

Tipperary Children and Young People's Services Committee



Children and Young People's Plan 2018 - 2020



July 2018

Contact

Tipperary Children and Young People's Services Committee (CYPSC) welcomes comments, views and opinions about our Children and Young People's Plan.

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Copies of this plan are available on: www.cypsc.ie

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Foreword

I am very pleased to present the Tipperary Children and Young People's Services Committee Children and Young People's Plan (CYPP) which covers the three years from 2018 to 2020. It represents the outcome of the commitment and energy of the membership of Tipperary CYPSC, Comhairle na nÓg, and a range of other stakeholders across the services that work with children, young people and young adults to identify the key needs and issues of the 0 – 24 years age cohort and to seek to address them. Comhairle na nÓg greatly facilitated the development of the CYPP by the contributions from its members and by hosting a consultation forum with young people.

The CYPP is also informed by the views and perspectives of children, young people and young adults from the general population. A number of consultations were undertaken on behalf of Tipperary CYPSC to include the voice of young people from a range of social backgrounds and circumstances and to identify what they considered to be the key issues in their lives. Their views contribute a particular authenticity and value to the information in the CYPP, deriving as these do from their own lived experiences.

The CYPP identifies a number of key issues for the 0 – 24 years age cohort, including Physical and Mental Health & Wellbeing and Parent Support, as well as different needs arising out of specific social circumstances, and in its Action Plan proposes a range of actions to address these. The need for the CYPP to be aligned with other plans and strategies, both national and local, including the County Council's Local Economic & Community Plan, is acknowledged and is reflected throughout the CYPP.

The main purpose of the CYPSC is to improve inter-agency cooperation and collaboration for better outcomes for children and young people. Tipperary CYPSC seeks to realise this in its CYPP actions. The CYPSC also acts as advocate for the children and young people in its geographical remit. Through this CYPP, it is highlighting some issues for the attention of departments of central government, particularly the adequate resourcing of service provision. In the context of a general decline in social conditions in the county between 2011-16, it is important to alleviate the impact of this on those children and young people most affected.

At this time of increased demand for services accompanied by reductions in available resources the need for a strategic approach to interagency working has never been more important for children, young people and families in Tipperary.

We welcome feedback in relation to this plan and we are committed to reviewing it at regular intervals.

On behalf of Tipperary CYPSC, I look forward to better developmental outcomes and a better future for our children and young people.

Pat Slattery,
Director of Services,
Community & Economic Development,
Tipperary County Council.
Chairperson of Tipperary Children & Young People's Services Committee

Section 1: Introduction

The purpose of the Children and Young People's Services Committees is to secure better outcomes for children and young people through more effective integration of existing services and interventions at local level.

CYPSCs work toward the five national outcomes for children and young people in Ireland. These are that children and young people

- 1. Are active and healthy, with positive physical and mental wellbeing**
 - 2. Are achieving full potential in all areas of learning and development**
 - 3. Are safe and protected from harm**
 - 4. Have economic security and opportunity**
 - 5. Are connected, respected and contributing to their world**
-

Background to Children and Young People's Services Committees

Children and Young People's Services Committees in Ireland

The Office of the Minister for Children and Youth Affairs (OMCYA), now the Department of Children and Youth Affairs, established the Children and Young People's Services Committees (formerly Children's Services Committees) in 2007 with the purpose of improving outcomes for children and families at local and community level. Since then CYPSCs have increased incrementally in number and are a key structure identified by Government to plan and co-ordinate services for children and young people, aged 0 – 24 years, in every county in Ireland.

CYPSCs bring a diverse group of agencies across the statutory, community and voluntary sectors in local county areas together to engage in joint planning of services for children and young people. All major organisations and agencies working locally on behalf of children and young people are represented. These committees work to improve the lives of children, young people and families at local and community level through integrated planning and improved service delivery.

Better Outcomes, Brighter Futures: the National Policy Framework for Children and Young People 2014 – 2020 underscores the necessity of interagency working and tasks Children and Young People's Services Committees with a key role in this regard.

Children and Young People's Services Committee in Co. Tipperary

Prior to the amalgamation of North & South Tipperary as one Local Authority area in 2014, a Children & Young People's Services Committee had been set up in the South county in 2011 as part of Phase 3 of the roll-out of the CYPSCs across the country. In order to align with the new county boundaries, in accordance with the general rule for CYPSCs, it was agreed that there should be one CYPSC for the whole Local Authority area. It was also agreed that the establishment of an all-county CYPSC would have to start from scratch with equal engagement by stakeholders in the North & South of the county, respectively.

South Tipperary CYPSC duly disbanded in June 2015. A Transition team, which included the two Túsla Area Managers in the North & South of the County, respectively, the Local Authority Director of Services, Community & Economic Development, and respective staff from these agencies, had already formed in Q. 4, 2014 to consider and decide on the steps towards the formation of the all-county CYPSC. Issues that were considered included the composition of the new CYPSC and the selection process, informed by the *Blueprint for the Development of Children & Young People's Services Committees* document, with due attention to parity of representation from North & South of the county; the practicalities of who was to assume the Chairperson's role when the county was split between two Túsla Area Managers; and the need to make a decision about the CYPSC coordinator position.

Most of these issues were duly addressed by the time of the inaugural meeting of the all-county CYPSC on 6th July 2015. The meeting was chaired by Sinéad Carr, Director of Services, Community & Economic Development, Tipperary County Council, who agreed to take on this role.

Tipperary CYPSC: Who we are

Tipperary CYPSC membership is currently as follows:

- Pat Slattery, Director of Services, Economic & Community Development, Tipperary County Council - *CYPSC Chairperson*. Sinéad Carr had previously been in this position.
- Marie Kennedy, Area Manager, Carlow/Kilkenny/South Tipperary, Túsla - *CYPSC Vice-Chair*
- Caroline Cullen, Area Manager, Clare/Limerick/North Tipperary, Túsla - *CYPSC Vice-Chair*
- Garda Chief Superintendent Catherine Kehoe, An Garda Síochána
- Michelle Kelly, Waterford & South Tipperary Community Youth services, Youth services sector representative. Cora Horgan and Seán Cooke, YWIT, had previously been in this position.
- Lisa Kavanagh, Youth Officer, Tipperary Education & Training Board
- Catherine Joyce, Asst. Director, S.E. region, Barnardos
- Anne Delahunty, Asst. Director, PHN services, HSE representative (North Tipperary)
- Niamh McGrath, Social Worker, HSE Primary Care, South Tipperary. Tara Hunt, Transformation Development Officer, HSE Primary Care (Carlow/ Kilkenny/ South Tipperary) had previously been in this position until she stepped down from the CYPSC in May 2018.
- Michael Murray, C.E.O., North Tipperary Leader Partnership
- Isabel Cambie, C.E.O., South Tipperary Local Development Company
- Aileen Healy, C.E.O., Tipperary County Childcare Committee
- Jill Sandvoss, Clonmel Community Mothers Project, Community & Voluntary sectors representative. Avril Wilson, Slieve Ardagh Childcare & IT Enterprise (C.I.T.E.), had previously been in this position.
- Della Devereaux, Senior Probation Officer, Probation service
- Caroline Lydon, Manager, North Tipperary Community Services, Social Inclusion/ Family Support sector representative (North Tipperary)
- Naomi Burke, Manager, Clonmel Community Resource Centre, Social Inclusion/Family Support sector candidate (South Tipperary)
- Séamus Ryan, National Association of Principals & Deputy Principals (secondary level) representative
- Joan Doherty, Irish Primary Principals Network representative. Tomás Ó Slatara had previously been in this position until he stepped down in July 2017.
- Joan Dunne, Manager, Prevention Partnership and Family Support (PPFS), Carlow/Kilkenny/ South Tipperary.
- Fionnuala Kenny, Principal Community Development Worker, Túsla, North Tipperary

Others in attendance currently are:

- Staff member, Community & Economic Development, Tipperary County Council
- Ruairí Ó Caisleáin, CYPSC Coordinator, Túsla

Initially, in order to meet the '*Blueprint*' condition to appoint a young person, aged 18 – 24 years, on to the CYPSC, a leading officer in the Student Union, Limerick Institute of Technology (LIT), was invited to join the committee. It was also considered that, as a student of LIT, he could jointly represent the 3rd-level education sector, meeting another condition of the '*Blueprint*'. With his departure from the CYPSC, it has been decided to await further guidance and advice on this issue of representation from national level.

The CYPSC also maintains links with Tipperary Comhairle na nÓg. The Comhairle has contributed to the development of the CYPSC Work Plan and its representatives are regularly invited to CYPSC meetings to brief the committee on the Comhairle's work. The CYPSC Coordinator is also a member of the Comhairle na nÓg Steering Committee.

How the Children and Young People's Plan was developed

The development of the Work Plan involved 3 elements: research of data for a socio-demographic profile of the population of the county; an audit of service provision to the 0 – 24 years age group; and consultation of all relevant key stakeholders, including children, young people and parents.

- Research of the data commenced during the transitional period between the winding down of South Tipperary CYPSC and the inaugural meeting of the all-county CYPSC in 2015. There was a recognition that the available data from the 2011 Census was not necessarily reflective of the current population trends. So, with the availability of CYPSC seed funding towards the end of 2016, the CYPSC was able to contract the All-Island Research Observatory (AIRO) to undertake a socio-demographic profile based on the returns from the 2016 Census, to commence in the Summer of 2017. The CYPSC has been able to avail of the information of the AIRO report for the purposes of this Work Plan. Documentation that was consulted included *'Young People in Tipperary – a Demographic Profile'* (2014), produced by Tipperary ETB, the *Growing Up in Ireland* research, and the *State of the Nation's Children* (SNC) Report (2016).
- The audit of service provision drew on information made available by agencies, whether through direct communication or through research on-line. A document compiled by the North Tipperary Túsla Community Development service, *'Brief Demographic Profile and Child and Family Services Mapping'* document (2014) proved a useful resource of relevant information for the North of the county.
- There were several strands to the consultation process undertaken to inform this plan:
 - In February 2016, the CYPSC members met for a facilitated workshop to identify priority issues to be addressed in its Work Plan. A number of criteria were proposed for identification of priority issues and actions:
 - long-standing challenges that face children & young people that are well-understood but unaddressed
 - New unexplored problems faced by children & young people – could the CYPSC consider innovative initiatives to address these?
 - Levels of intervention by the appropriate service that would be most likely to have maximum impact on risks faced by children & young people.
 - Needs of children & young people in rural settings.
 - Actions around transitions, particularly for vulnerable categories of children & young people.
 - Needs of older age group now also covered under the CYPSC remit, namely, 18 – 24 years age group.
 - A facilitated workshop with 75 staff of statutory and non-statutory agencies on 25th May 2016 (*Appendix 4*).

- Consultations with different age groups of children, young people and young adults, framed by the 5 National Outcomes, with a particular focus on those of social groups vulnerable to social exclusion. Thus participants in various focus groups or other modes of consultation that were conducted could be characterised by being from a Traveller or new community background, from families in socially disadvantaged circumstances, being in the Justice system or in After-care (i), self-identifying as Lesbian, Gay, Bisexual, Transgender, or other sexual identity (LGBT*), or being a member of a re-settled Syrian refugee family.
- A survey conducted with parents, mainly on-line.
- Discussions with County Councillors at Municipal District meetings in April 2017.

(Appendix 3)

Most of the information gathered was presented to the CYPSC at different meetings over 2016/17.

An Actions Sub-Group was formed at the CYPSC meeting on 20th September 2016 to come up with key actions for the CYPSC Work Plan. It met 10 times over a period extending from the date in September 2016 until 23rd June 2017.

