Support principles in the work the carries out with children, young people and their families. The PPFS programme is involved in a Research and Evaluation Programme being undertaken by the UNESCO Child and Family Research Centre (CFRC) at the National University of

Ireland, Galway. Within this there is an explicit remit from Tusla, the Child and Family Agency to provide formative and summative feedback on the parenting support programme.

Tusla's activities in parenting are direct, indirect and broad ranging, from the provision of information to parents, to the provision of services, the promotion of parental participation and the development of a parenting support champion network. Tusla's activities in parenting also include the promotion and practice of parental participation, including the development of a Parental Participation Toolkit and training briefings. Tusla will also undertake to establish a Parenting Support Champion Network with existing staff from Tusla and partner organisations. Parent Support Champions will be volunteer practitioners already working within Tusla, HSE and partner organisations with a remit for supporting parenting. These practitioners will have an interest in, and experience of, parenting, evidence informed and evidence based programmes, and facilitation skills. Meitheal has been introduced as a national practice model and standardised approach to assessing the needs of children and families that have come to the attention of practitioners and community members because of a child welfare or safety concern (Child and Family Agency, 2015c). Tusla also support 108 communities through the Family Resource Centre (FRC) Programmes. This programme delivers universal services to families in disadvantaged areas across the country based on a lifecycle approach. It ranges from the provision of information, advice, support and referrals to delivering education courses (including parenting programmes), training opportunities and the establishment and maintenance of community groups. In addition to Tusla, a range of range of public, private, community and voluntary service providers deliver parent support services in Ireland. A range of childcare and early education options are also available in Ireland. These include full and sessional day care, childminding services, au pairs and affordable childcare options for lower income families.

## **Conclusion**

The delivery of parenting supports in an Irish context has traditionally been non-integrated and provided by a range of different agencies, statutory, voluntary and community, serving a range of different population groups. While the role of State services has been increasing, community and voluntary organisations play an important role in service provision (Clavero, 2001). This paper has provided an overview of the policy and practice of parenting support with particular attention paid to what works in the Irish landscape.

It is recognised that universal supports for all parents, along with tailored supports and specialist services to support in parents in different contexts and parents in different parenting relationships are effective in increasing parental capacity. It is also recognised that parents must be aware of services, with evidence indicating that this is not always the case and that parents may not in fact access services until crisis point. The need to engage parents as service users is also recognised as key to the planning of services. For example, in addition to parents in different contexts, it is essential that fathers are encouraged and supported to engage with existing services, many of which may be (unintentionally) orientated towards mothers.

It is also recognised that partnership working, including a cooperative and integrated approach by service providers enables parental capacity. Given that parents in different contexts and relationships in Ireland may be accessing a variety of services at any time, the relational skills of staff along with interagency working are acknowledged as crucial in the provision of parenting support services (Molinuevo, 2013, p.17, DCYA, 2015). Tusla's Parent Support Champions Network has the potential to support and promote partnership

working in an Irish context. The implementation of the Parenting Support Strategy and suite of related activities from 2015-2018 represents a new approach in an Irish context and is a core component of the programme of work of the Child and Family Agency (Child and Family Agency, 2013a). In conceptualising and delivering parenting supports in this way, Tusla is setting out its strategic direction and commitment to enhancing existing provision and supporting children, young people, parents and families to achieve positive outcomes.

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