Policy context

In the development of its Work Plan, the CYPSC has sought to take account of other policies and plans which have a bearing on one or more aspects of its remit. In relation to national policies, it has been necessary to be aware of their content and of who the key stakeholders are. In the case of plans and policies at local level, the CYPSC has sought to ensure alignment of its Work Plan with these and mutual complementarity. In some cases, the CYPSC itself has been identified as an agent for the implementation of parts of such a plan or policy and has needed to ensure that this is reflected in its own Work Plan. This is particularly evident in the case of the Tipperary Local Economic and Community Plan, 2015 - 2020:

- The CYPSC is assigned the sole Coordinating Lead role or a joint role with Túsla for 11 Strategic Actions, and the role of Support Partner in a further 3 Strategic Actions.
 - 4 of the actions relate to High Level Community & Social Inclusion (HLCSI) Priority 5, *'To maximise life opportunity and potential for young people and support and facilitate their contribution to the sustainable development of the county'*, and focus on development of youth services and programmes in areas of high Youth Dependency and of high levels of social deprivation, promotion of volunteerism among young people, promotion of the role of Comhairle na nÓg in contributing to local planning, and the support of vulnerable young adults coming out of alternative care, prison and addiction services.
 - 8 of the actions relate to HLCSI Priority 7, *'To provide a targeted and integrated response to the needs of vulnerable families, children & young people in areas of greatest risk'*. These focus on the role of the CYPSC in developing a county-wide Work Plan and in ensuring the balanced development of quality support services with Túsla that target vulnerable children, young people and families. By forming on an all-county basis, by producing a CYPSC Work Plan, and by mapping family service provision across the county and highlighting service provision deficits in the Work

(i). After-care refers to the period when young people, previously in alternative care with Túsla, leave their care situations and the supports they received until that point on reaching their 18th birthday.

Plan, the CYPSC has implemented some of these actions(C&S 7.1a, b, & f)

- One of the actions relates to HLCSI Priority 4, '*To address the high level of long term unemployed through targeting those areas with the highest level of long term unemployment in the County*', and aims to support Alternative Learning programmes for young people at risk of Early School Leaving.
- Another action relates to HLCSI Priority 6, '*To reduce the marginalisation of specific target groups and communities – Travelling community, Non Irish Nationals and Asylum Seekers, Lone Parents, LGBTI and people at risk of homelessness*', and aims to develop a programme for Lone Parents in those areas where they represent a high proportion of the population.

Other county level plans which the CYPSC is taking cognisance of are:

- Tipperary Joint Police Committee Strategic Plan, 2015 – 2021
- '*Connecting for Life Mid-West*' Suicide Prevention Action Plan, 2017 – 2020
- '*Connecting for Life South Tipperary, 2017 - 2020*'
- *Tipperary Sports Partnership Social Inclusion Programme*
- Littleton Community Action Plan
- Roscrea Community Action Plan

At national level, the following national policies and plans were relevant to the issues identified by CYPSC:

- Under National Outcome 1:
 - Better Outcomes Brighter Futures, 2014 - 2020
 - Healthy Ireland, 2013 - 2025
 - Nurture programme – Infant Health and Wellbeing (ii)
 - HSE Infant Feeding Policies
 - National Physical Activity Plan
 - Aistear programme (iii)
 - Connecting for Life: Ireland's National Strategy to Reduce Suicide, 2015 – 20
- Under National Outcome 3
 - Action Plan on Bullying (DES, 2013)
 - Túsla policy re. development of Prevention Partnership and Family Support programme (iv)
- Under National Outcome 5
 - National Strategy on Children and Young People's Participation in Decision-Making, 2015 - 2020 (DCYA)

(ii). 'Nurture Programme - Infant Health and Wellbeing' is a programme focusing on the development of an integrated approach to service planning and delivery to improve health and wellbeing outcomes for infants and their families.

(iii). The 'Aistear' curriculum framework, developed by the National Council for Curriculum and Development, establishes principles and themes or goals that all early childhood services work towards.

(iv). The Prevention, Partnership & Family Support Programme (PPFS) or Local Area Pathways (LAP) has been developed by Túsla to operationalize the integrated response to child welfare needs. Cases that have been screened and have been deemed not to meet the criteria for the Child Protection response, are referred to the PPFS/LAP.

Section 2: Socio-demographic profile of County Tipperary

Tipperary, located in a natural environment well-suited for pastoral farming and tillage, is the 6th largest county in Ireland with a land mass of 4,303 km sq. The settlement pattern is based on a strong network of vibrant and robust towns and villages with service centres provided at strategic locations throughout the county. The towns of Thurles and Cashel in the centre of the County provide a strong urban link between the major centres of Nenagh and the largest town in the county, Clonmel. The towns of Roscrea, Tipperary, Carrick-on-Suir, Templemore, and Cahir function as District Towns for their local hinterlands and combined, provide a good basis for ensuring strong social, economic and community linkages within the county. In addition to the District Towns, there are a number of medium sized towns and villages geographically spread throughout the County. These settlements number 119 and provide essential services for the local communities and the rural hinterlands. The different settlement tiers perform differing roles but ultimately ensure that no area in the county is significantly peripheral or isolated. (LECP, 2016).

Population:

- The total population of the county is 159,553, registering an increase of only 0.5% on the combined populations of the former counties of North and South Tipperary, respectively since 2011. The population growth occurred in the North of the county with the South experiencing a minimal net decline of 0.2%. (CSO, 2016; AIRO, 2017)
- Relative to all other Local Authorities, the county has had the fourth lowest population growth in the State, as well as being lower than the State's rate of 3.8%.
- Population growth was highest in the Nenagh Municipal District at 2.6%. The comparable rate in the Clonmel Municipal District (including Cahir) was slightly above the county average while the three other MDs (Carrick-on-Suir, Thurles/Templemore, and Cashel/Tipperary) experienced slight population decline (AIRO, 2017).

Age profile

Age Range	Number	% of Co. population	% / 31 LAs	% State	Highest % MD	Highest no. MD	Urban/Rural Distribution ratio
≤ 17 years	40,764	25.5%	11 th lowest	25%	Nenagh MD	Nenagh MD	c. 2:3
0-4 years	10,874	6.8%	13 th lowest	7%	Nenagh & Cashel/Tipp. MDs	Nenagh MD	9:11
5-12 years	18,787	11.8%	11 th lowest	11.5%	Nenagh MD	Nenagh MD	2:3
13-17 years	11,013	7%	15 th highest	6.5%	Carrick, Templemore/ Thurles, & Nenagh MDs	Nenagh MD	3:5
18-24 years	11,577	7.3%	11 th highest	8.2%	Templemore/ Thurles MD	Templemore/ Thurles MD	c. 3:4

(*ibid.*)

County Tipperary has a Youth Dependency rate of 33.7%, higher than the national equivalent rate of 32.6%. Nonetheless, it has the tenth lowest rate of all 31 Local Authority areas, compared to eleventh lowest rate in 2011. Of the county's Municipal Districts, Nenagh MD, at 35.8%, has the highest Youth Dependency Rate (*ibid.*).

Births:

- There were 2,047 births recorded to Co. Tipperary residents in 2016. This was a rate of 12.8 births per year per 1,000, compared to the State rate of 13.4 births per 1,000 (*CSO, 2016*).

Infant & Child Mortality rates:

- The infant mortality rates in 2016, calculated separately for the North and South of the county, were 2.2 per 1,000 births and 4.4 per 1,000 births, respectively. The State rate was 3.3 per 1,000 births. (*ibid.*)
- The proportion of deaths among children under 18 years in the county was 4.4 and 3.9 per 10,000 in 2012 & 2014, respectively, compared to the national rates of 3.2 and 3.1 per 10,000 in the same years. Nationally, mortality rates among boys were higher than the rate for girls. (*SONC, 2016*).

Lone Parent families:

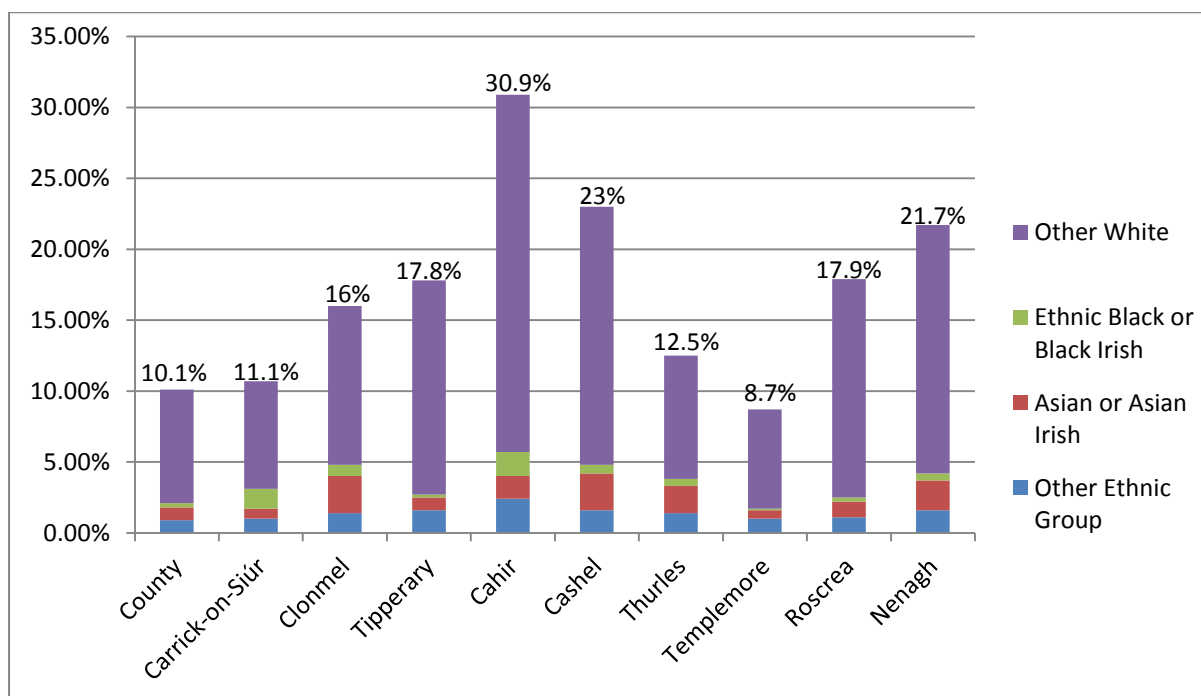
- The number of Lone Parent families with children aged under 15 years residing in Co. Tipperary was 3,701, accounting for 20.5% of all families with children of this age-group. Tipperary had the twelfth highest rate of Lone Parent families with children under the age of 15 in the State, and was marginally higher than the State average of 20%. Lone Parent families with children of this age group constituted higher proportions than the county rate in the Municipal Districts of Clonmel, Carrick-on-Siúr, and Cashel/Tipperary (*AIRO, 2017*).
- A significant proportion of Lone Parent households with children of this age group are also to be found in rural areas. About two of every five Lone Parent households reside outside settlements of populations of >1,500 (*ibid.*).

Ethnicity:

- The Traveller population in Co. Tipperary numbers 1,228, constituting 0.8% of the total population. This proportion is higher than the State average of 0.7%. The Traveller population is distributed in the various Municipal Districts as follows:
 - Templemore/Thurles MD: **454**
 - Clonmel MD: **260**
 - Cashel/Tipperary MD: **259**
 - Nenagh MD: **145**
 - Carrick-on-Siúr MD: **110** (*AIRO, 2017*)

There are calculated to be 649 Traveller children and young people, aged 0 – 17 years, and a further 143 Travellers, aged 18 – 24 years (*CSO, 2016*).

- The proportion of the population in the county identifying with ethnic groups other than 'White Irish' and 'White Irish Traveller, constitutes 10.1% of the total population (16,121). A majority of these (69%) reside in urban areas and are represented below as a proportion of the total populations of the respective main towns in the county:



(CSO, 2016; AIRO, 2017)

There are 4,341 children and young people, aged 0 – 19 years, from these specific ethnic categories, as well as a further 848 young adults, aged 20 – 24 years, residing in Co. Tipperary (CSO, 2016).

- Other families of different ethnic backgrounds in the county include:
 - 12 refugee families from Syria which have been re-settled in Thurles under a Refugee Re-settlement programme
 - Individual Roma families, very small in number.
 - Families which have been accommodated as applicant asylum-seekers in a Direct Provision centre in Carrick-on-Siúr since November 2017.

Health indicators:

- Birth weights: 5.9% of all births in Co. Tipperary in 2015 were of infants weighing less than 2,500 gm.s. This was the thirteenth highest rate in the country and corresponding to the State average. Since 2010, rates in the county have increased marginally from 5% in 2010 to 5.9% in 2015 and have remained consistently below or in line with the State average. (AIRO, 2017)
- Breast-feeding rates: In 2015, 41.2% of all mothers reported that they exclusively breast-fed on discharge from maternity hospital, compared to a State average of 47.7%. The county rate represented the tenth lowest rate of exclusive breast-feeding on discharge from hospital. Between 2010 and 2015, the proportion of mothers breastfeeding on discharge from hospital residing in Tipperary has been consistently lower than the State. (*ibid.*)
- Vaccination up-take: The rate of up-take of the recommended doses of vaccines for children at 12 months has fluctuated around 92-94% over the period, 2010 – 15, with only the BCG vaccine up-take consistently achieving the HSE target rate of $\geq 95\%$. Nonetheless, the county vaccination rates have been higher than the State averages.

The up-take for children at 24 months at county level over the same period has in the case

of some vaccines (D3 P3 T3 Hib3 HepB3 & Polio3) consistently achieved the HSE target rate, but has varied between 88-95% in relation to other vaccines. Up-take of the vaccine, MenC3, has been lower, ranging between 86 – 92%, which reflects the national pattern. (*HPSC Annual reports, 2011 – 15*).

- **Medical Card qualification:** 21,159 children and young people aged under 24 years in the county qualified for a GMS Medical Card, as of December 2015. There is a significant disparity between the North and South of the county, with the Medical Card holders in the South accounting for 39.1% of the population there, the seventeenth lowest proportion in the State, while the corresponding proportion in the North was 23.5%, the third lowest proportion in the State. (*AIRO, 2017*).
- **Prevalence of disabilities:** In 2015, 314 children were registered as having an intellectual disability in Co. Tipperary, a rate of 7.7 per 1,000, compared to the national rate of 7.5 per 1,000. In the same year, 489 children were registered as having a physical and/or sensory disability in the county, amounting to a rate of 12 children per 1,000, in comparison to a national rate of 5.2 per 1,000. This county rate is the highest in the State. (*SONC, 2016; National Intellectual Disability Database 2015; National Physical & Sensory Disability Database, 2015*). Of children and young people registered with intellectual disability and with physical and/or sensory disability, respectively, in 2016, distribution by age-group was as follows:

<u>Age group</u>	<u>North Tipperary No. & % (Intellectual Disability)</u>	<u>South Tipperary No. & % (Intellectual Disability)</u>	<u>Tipperary (Physical/Sensory Disability)</u>
0 – 4 years	0 (0%)	21 (8%)	0 (0%)
5 – 9 years	12 (13.2%)	62 (23.8%)	125 (24.9%)
10 – 14 years	26 (28.6%)	86 (33%)	240 (47.7%)
15 – 19 years	53 (58.2%)	92 (35.2%)	136 (27%)
	91 (100%)	261 (100%)	503 (100%)

(*AIRO, 2017*)

There are no official figures available at county level to indicate the prevalence of Autistic Spectrum Disorder (ASD) in the 0 – 17 years age group. Nationally, the current rate of autism in Ireland for all age-groups is estimated at 1% of the total population. The National Council for Special Education has concluded from research findings in 2016 that the rate could be higher and that one in 65 school-going children and young people (1.5%) have a diagnosis of ASD. On the basis of these estimates, the number of children and young people with this condition in the county lies between 225 – 337.

Figures for prevalence of Dyspraxia and Dyslexia in the 0 – 17 years age group in the county are not available. Dyslexia is thought to be one of the most common learning difficulties. It is estimated that 4-8% of all schoolchildren have some degree of dyslexia. A UK study found

that just under 2 children in every 100 may have Dyspraxia, although other estimates are higher (*HSE web-site*).

- Mental Health:

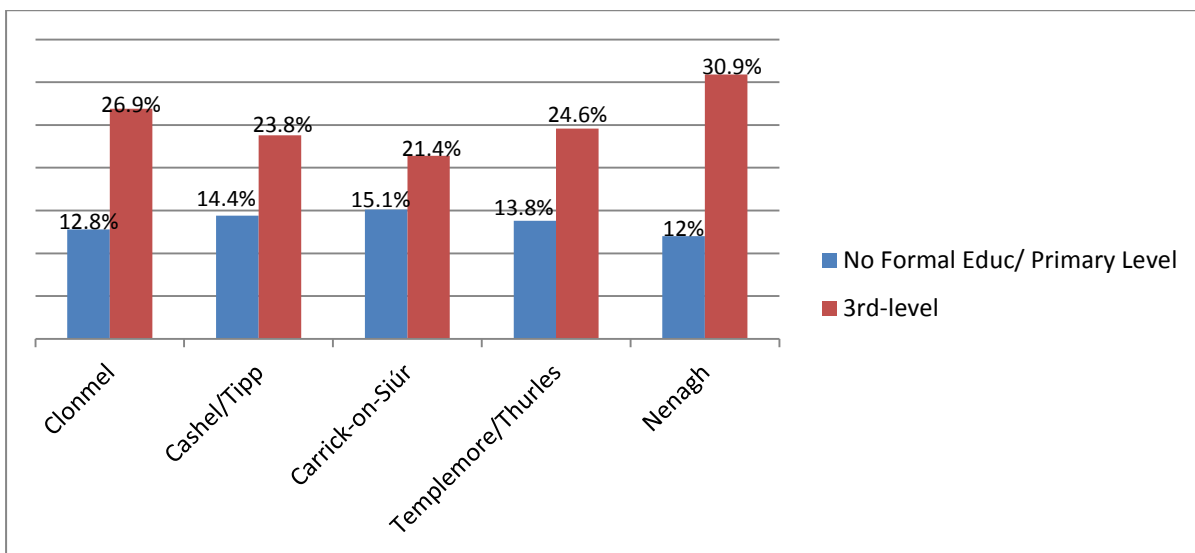
- In 2016, there were 70 hospital discharges of children aged ≤ 12 years with a diagnosis of mental or behavioural disorders in Tipperary. This equates to a rate of 2.3 per 1,000 children (aged ≤ 12 years) and was below the State average of 2.6 and the Mid-West average rate of 2.7, while higher than the rates in Co.s Carlow (2), Kilkenny (1.1) and Waterford (1.5).
Relative to other counties, Tipperary had the twelfth highest rate of young children being discharged with a diagnosis of mental or behavioural disorders (*AIRO, 2017*).
- Over the period 2011 – 15, the rates of admissions of children and young people into psychiatric hospital in the county have been some of the highest in the country. In 2015, the rate of admission was 63.8 per 100,000 children, compared to the State average rate of 43.8 per 100,000. The age range of the children concerned is 10 – 17 years, of whom, 4 out of 5 are aged 15 - 17 years (*SONC 2016*).
- In 2016, Tipperary had the eleventh highest rate of hospital discharges of young people, aged 13 – 24 years, with a diagnosis of mental or behavioural disorders, at 5.3 per 1,000 population in that age range. This was above the average for the State (5) (*AIRO, 2017*).
- Suicide rates in Tipperary are above the national 3-year average rate (2012-14) of 11.0 per 100,000, the comparable rates being 12.6 per 100,000 in North Tipperary and c.13 per 100,000 in South Tipperary (*Connecting for Life Strategies, South Tipperary & Mid-West, 2017*).
- In 2015, rates in the North and South of the county for females, aged ≤ 24 years, presenting to hospital following self-harm were respectively 135.5 and 228 per 100,000. In comparison to other LHO areas, the South of the county recorded the sixteenth highest rate and the North recorded the third lowest rate. These rates were below the State average of 253.18 per 100,000.

Comparable rates for males in this age group were 105.5 per 100,000 in the North and 198.9 per 100,000 in the South of the county. These were, respectively, the sixth lowest and the sixth highest rates in the State. The State average was 161.6 per 100,000. (*AIRO, 2017*).

Education indicators:

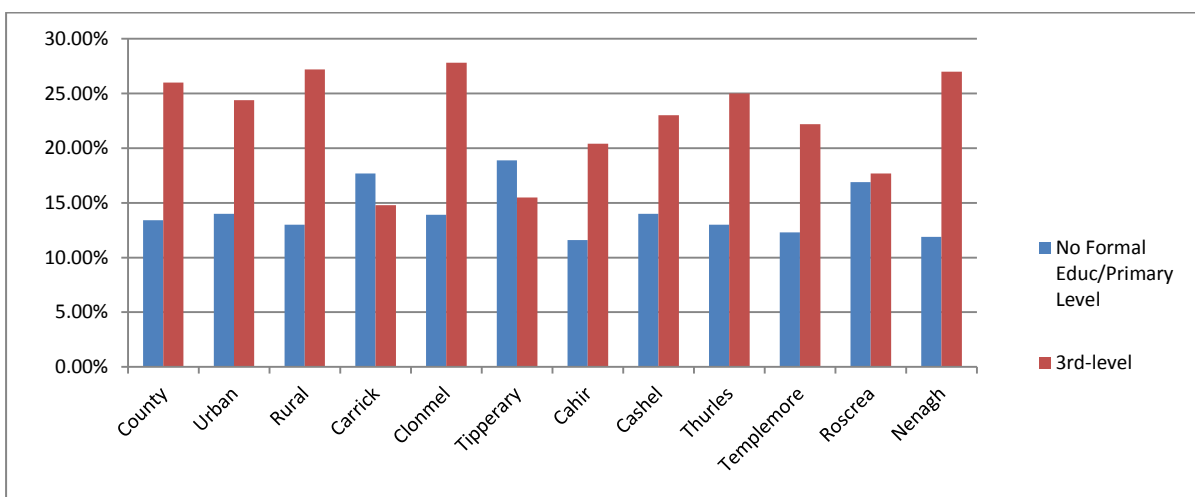
- Educational attainment levels: In comparison with other Local Authority areas, Tipperary has the sixth lowest rate (26%) of high education attainment (Lower and Upper Third Level) and the second highest rate (21%) of middle education attainment (Higher Secondary). However, the proportion of the population of the county, aged 15 – 64, with the lowest education levels has dropped from 15.9% in 2011 to 13.4% in 2016, while the proportion of the population with third-level education has risen from 22% to 26% (*AIRO, 2016, 2017*).

There are differences between educational attainment levels in different areas in the county. The proportions of the populations in the Municipal Districts which have attained the lowest and highest education levels, respectively, are indicated in the following diagram:



(CSO, 2016; AIRO, 2017)

Significant differences are evident across the main towns and between rural and urban settings:



(CSO, 2016; AIRO, 2017)

- In 2015/16, there were 5,175 childcare places in Tipperary. This figure includes vacant and filled spaces and equates to a rate of 475.9 spaces per 1,000 children aged 0 - 4 years residing in Tipperary. Relative to all other local authorities, this was the 11th lowest rate in the State and was slightly above the average rate for the State (469.3) (AIRO, 2017).
- Approximately 18,790 children attended the 156 primary schools in the county in the academic year 2016-17. (Educ.ie website)
- The approximate figure for young people attending the 30 mainstream secondary schools in the county is 13,293 in 2016-17.(Educ.ie)
- In 2016, of 2,068 students who sat the Leaving Certificate examinations, 80.6% of these progressed to third-level education. This proportion exceeded the State average of 77.8% and relative to all other local authorities was the ninth highest rate of progression in the country. The most popular option was University of Limerick, accounting for 16.6% of students, followed closely by Waterford Institute of Technology (16.4%), and UCC (13%) (AIRO, 2017).

- School absenteeism:

	Proportion of students absent for > 20 days (2014/15)				
	<u>Primary</u>	<u>Rate / 31 LAs</u>		<u>Secondary</u>	<u>Rate / 31 LAs</u>
South Tipperary	7.5%	3 rd lowest		16.5%	9 th lowest
North Tipperary	8.7%	7 th lowest		17%	12 th lowest
State	10.4%	-		17.3%	-

At Primary School level, the county trend of absenteeism has fluctuated very slightly since 2011/12. At Secondary School level, except for a dramatic drop in absenteeism rates in 2011/12 in both North & South of the county, rates have risen again and have remained relatively stable. (AIRO, 2017)

- School retention:

	School retention rates (2009 cohort)				
	<u>Junior Cert.</u>	<u>Rate / 31 LAs</u>		<u>Leaving Cert.</u>	<u>Rate / 31 LAs</u>
South Tipperary	97.1%	11 th highest		90.2%	13 th lowest
North Tipperary	98%	2 nd highest		93.8%	Highest
State	96.7%	-		90.2%	-

Safety & Security indicators:

- Túsła referrals & Children in Care

	Referrals to Túsła			Children in Care (Túsła)	
	<u>Referral rate per 1,000 children</u>	<u>Highest proportion of referrals</u>		<u>Rate of children per 1,000 in care</u>	<u>Highest rate of children in care</u>
South Tipperary (2016)	57.5	<ul style="list-style-type: none"> • Clonmel, Tipperary and Carrick-on-Siúr – over twice the average rate for South Tipperary 	6.87	<ul style="list-style-type: none"> • Tipperary – over 4 times the average rate for South Tipperary • Clonmel – over twice the average rate (2013) 	
North Tipperary (2016)	42.85	-	7.6	<ul style="list-style-type: none"> • Nenagh – 3 times the average rate for North Tipperary • Thurles – 2.5 times the average rate • Roscrea – over twice the average rate 	

State (2015)	38	-	5.6
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(SONC, 2016; Túsla Child & Family services, C/Kk/ST & Lk./Clare/NT, 2016; Túsla RAISE Data Analysis: Carlow/Kk/Sth Tipp, 2013)

- Young people leaving Care

	Young people aged 16/17 years in care with Preparation-for-Leaving-Care and After-Care Plan (March 2017)			Young people aged 16/17 years in care with allocated After-Care Social Worker (March 2017)		
	% Young People in Care	Rate/31 LAs	State rate	% Young People in Care	Rate/31 LAs	State rate
Mid-West Integrated Service Area (ISA)	27.4%	8 th highest	29%	33.7%	6 th lowest	40.7%
Carlow/Kk/Sth Tipp ISA	9.2%	4 th lowest		61.5%	6 th highest	

(AIRO, 2017)

- Young Carers

Age Group	Number	% of age group	State %
0 – 9 years	69	0.3%	0.3%
10 – 14 years	116	1.1%	0.8%
15 – 19 years	149	1.6%	1.5%
20 – 24 years	194	2.2%	1.9%

(Kavanagh & Duane (TETB), 2014; CSO 2011)

- Young mothers, aged 10 – 17 years:

Between 2010 – 2016, the rate of births of this category in North Tipperary has decreased by half from 11.2 per 10,000 females aged 10 – 17 years in 2010 to 5.6 in 2016. In contrast, despite some fluctuations, the rate in South Tipperary has remained relatively unchanged in the same time period. Relative to other areas, the current rates for the North (5.6) and South (4.6) were the seventh and ninth highest rates in the State. Both rates were greater than the State average of 3.8 and the Mid-Western regional average of 4.2. (CSO, 2016: AIRO, 2017)

- Alcohol and Substance Misuse:

Within the Tipperary South LHO, 52 young people, aged <18 years, sought treatment in 2015, representing a rate of 21.7 per 10,000 young people in this age group. Within the North Tipperary/ East Limerick LHO the number of young people seeking treatment was <5.

Relative to the other LHOs, South Tipperary recorded the second highest rate in the State and was triple the State average of 6.8. In recent years, between 2010 - 2015, the rate of those, aged <18 years, seeking treatment for substance misuse in Tipperary South has consistently been more than double the State average. In the same time period, the rate in North Tipperary/East Limerick has been below the State average (AIRO, 2017).

There is a higher proportion of service-users seeking treatment in the South of the county who are aged 18 – 24 years, than the South-East regional rate in relation to the same age group. The South Tipperary rate was 27.7% of all service-users in comparison with a regional rate of 22.6% in 2011. The comparative rates were 21.27% and 20.5%, respectively, in 2013. A comparison of available data would appear to show greater prevalence of substance misuse in the South than in the North of the county. Some 64 cases of individuals, aged 18 – 24 years, seeking treatment, are recorded for the North of the county in 2012, in comparison with 142 service-users of the same age-group in the South of the county in 2013. (Kidd (HSE South), 2011 & 2013; Kavanagh & Duane (TETB), 2014).

- Garda Youth Diversion Programme:

	2014		2016	
	<u>No. of incidents referred per 1,000 children</u>	<u>No. of children referred per 1,000 children</u>	<u>No. of incidents referred per 1,000 children</u>	<u>No. of children referred per 1,000 children</u>
Tipperary	30.2	17.3	27	19.5
Garda SE region	33.7	19.1	-	-
State	42.1	21.2	-	-

(SONC, 2016; Tipperary Garda Síochána, 2017)

- In 2016, 301 boys were referred in Tipperary Garda Division area, as compared to 70 girls.
- In the same year, Clonmel Garda District, covering Carrick-on-Siúr and Fethard, had the highest rate of referrals made and of children referred to the Garda Diversion programme per 1,000 children, followed by the Cahir Garda District, covering Cahir and Cashel.
- In the 1st 5 months of 2017, Clonmel Garda District continued to have the highest rates, followed by Nenagh Garda District, covering Roscrea, Nenagh and the North-West (Tipperary Garda Síochána, 2017).

- Domestic Abuse:

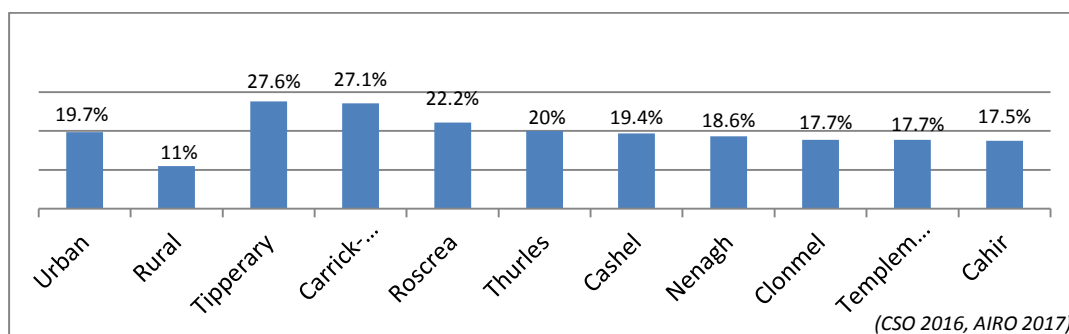
	Applications for Domestic Violence Barring Orders (2015)			
	<u>Number of applications</u>	<u>Rate of applications per 10,000 families</u>	<u>State rate</u>	<u>Rate/ 31 LAs</u>
North Tipperary	133	61	69.6	13 th lowest
South Tipperary	100	42.5		8 th lowest

- Between 2011 and 2012, a steep increase was recorded at both the State level and in North Tipperary in the number of applications granted for domestic violence barring orders. The rate in North Tipperary increased from 30.8 per 10,000 families in 2011 to 118.7 in 2013. The rate in South Tipperary and at the State level did also increase in this time period but not as high as North Tipperary. Between 2014 and 2015 the rates have remained relatively stable in Tipperary and consistently below the State average (AIRO, 2017)
- In 2014, 368 women accessed Ascend women’s services in the North of the county because of circumstances of Domestic Abuse.
- In 2016, there were 319 referrals to ‘Cuan Saor’ women’s services in the South of the county, of which 264 were Domestic Abuse referrals. 23 children were accommodated in the Women’s Refuge, and 65 received Childcare Support, either in-house or out in the community.

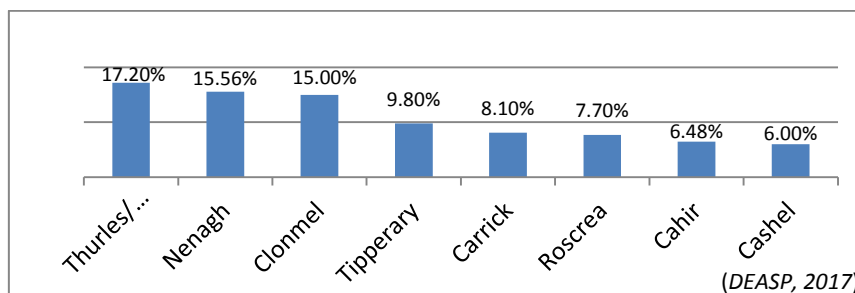
Economic Security & Opportunity Indicators:

- Unemployment

- The unemployment rate in Tipperary has decreased from a level of 19.9% in 2011 to a rate of 14.6% in 2016, a higher rate than the national one (12.9%) but the decrease is consistent with trends nationally (CSO, 2011, 2016). At county level, areas with the highest levels of unemployment are concentrated in the main towns. There is also distribution of higher levels across the south east of the county in areas such as Killenaule and Fethard. Pockets (Small Areas) with the highest proportions of over 45% were located in Thurles, Carrick-on-Suir and Tipperary (AIRO, 2017). Unemployment rates across the rural and urban settings and in the major towns are as follows:



- A breakdown of current Live Register recipient figures in the different SWO catchment areas as a proportion of the overall figure (11,084) illustrates the distribution of the unemployed county-wide:



- Youth Unemployment: In December 2015, there were 1,765 people under 25 years who were registered with the Social Welfare Office, 13.5% of all those registered in the county, compared to a national average rate of 12%.
The numbers and proportions of those registered as unemployed in this age group across the Social Welfare Office (SWO) catchment areas in the county were as follows:

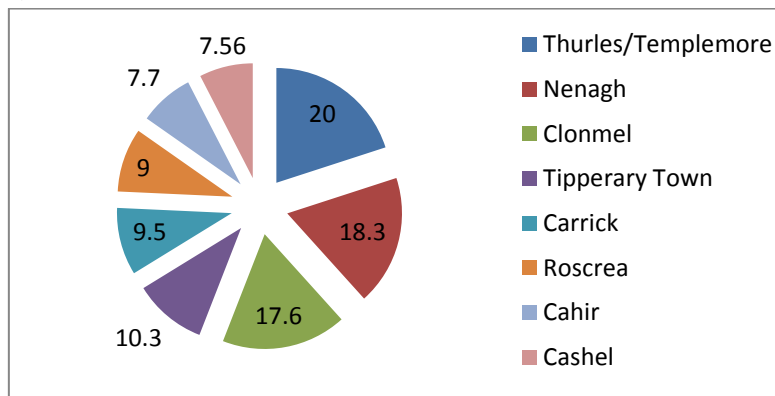
	Thurles/ T'more	Clonmel	Nenagh	Tipperary	Carrick- on-Siúr	Roscrea	Cahir	Cashel
No.	368	323	286	197	180	150	131	130
% of total no. of unemployed in SWO area	15%	14.5%	12.1%	14%	11.5%	13.8%	12.9%	13.6%

(AIRO, 2016)

The number of unemployed young adults under 25 years more recently stood at 1,172, 10.6% of the total number registered (DEASP, May 2017).

- Welfare payment recipients

- There are some 10,958 child dependents in households in receipt of Social Welfare payments (Job Seeker Allowance, One Parent Family payment, & Disability Allowance) accounting for 26.9% of all in the 0 – 17 years age group. (DEASP, 2016, 2017)
- The geographical distribution of child dependents of recipients of either Job Seeker Allowance payments or One Parent Family payments as proportions of the total number (9,259) is as follows:



(*ibid.*)

- Accommodation

Occupancy status in Co. Tipperary					
	Number of households	% of households	State average rate	% / 31 LAs	Highest concentrations
Owner occupied with mortgages	17,616	29.8%	31.6%	12 th lowest	- North of the Co. - Environs of main towns - Small Areas (SAs) of > 60% outside Clonmel and Roscrea

Private rented	7,894	13.4%	18.2%	2 nd lowest	- SAs with > 60% in Clonmel, Nenagh and Carrick-on-Siúr
Social housing rented	6,442	10.9%	9.4%	8 th highest	- SAs with > 65% in Thurles, Tipperary, and Carrick-on-Siúr

(AIRO, 2017)

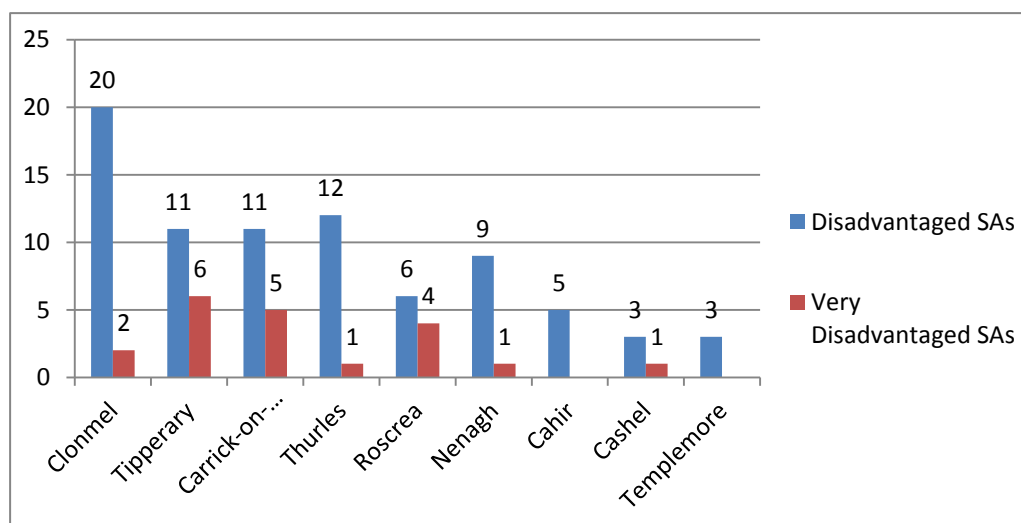
- Social housing waiting list:

The number of children on the social housing waiting list is 2,267 (Co. Co., March 2017), a decrease from 3,417, the number in December 2015. In 2016, some 70% of the households of these children (581 out of a total of 834 households) were one-parent households (SONC, 2016). This figure represented a rate of 74.6 per 1,000 Lone Parent households in Tipperary. Relative to the other Local Authorities, this rate was the ninth lowest rate in the State and was below the State average of 127.3. (AIRO, 2017).

The other large category of those on the waiting list are single people under 25 years. In 2016, there were 230 young people under the age of 25 on the social housing waiting list in Tipperary. This figure represented a rate of 19.9 per 1,000 young people between the ages of 18 and 25. Relative to the other Local Authorities, this was the tenth highest rate in the State and was above the State average of 18.8. (ibid.)

- Areas of Social Disadvantage

- Based on the Relative Index Scores for 2016, Co. Tipperary had a score of -3.39 (Marginally Below Average), below the 2011 score of -2.79. This was below the State score of 0.6 (Marginally Above Average) (ibid.)
- There are 135 Small Areas designated respectively as ‘Disadvantaged’ and ‘Very Disadvantaged’, in other words, having a Relative Index score of ≤ -10 and ≤ -20 , respectively.
- The towns with the largest clusters of both ‘Disadvantaged’ and ‘Very Disadvantaged’ SAs are, in descending order:



- There are smaller numbers of 'Disadvantaged' SAs in Fethard (2), and in Killenaule (3), and the remainder are distributed over a range of smaller towns and villages around the county: in Borrisoleigh, Templetuohy and Toomevara in the North centre (1 SA in each), in Littleton (1 'Very Disadvantaged' SA), in the Slieve Ardagh/South-East area (10), in West Tipperary (6), in the North-West (6), and in the South-West (4).
- The 21 'V. Disadvantaged' SAs and a further 9 SAs measuring between ≥ -19.4 and < -20 on the index have a combined population of 6,769, accounting for 4.2% of the total population in Tipperary. Of the total population residing in these areas, 34.6% (or c. 2,340) were aged ≤ 24 years (CSO, 2016: AIRO, 2017). The remaining 105 SAs had a combined population of 4,932 in the 0 – 17 years age group, and a further aggregate of 1,783 in the 18 – 24 years age group (Pobal; CSO, 2016).

Connected and Respected Indicators:

- In Tipperary, the proportions of children living in households in terms of the mother's highest educational attainment level were as follows:
 - In 2011, 4.5% (4.8%)* children under 18 years live in households where the mother's educational attainment level is no formal education or Primary School level only. In relation to the 30 Local Authorities, this represented the sixteenth highest rate in the State. (AIRO, 2017)
 - 14.3% (14.2%) where the mother attained Lower Secondary education
 - 46.46% (41.9%) where the mother attained Upper Secondary education.
 - 32.25% (36.7%) where the mother went on to 3rd-level education. (SONC, 2016: CSO, 2011) **(National rates italicised in brackets)*

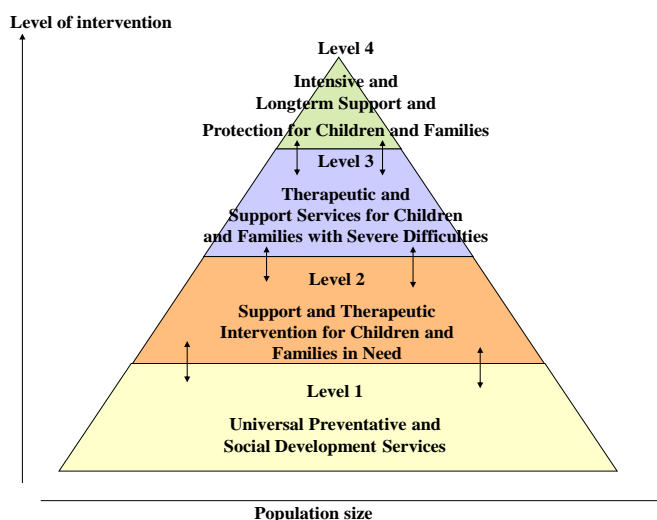
Some significant differences at national level include:

- Two-thirds of Traveller children live in families where the mother has either no formal education or primary education only
- 38% of foreign national children have mothers who have 3rd-level degrees or higher. (*ibid.*)

Section 3: Overview of Services to Children, Young People & Families in Co.

Tipperary:

Hardiker Model (Appendix 2)



In the following section, the range of service provision available to the 0 – 24 years age cohort in Co. Tipperary is examined, employing the Hardiker model to present the spectrum from universal services to progressively more targeted and specialised services.

Organization/ Agency	Service	Statutory/Non-statutory	Hardiker level
Level 1			
Tipperary County Childcare Committee	Supporting the development of high quality childcare service provision in the county	Non-statutory	Universal, Hardiker Level 1
Education	Early Years Care & Education: <u>132</u> private childcare providers and <u>45</u> community-based childcare services (<i>Tipperary Childcare Committee, Nov. 2018</i>)	Non-statutory	Universal, Hardiker Level 1
	147 Primary Schools (exclusive of 19 DEIS schools)	Statutory	Universal, Hardiker Level 1
Education and Tipperary Education & Training Board (TETB)	23 Post Primary schools, 2 of which are TETB (exclusive of 7 Post-Primary DEIS schools)	Statutory	Universal, Hardiker Level 1
Education	Limerick Institute of Technology, campuses in Thurles and Clonmel	Statutory	Universal, Hardiker Level 1
Youth service providers	A varying number of main-stream voluntary youth clubs, variously organized by Waterford and South Tipperary Community Youth Service (WSTCYS), Youthwork Ireland Tipperary (YWIT), Foróige, Scouting Ireland,	Non-statutory	Universal, Hardiker Level 1

Organization/ Agency	Service	Statutory/Non- statutory	Hardiker level
Youth service providers (cont.)	Irish Girl Guides and others. Disabled Integrated Youth Club in Clonmel (WSTCYS)		
	Youth Information Centres - in Clonmel and Carrick (WSTCYS); in Tipperary and Thurles (YWIT)		
An Garda Síochána	37 Garda Stations	Statutory	Universal, Hardiker Level 1
	Community Policing: 'Text Alert'; 'Know your Patch'; Neighbourhood Watch. Community Policing Unit in Clonmel	Statutory	Universal, Hardiker Level 1
HSE Primary Care	40 Health Centres and 4 Primary Care Centres 18 Primary Care Teams with GP, PHN, Occupational Therapy, Physio, Speech & Language Therapy, Home Help and Social Work services	Statutory	Universal, Hardiker Level 1
TETB	Post-Leaving Certificate programmes: 7 centres	Statutory	Universal, Hardiker Level 1
	Adult Education Guidance Service: countywide career and education information and advice service. English for Speakers of Other Languages (ESOL) service	Statutory	Universal, Hardiker Level 1
Tipperary County Council	Social & Leisure amenities: Parks, c. 40 playgrounds, 6 public swimming pools, library services – 12 branches and 1 school mobile library service. Arts programme Heritage programme County Museum	Statutory	Universal, Hardiker Level 1
Túsla	Early Year Services: Information, advice & inspection of early years services e.g. pre-school, daycare.	Statutory	Universal, Hardiker Level 1
Túsla	Parent Support Strategy under Prevention Partnership & Family Support Programme	Statutory	Universal, Hardiker Level 1
HSE Substance Misuse services	HSE Education Officers – working in schools, e.g., Teacher Awareness sessions, Awareness raising & Preventative programmes for pupils/students.	Statutory	Hardiker Level 1

Organization/ Agency	Service	Statutory/Non- statutory	Hardiker level
Barnardos	'Roots of Empathy' programme in Primary Schools	Non-statutory	Hardiker Level 1
South Tipperary Development Company	Incredible Years Teacher Class Management programme in Primary Schools in South of county	Non-statutory	Hardiker Level 1
Universal and Targeted			
Education	19 DEIS Primary Schools	Statutory	Universal & targeted, Hardiker levels 1 & 2
Tipperary Education & Training Board (TETB)	7 DEIS Post-Primary Schools – Fethard, Clonmel, Thurles, Tipperary, Carrick-on-Siúr, Newport & Killenaule.	Statutory	Universal & targeted, Hardiker levels 1 & 2
Tipperary County Council	Lead agency in managing 3 RAPID programmes in Tipperary town, Carrick-on-Siúr, and Clonmel, as well as 2 Community Action Partnership programmes in Roscrea and Littleton	Statutory	Universal & targeted, Hardiker levels 1 & 2
North Tipperary Community Service, Clonmel Community Mothers, Barnardos	Mother & Baby Groups; Parent & Toddler Groups	Non-statutory	Universal & targeted, Hardiker Levels 1 & 2.
Family Support services; youth services; and North Tipperary LEADER Partnership	Parenting programmes	Non-statutory	Universal & targeted, Hardiker Levels 1 & 2.
HSE Primary Care	Primary Care Teams Primary Care Network services, which include Dietetic, Audiology, Ophthalmology, and Dental services	Statutory	Universal & targeted, Hardiker Levels 1 & 2.
Tipperary Sports Partnership	Promotion and support of development of recreational sport Social Inclusion programme, targeting Youth at Risk, People with Disabilities, Traveller community and Mental Health & Wellbeing.	Statutory	Universal & targeted, Hardiker Levels 1 & 2.
TETB	Community Education programme	Statutory	Universal & targeted, Hardiker Levels 1 & 2.
TETB	Back To Education Initiative: education and training programmes for 16 yrs + on a community outreach basis and/or centre-based.	Statutory	Universal & Targeted, Hardiker Level 1 & 2

Organization/ Agency	Service	Statutory/Non- statutory	Hardiker level
TETB & Post Primary Schools (non-ETB)	Guidance & Pastoral resources in Post Primary schools	Statutory	Universal & Targeted, Hardiker Level 1 & 2
HSE, Local Development Companies, and Tipperary Rural Traveller Project	2 PHCPs in Roscrea and Nenagh (NTLP) 1 in Tipperary, and 1 in Clonmel	Statutory & Non-statutory	Universal & Targeted, Hardiker Levels 1 & 2
Targeted level 2+			
HSE Primary Care	Counselling in Primary Care (CIPC) service	Statutory	Hardiker level 2
HSE Primary Care Psychology Service	Assessment and therapeutic service for 0 – 17 years age group. 2 teams in the North and South of the county respectively. Referrals from HSE Primary Care and of children in care with Túsla.	Statutory	Hardiker Levels 2 & 3
HSE	3 Hospitals: <ul style="list-style-type: none"> - South Tipperary General Hospital: acute general and maternity services - Mid-Western Regional Hospital, Nenagh: acute hospital services. - Our Lady's Campus, Cashel 	Statutory	Hardiker Levels 2, 3 & 4
Mental Health support services	Services that facilitate peer-led support and awareness-raising among people affected by Mental Health issues, e.g., Áras Folláin, GROW, Aware, Shine and Mental Health Ireland.	Non-statutory	Hardiker Level 2
Ana Liffey Drugs Project Mid-West	Adult low threshold, harm reduction outreach service, once p.w., in North of county	Non-statutory	Hardiker Levels 2 & 3
Community Substance Misuse Team	Early Intervention service: Outreach and support to young people aged \leq 18 years and their families in North of county. Runs Strengthening Families programme in North of county	Non-statutory	Hardiker Levels 2 & 3
Youth service providers	3 Community Based Drugs Initiatives in South of County – in Carrick-on-Siúr and Clonmel, run by WSTCYS and in Tipperary/Cashel, run by YWIT.	Non-statutory	Hardiker Level 2
HSE Primary Care	Counselling in Primary Care (CIPC) service for those aged \geq 16 years with Medical Card.	Statutory	Hardiker Level 2

Organization/ Agency	Service	Statutory/Non- statutory	Hardiker level
HSE Primary Care	Self Harm Intervention Programme (SHIP): a professional counselling service to individuals aged ≥ 16 years who have self-harmed and/or who are experiencing suicidal thoughts. Available in South of the county.	Statutory	Hardiker Levels 2 & 3
Pieta House	Suicide Bereavement Liaison service: provides practical support, information and signposting to anyone who has recently been bereaved by suicide.	Non-statutory	Hardiker Level 2 & 3
Túsla	Under <u>Prevention Partnership and Family Support Programme (PPFS)</u> , Túsla coordinates appropriate interventions in Child Welfare cases in collaboration with family support services.	Statutory	Hardiker Levels 2 & 3
Túsla	<u>Education Welfare services:</u> <ul style="list-style-type: none"> - Education Welfare Officers - Home School Community Liaison - 5 School Completion programmes in operation 	Statutory	Hardiker Level 2
Family Support services; youth services; Traveller Community Development Project; and one Local Development Company.	12 agencies with different and varying remits offer support services to families in the county. They also collaborate with PPFS programme. <ul style="list-style-type: none"> - 2 Barnardos projects - North Tipperary Community Service - 3 FRCs in Cashel, Slieve Ardagh and Tipperary - Knockanrawley Resource Centre - Youthwork Ireland Tipperary - Nth. Tipp LEADER Partnership - Clonmel Community Mothers - Tipperary Rural Traveller Project - Foróige, Carrick-on-Siúr Other agencies offering support services are: <ul style="list-style-type: none"> - Teen Parents Support service in South of county - Barnardos Student Mothers project in South of county - Extern: provides services in the North of the county to children and young people who are at risk of entering care, secure care or custody. Rainbow programmes: Cashel FRC and Knockanrawley Resource Centre, Tipperary	Non-statutory	Hardiker Levels 2 & 3

Organization/ Agency	Service	Statutory/Non- statutory	Hardiker level
North Tipperary Community service	Advocacy and support service for parents of children in Túsla alternative care. Remit is North of the county	Non-statutory	Hardiker Level 2
Three Drives Family Resource Centre	Advocacy and support service for parents of children in Túsla alternative care. Remit is South of the county	Non-statutory	Hardiker Level 2
Ascend women's services, NTLP 'Cuan Saor' women's services	Ascend, in the North of the county, and 'Cuan Saor', in the South, provide support and advice to women and their families in Domestic Abuse circumstances. 'Cuan Saor' also provides short-term crisis accommodation	Non-statutory	Hardiker Levels 2 & 3
Tipperary Rape Crisis & Counselling Centre	Counselling service for adult survivors of Rape, Child Sexual Abuse, Sexual Violence and Sexual Harassment and to their families. Remit is for South of the county	Non-statutory	Hardiker Levels 2 & 3
Rape Crisis Mid-West	Counselling service, support and advice for the North of the county	Non-statutory	Hardiker Levels 2 & 3
Tipperary Education and Training Board	Alternative Education & training programmes for NEETs and in some cases, for young people with additional needs: 6 Youthreach and Community training centres VTOS Local Training Initiatives (LTIs)	Statutory	Hardiker Level 2
Youth service providers	<u>Youthwork Ireland Tipp.</u> - Work Winner and 2020 Activation projects: engaging with socially excluded young adults to facilitate them to transition into work/training <u>Waterford & Sth Tipp Comm. Youth service</u> – Making Connections , LTI project for adults with issues of Substance misuse, homelessness	Non-statutory	Hardiker Level 2
<u>Youth service providers:</u> Waterford & South Tipp. Community Youth Service; Youthwork Ireland Tipperary; Foróige; North Tipperary LEADER Partnership. Tipperary Rural Traveller Project	<u>5 SPY projects</u> – Clonmel, Tipperary, Roscrea, Nenagh, and Rural Outreach <u>SPY project with Travellers, Littleton</u> <u>2 Neighbourhood Youth Projects</u> – Carrick-on-Siúr and Nenagh <u>3 Value For Money projects</u> – Cahir, Killenaule/Fethard, Thurles/T'more Young Travellers Mental Health Improvement Programme, Clonmel	Non-statutory	Hardiker Level 2
Youth Service providers and An Garda Síochána	5 Garda Youth Diversion projects – Carrick-on-Siúr, Clonmel, Tipperary, Roscrea and Nenagh	Statutory & non-statutory	Hardiker Level 2

Organization/ Agency	Service	Statutory/Non- statutory	Hardiker level
An Garda Síochána	3 JLOs - Clonmel and Cahir Garda Districts; Thurles and Tipperary town Garda Districts; and Nenagh Garda District.	Statutory	Hardiker Level 2
Probation service	6 Probation staff and 1 Community Service Supervisor 'Le Chéile' mentoring service Irish Association for the Social Integration of Offenders – work linkage programme Restorative Justice project, Nenagh	Statutory	Hardiker Level 2
Tipperary County Council	Social housing: <ul style="list-style-type: none"> - Direct provision of tenant accommodation - Rental Accommodation Scheme - Housing Assistance Payment scheme Tenant Liaison service	Statutory	Hardiker Level 2
Tipperary County Council and voluntary housing associations	Voluntary housing associations provide social housing. County Council regulates application process and determines eligibility of applicants	Statutory & non-statutory	Hardiker Level 2
Tipperary County Council	Provision and management of accommodation services for Travellers	Statutory	Hardiker Level 2
Tipperary County Council	Lead agency in addressing homelessness 2 inter-agency Homeless Action Teams Homeless Unit in North of county	Statutory	Hardiker Levels 2 & 3
Novas, Focus Ireland, Simon	Support services to individuals and families who are homeless. Participate on Homeless Action Teams	Non-statutory	Hardiker Levels 2 & 3
Local Development Companies (LDCs): South Tipperary Devt Company (STDC); North Tipperary LEADER Partnership (NTLP)	Tús programme Rural Social Scheme Rural Development Programme Social Inclusion and Community Activation Programme (SICAP) NTLP – projects under SICAP: <ul style="list-style-type: none"> - Learning for Life courses - Car maintenance programme - After-School Club (Nenagh) - Advocacy for Dyspraxia/ Dyslexia Support Groups STDC – projects under SICAP: <ul style="list-style-type: none"> - COMPASS service to support l/t unemployed to return to work 	Non-statutory	Hardiker Level 2

Organization/ Agency	Service	Statutory/Non- statutory	Hardiker level
LDCs (cont.)	<ul style="list-style-type: none"> - Support to communities in RAPID areas NTLP also provides youth service, women' services, family support and Traveller support programme in North STDC manages one PHCP in South of county		
Education	National Educational Psychological Service (NEPS): provides assessments of pupils and students to identify educational needs and to make recommendations. NEPS is the lead responder in schools in the event of a critical incident	Statutory	Hardiker Levels 2 & 3
	Special Educational Needs Organizers	Statutory	Hardiker Level 2
	Special Needs Assistants and other support resources to facilitate engagement by pupils and students in mainstream Primary and Post-Primary education	Statutory	Hardiker Level 2
	Special classes attached to various Primary & Post-Primary schools for children & young people with additional needs, namely, ASD, Speech & Language Disorders, and Emotional & Behavioural Disturbance	Statutory	Hardiker Level 2
	Visiting Teacher for the Visually Impaired	Statutory	Hardiker Level 2
	Visiting Teacher for Children who are Hard of Hearing.	Statutory	Hardiker Level 2
HSE Occupational Guidance service	Guidance and advice to young people, aged ≥ 18 years with disabilities re. training & education prospects.	Statutory	Hardiker Levels 2 & 3
National Learning Network, Cluain Training Centre, Moorehaven Centre, St. Cronan's Centres	Rehabilitative training for young adults with disabilities	Non-statutory	Hardiker Levels 2 & 3
Moorehaven Centre, Brothers of Charity, Rehab Care, Camphill Community	Day services for young adults with disabilities	Non-statutory	Hardiker Levels 2 & 3

Organization/ Agency	Service	Statutory/Non- statutory	Hardiker level
Irish Wheelchair Association, Tipperary Centre for Independent Living, North Tipperary Disability Support Service	Provision of support to adults with disabilities to live independently.	Non-statutory	Hardiker Levels 2 & 3
Irish Wheelchair Association	Provision of locally-based recreational and educational programmes for adults with disabilities. Set up sports club for children and young people with disabilities in Thurles	Non-statutory	Hardiker Level 2
Clonmel Community Resource Centre	New Communities Project Health Worker for South of the county	Non-statutory	Hardiker Level 2
Clonmel Community Resource Centre	LGBT Health & Support project for South of the county	Non-statutory	Hardiker Level 2
Department of Social Protection	8 Social Welfare offices in the county Intreo service offers practical, tailored employment services and supports for jobseekers and employers alike.	Statutory	Hardiker Level 2
Department of Social Protection	Youth Employment Support Scheme for NEETs, aged 18 – 24 years	Statutory	Hardiker Level 2
Department of Social Protection	<u>EmployAbility service</u> : an employment and recruitment service to assist people with a disability to secure and maintain a job in the open labour market. Offices in Clonmel and Nenagh	Statutory	Hardiker Level 2
Level 3			
Túsla Child & Family Services	Child Protection services under Children First Act 2015 Social Work services Family Support Workers	Statutory	Hardiker Level 3
Túsla Child & Family Services	Outreach team in South of the county	Statutory	Hardiker Level 3
Túsla Child & Family Services	After-care service – support to young adults leaving alternative care.	Statutory	Hardiker Level 3
HSE Child and Adolescent Mental Health service (CAMHS)	Treatment of children and young people with acute mental illness diagnosis. 3 CAMHS teams.	Statutory	Hardiker Level 3
HSE Adult Mental Health	Provision of mental health assessment, interventions, treatment and outreach support services to adults 5 Community Mental Health Teams	Statutory	Hardiker Level 3

Organization/ Agency	Service	Statutory/Non- statutory	Hardiker level
HSE Regional Office of Suicide Prevention (South-East)	A bereavement counselling service for persons aged ≥ 16 years who have been bereaved through sudden traumatic deaths. Available in the South of the county	Statutory	Hardiker Level 3
HSE Substance Misuse services	Assessment; 1-to-1 counselling; harm reduction needle exchange; methadone maintenance programme and supported referral to other services as required.	Statutory	Hardiker Level 3
Youthwork Ireland Tipperary and HSE Substance Misuse services	Family Functioning Therapy service for families linked with HSE Substance Misuse service in South of County	Statutory & non-statutory	Hardiker Level 3
Novas	Family Respite House, Newport Novas Community Detox: providing safer detox from benzo's and methadone on an outpatient basis - part of a national initiative.	Non-statutory	Hardiker Level 3
HSE Disability services	<ul style="list-style-type: none"> - PHN Liaison services for Physical & Sensory Disabilities for children and for adults - PHN Liaison services for Learning Disabilities for children and for adults - Assessment of Need Officer - Early Intervention Teams for children - SLT/OT/Psychology/Social Work/ Physio services - Multi-disciplinary School age teams 	Statutory	Hardiker Level 3
Brothers of Charity	<ul style="list-style-type: none"> - Collaborate with HSE Disabilities services for children and young people in South of the county - Participate on Early Intervention Team - Psychology & SW services 	Non-statutory	Hardiker Level 3
Enable Ireland	<ul style="list-style-type: none"> - Collaborate with HSE Disabilities services for children and young people in North of the county 	Non-statutory	Hardiker Level 3
Special Schools for children and young people with disabilities	Scoil Chormaic, Cashel Scoil Aonghusa, Cashel St. Anne's Special School, Roscrea	Non-statutory	Hardiker Level 3

Organization/ Agency	Service	Statutory/Non- statutory	Hardiker level
Rehabilitative training services	Training centres for young people with additional needs to enhance and develop life skills, social skills and basic work skills, e.g., National Learning Network, Clonmel; St. Cronan's Centres in Roscrea and Nenagh.	Non-statutory	Hardiker Level 3
Day Care services	Services to maintain and enhance the quality of life of people with disabilities and to focus on their capabilities, e.g., Camphill Community, St. Cronan's	Non-statutory	Hardiker Level 3
Level 4			
Túsla Child and Family services	Provision of alternative care for children in cases where necessary to ensure their health & safety	Statutory	Hardiker Level 4
St. Bernard's Group Homes, Fethard	High Support Unit for children aged ≤12 years with acute attachment issues – available only for Southern region Therapeutic foster-care unit to provide high-level support to foster families – available only to South of county.	Non-statutory	Hardiker Level 4
Brothers of Charity, Enable Ireland, RK Respite agency	Respite and residential care for children with disabilities	Non-statutory	Hardiker Level 4
HSE, Camphill Community, Brothers of Charity, Rehab Care, Daughters of Charity	Residential care for adults with disabilities	Statutory and non-statutory	Hardiker Level 4
Aisling Adolescent Addiction Centre, Ballyragget, Co. Kilkenny	Residential treatment centre for young people with acute addiction issues	Non-statutory	Hardiker Level 4
Aiséirí Residential Centre, Cahir	Residential treatment centre for adults with acute addiction issues	Non-statutory	Hardiker Level 4
In-patient units in 6 hospitals in Dublin, Cork and Galway	Residential provision for children and young people with acute mental health conditions.	Non-statutory	Hardiker Level 4
HSE Mental Health service	Residential provision for adults with acute mental health conditions in St.Luke's Hospital, Kilkenny, and Ennis Psychiatric Hospital	Statutory	Hardiker Level 4

Conclusion:

One of the most striking features of the organization of services to children, young people and families in Co. Tipperary is the continued demarcation of the North & South of the county for a number of key service providers in terms of their geographical remits. This is the case for the HSE and Túsla/Child & Family Agency, whose respective services in the North & South of the county are not only bound by their geographical remit but also fall under two different regions, Mid-West & South. The organizational priorities, the different patterns of service development, the differing regional priorities, the different reporting lines of responsibility all exert a centrifugal force to counter the integrative project of the CYPSC on an all-county basis.

This has implications for the non-statutory services that are funded by these agencies. These have to respond to the demands of the funding agency in their respective regions, whether HSE or Túsla, and their service priorities are determined accordingly.

Other services too also operate as separate organizational structures in the North and South of the county, such as the National Educational Psychological Service and the Local Development Companies.

The legacy of the division between North & South Tipperary is evident in other ways in relation to service development. There are services operating in one part of the county that are not to be found in the other. Overall, there is a perception that, historically, there has been uneven service development between the North and the South of the county with the South being perceived to have a more developed services infrastructure.

In general, there is evidence of under-resourced service provision both North and South of the county.

Section 4: Local Needs Analysis in County Tipperary

Introduction

In this section, the information drawn from consultation and research under each of the 5 National Outcomes is presented and analysed to indicate where the areas of need for the age cohort, 0 – 24 years, lie. The correlation of these needs with levels of relevant service provision is also examined to highlight any service deficits and gaps. In this way, the priority issues for the CYPSC to address through appropriate actions are identified.

National Outcome 1: Active and Healthy, Physical and Mental Wellbeing

The key areas of need are identified as follows:

- Mental Health & Wellbeing
- Physical Activity
- Food & Diet
- Sexual Health & Behaviour
- Children with Additional Needs

Mental Health & Wellbeing :

In relation to current service provision to meet Mental Health and Wellbeing needs, the following service deficits have been identified:

- In relation to Mental Health services, there is evident disparity between CAMHS provision in the North and the South of the county. The two CAMHS teams in the South of the county provide a service for 22,213 (CSO, 2016) in the 0 – 17 years age group, while the CAMHS team in the North provides a service for c. 17,608 in the 0 – 16 years age group in the area under its remit (*ibid.*). There is also no service from CAMHS for 17-year olds in the North of the county.
In general, it is acknowledged that there are long waiting lists for the CAMHS and Child & Adolescent Psychology services both in the North and South of the county.
- The need for access to other therapeutic services for children has also been raised, such as Play Therapy and Art Therapy. While these are provided at local level by specific agencies, often non-statutory, the services are not universally available and access to them is determined by location of residence.
- Resources have been and continue to be invested in the clinical Mental Health services to address the acute psychiatric conditions that present to them. However, there are no comparable service structures or resources in the county to provide an Early Intervention response to the young people who are affected by less acute Mental Health issues described above. While the HSE Primary Care offers the Counselling in Primary Care service to those aged ≥ 16 years with a Medical Card, it is not universally available. This area has otherwise tended to be left to local initiative and, around the county, youth services, schools, family support services, and other agencies are responding individually to local need.

Mental Health and Wellbeing issues

Research and consultation identified the following issues for the different age groups:

0 – 3 years:

There is now a growing body of longitudinal research in mental health and neuroscience which shows that the origin of mental health problems diagnosed in later childhood, adolescence and adulthood can be found during pregnancy and the first three years of life (*Shonkoff and Phillips, 2000, Tremblay, 2010*). The generic term relating to this key stage of development and the influence of key relationships at this time is Infant Mental Health (IMH).

In this critical early period, the key determinant factor in the child's healthy, social and emotional development is the primary nurturing relationship with the caregivers. In particular, parental sensitivity is of key importance in understanding early caregiver–infant interactions and is central to the development of a secure attachment relationship. Parental sensitivity refers to a caregiver's ability to perceive the infant's signals, interpret them accurately and respond promptly and appropriately (even in the face of competing demands).

There is a need to target IMH informed interventions at different levels, from universal promotion of the key importance of the parent-infant relationship to support and therapeutic intervention, where necessary, for parents. However, there is a lack of knowledge and of IMH training among professionals working with children, aged 0 – 3 years, and their families. The new national *Nurture Programme - Infant Health and Wellbeing*, being led out by the HSE and the Katharine Howard

Foundation, is seeking to remedy this in relation to HSE staff. Currently a national training programme for Public Health Nurses is being rolled out so that all PHN visits to children, aged 0- 5 years, will be informed by an IMH perspective. There are already one or two initiatives in place in the county promoting such attachment-based interventions, such as the inter-agency IMH project in Clonmel. This latter project has provided training to staff from a variety of statutory and non-statutory agencies and is collaborating with the national Nurture programme. There is a need to support the work of such initiatives at county level to build IMH informed capacity in all relevant service provision and to raise awareness.

Link to Action Plan:

- To organize training in attachment-based programmes for staff working with children and families.

Pre-school age:

For children at pre-school age, the key protective factors are associated with home & family, friends and play. In a consultation undertaken on behalf of Tipperary CYPSC by staff in 5 pre-schools around the county, the centrality of the relationship with parents is particularly evident:

- *'I like to swim in the swimming pool and Mammy does too'.*
- *'I go to Tipperary match with my Daddy'.*
- *'I like the cinema. I watch movies with my Dad.'*

Also of key importance is the role of the pre-school in their personal and social development. The pre-school setting needs to be experienced as a caring environment by the child in which to interact positively with other children, and to be facilitated to engage creatively with the range of activities, including play.

The need to support parents in their care-giving role and the importance of a quality childcare service to ensure good outcomes for the wellbeing of children of pre-school age are evident here.

Link to Action Plan:

- To disseminate information on all parenting supports across Tipperary CYPSC area

Primary School age:

The Growing Up in Ireland (*GUI*) research on the 9-year old age cohort has found that the majority of nine-year old children are developing well without any significant social, emotional or behavioural problems. However, in line with other international cohort studies, approximately 15% to 20% of GUI children are classified as exhibiting difficulties. Key risk factors for poorer social and behavioural outcomes include being a boy, having a learning or development difficulty, high levels of emotionality, high levels of mother-child conflict and living in a family with low income. The cumulative impact of these factors in the cases of individual children can be particularly detrimental in terms of their personal & social development.

In Tipperary, in the CYPSC survey of children of Primary School age, the issues identified that generated stress and negative feelings included:

- Financial pressures at home
- Bullying
- Social isolation outside school, in relation to children with disabilities.

Protective factors that generated wellbeing and confidence included:

- Family: Parents were central to the children's lives and were constantly mentioned as being important to their wellbeing and happiness. Grand-parents were also highlighted as anchors in their lives.
- Friendships and opportunities to engage in play activities with friends. (*Bookle, 2016*)

In the on-line CYPSC survey of parents, the issues of Anxiety & Stress, and to a lesser extent, of Mental Illness, were ranked as major Health concerns for the 0 – 12 years age group.

Because 'child characteristics – including gender, health status and temperament – remain the most robust predictors of social and emotional outcomes', one recommended action to improve outcomes for children specifies '*child-focused programmes which develop children's skills for building relationships, regulating their emotions, and coping with stress may help to improve children's outcomes*' (*Nixon, 2012*). A number of agencies are involved in rolling out such programmes in school settings:

- Barnardos has recently introduced the 'Roots of Empathy' programme into the county and is delivering it in Primary Schools across the county.
- HSE Health Promotion has been delivering the 'Zippy's Friends' programme in Primary Schools
- The National Educational Psychology Service has offered 'Friends for Life' tutor training to staff of DEIS Primary & Post-Primary Schools.

The take-up by Primary Schools of such programmes is on a voluntary basis and therefore there is an important promotional role in ensuring their expansion across all schools.

Link to Action Plan:

- To support roll out of such social & emotional development/ resilience programmes as: 'Roots of Empathy' and 'Zippy's Friends' in Primary School and out-of-school settings

Also, as high levels of conflict in the parent-child relationship can have adverse consequences for the child's social and emotional wellbeing, parenting programmes which facilitate parents and children to manage conflict in their relationship are also recommended. (*ibid., p.58*)

Link to Action Plan:

- To disseminate information on all parenting supports across Tipperary CYPSC area
- To establish the parenting needs addressed by the current programmes and interventions and identify the gaps.

Young people, 12 – 24 years:

As indicated in the Headstrong 'My World' survey on Mental Health (2012), young people in the age group, 12 - 24 years, can be particularly vulnerable over the course of their adolescence and emergence into adulthood. Depending on the mix of protective and risk factors in their lives, they can experience rising levels of anxiety and stress from the age of 12 or 13 years which tend to peak at 19 /20 years, with attendant impact on their mental health (*Dooley & Fitzgerald, 2012*).

At the acute end of the continuum of mental health, it has already been noted that Tipperary has:

- One of the highest rates of child admissions into psychiatric hospital in the country

- An above average rate of young people, aged 13 – 24 years, discharged from hospital with a diagnosis of mental or behavioural disorders

For a picture of the mental health of young people in general, the Headstrong 'My World' national survey on Youth Mental Health in Ireland (2012) found that many young people experience a lot of anxiety, stress and depression, depending on the mix of protective factors and risk factors in their lives. A sample of 347 young people, aged 12 – 19 years, were surveyed in Tipperary with the following findings:

- 10.4% of the young people experienced moderate levels of depression, while 7.3% experienced severe levels of depression
- 6.1% experienced moderate levels of stress, while 6.1% experienced severe levels of depression
- 14.7% experienced moderate levels of anxiety, while 10.5 % experienced severe levels of anxiety.

(*ibid.*)

These rates were similar to national rates.

The CYPSC on-line survey of parents in the county found that Mental Illness and Anxiety & Stress were their main health concerns in relation to the age groups, 13 – 17 years, and 18 – 24 years, respectively. The need for education around Mental Health and Suicide in school as well as access to more and better-resourced services, providing information, Early Intervention/counselling and clinical interventions, were suggested as measures to address this issue. There was also a big demand for an easy way to access information on service provision, though this was not necessarily limited to Mental Health services/in general.

The CYPSC on-line survey of 3rd-level students at LIT found that Mental Illness was the highest-rated main health concern. The biggest sources of Mental Health difficulties were identified as Stress, Anxiety, and Low Self-Esteem. For two out of five of the respondents, Family Problems were also a source of Mental Health difficulties. Only less than one in four of the respondents were aware of services in their respective areas to address mental health concerns.

Risk factors identified as affecting Mental Health and Wellbeing by young people in the county include Body Image, Peer Pressure, Exam Pressure, and Bullying. Young people living in socially disadvantaged conditions or who, due to personal or social circumstances, are at risk of social exclusion are particularly vulnerable. These include:

- 2,349 young people aged 12 – 17 years, and 2,408 young adults aged 18 – 24 years living in the 'Disadvantaged' and 'Very Disadvantaged' Small Areas. (*CSO, 2016; Pobal web-site*)
- 245 young Travellers, aged 10 – 24 years, residing in the county (*AIRO, 2017*)
- The estimated 1,400 LGBT* young people, aged 15 – 24 years (*BeLonGTo*)
- 633 young people, aged 10 – 19 years, with disabilities, and young adults, aged 20 – 24 years with disabilities (*AIRO, 2017*).

Travellers, people with disabilities, and people of LGBT* sexual identity have all been identified as groups which have an increased risk of suicidal behaviour. Other groups identified as at risk, also present in the county, include asylum seekers, refugees and migrants (*NOSP, et al., 2015*).

The CYPSC consultation with young people, aged 13 – 18 years, who presented as at risk of social exclusion highlighted Mental Health and Wellbeing risk factors, some of which derived from their circumstances:

- Substance misuse and excessive alcohol consumption.
- Anxiety and stress relating to difficult life circumstances and school pressures.
- Bullying, particularly in the school setting.
- For Traveller young people, a sense of social exclusion and discrimination against them in school and in local community settings.
- For LGBT* youth, exposure to taunts and harassment in school and feeling unsafe.
- For young people with disabilities, lack of opportunities for social interaction with peers outside school, particularly for those in rural settings. (*Brennan, 2016*)

Two consulted groups of young adults, aged 18 – 24 years who were engaged with the Justice system and the Túsla After-care service, respectively, identified their main stressors as follows:

- For those in the Justice system, their responses were varied including having no money, looking for work & accommodation, owing money for drugs, family, Mental Health and addiction.
- The responses of the young people in After-care services cited school, pressures of academic performance & exams, peer pressure and bullying. There were also expressions of worry about the future as well as a sense of insecurity about lack of dependable family support.

It is evident that there is a substantial proportion of children and young people affected by one or more of the range of risk factors that have an adverse impact on mental health. As noted above in relation to service provision, there are a distinct lack of resources to respond adequately and appropriately in the area of Early Intervention. Young people have identified the need for a safe space and easy access to someone who can listen to them, sometimes in a school setting and sometimes in a community setting. The CYPSC sees the need for counselling services for young people that would be accessible. It also sees the need for a Youth Mental Health project, such as Jigsaw, that would provide such a service, and that would also bring together and work with young people, and other key stakeholders in the community and in the services sector for better mental health outcomes.

Link to the Action Plan:

- In relation to dissemination of information, to map existing service provision for mental health support for young people: poster will be developed and distributed to staff in PCTs.
- To work together with 'Connecting for Life' MW & ST Strategy Implementation Gps. and with Tipperary LCDC to respond to Youth Mental Health needs in the county.
- Provision of Mental Health training such as WRAP, Suicide Prevention, to frontline workers; 'Friends for Life' tutor training to teaching staff in DEIS schools; and 'Mind Out' tutor training to staff in Post-Primary schools.

Bereavement and loss: The issues of bereavement and loss also relate to the mental health of children and young people. Marital breakdown is increasingly being seen as the main cause of loss for children and young people rather than parental bereavement. While services for more acute cases of loss are accessed through Psychology, the need for a service to help with children more

generally with loss issues arising from parental separation or bereavement has been indicated by Family Support services and schools.

Link to Action Plan:

- To set up bereavement programmes in areas currently without the service

Critical Incident protocols: There is a need for an effective response in the aftermath of cases of suicide in which there is a potential adverse emotional and psychological impact on children and young people affected by these cases. For such events, protocols have been developed to guide the response, in which the NEPS service plays a key role. National 'Connecting for Life' Strategy actions under Goal 3 (3.3.2 & 3.3.3) direct that such critical incident protocols be developed for secondary schools and for 3rd-level institutions, respectively.

Link to action:

- To evaluate existing Critical Incident protocols and, where necessary, to develop new ones.

Physical Health & Wellbeing

Findings from the national Growing Up in Ireland (GUI) survey programme showed that:

- 24% of the children in the sample were overweight and obese at 3 years, this proportion dropping to 20% by 5 years.
- Girls were more likely to be overweight than boys at 5 years.
- At 9 years, 26% of children were either overweight or obese, with girls significantly more likely than boys to be overweight (22% compared to 16%).
- By 13 years, 20% were overweight, and 6% were obese, with girls more likely to be overweight or obese than boys. (*GUI*)

The survey findings also indicated that significant differences in the health status of children correlating with differential socio-economic family circumstances can be identified by three years of age. This was evident from the difference of 8 % between the proportions of 3-year olds respectively from the most advantaged and most disadvantaged social class categories who were rated as 'very healthy'. Other differences in key indicators for physical health of children correlate with differential socio-economic circumstances, such as incidence and duration of breast-feeding at infancy, quality of diet in subsequent years, and levels of 'screen' time (*ibid.*).

Service provision:

A range of agencies have a role in promoting a healthy lifestyle among children, including the HSE Public Health Nursing Service in Early Years, pre-schools, schools, Tipperary Sports Partnership, sports organizations, the Local Authority, HSE Health Promotion and youth services. There are therefore a wide range of activities being implemented in a range of settings across the county whose collective impact is difficult to measure. The need for coordination and targeting of resources appears to have been recognized in the recently introduced Healthy Ireland initiative to distribute funding through county-level Local Community Development Committees (LCDCs) and CYPSCs for

locally identified actions. These latter actions were designed to address such priority issues as those in the following sections.

Tipperary CYPSC and the Tipperary LCDC are also cooperating in the development of a Healthy Tipperary Strategy.

Link to Action Plan:

- To work with Tipperary LCDC Healthy Tipperary Sub-Group to develop Healthy Tipperary Strategic Plan.

Physical activity:

Lack of physical exercise and associated increase in sedentary activities are recognized as key factors in heightening risk of becoming overweight or obese and highlights the need for children participating in adequate levels of exercise. Involvement in physical activities featured prominently in the CYPSC consultation feedback from the different age groups. Pre-school children identified physical activities that they enjoyed doing, such as, bouncing on a trampoline, climbing up a slide, going to the playground, while children of primary school age consistently highlighted playing, sports and activities as among the best things about being a child in Tipperary. Traveller children were particularly likely to identify the importance of outdoor activities and playing outside (*Bookle, 2016*). The young people consulted identified Fitness and the related issue of Obesity as being one of their key Health issues with the majority reporting doing physical activity between 2-3 times per week with GAA sports, soccer and walking being the most popular activities (*Brennan, 2016*). The CYPSC survey of students in Limerick Institute of Technology in the 18 – 24 years age group found that two-thirds of the sample reported engaging in physical activity and that the most common type of physical activity was walking, followed by gym-based exercise, running and field sports (*McMahon & Keating, 2016*). It is noteworthy that for young people and young adults, aged 13 – 24 years, who were in the ‘at risk of Social Exclusion’ category, fitness was also a key Health issue but most did not participate in team sports and tended to exercise alone. For the group of young people, aged 13 – 18 years, there were barriers to participating in organized sport activities and using facilities, such as scarcity of financial resources, and, in the case of Traveller youth, perceived prejudiced attitudes towards them (*Brennan, 2016*).

In spite of the reported engagement by a substantial proportion of children and young people in physical activities, nevertheless parents consulted identified lack of physical activity as the biggest health concern for the 0 – 12 year age group, and as still a significant issue in relation to older age groups. The consultation with the 13 – 18 years age group found that some young women were reporting that they no longer participated in sports as they became more self-conscious of their physical presentation, particularly in mixed gender sport settings (*ibid.*).

Links to Action Plan:

- To promote extension of the Active School Flag initiative in schools
- To support the establishment of a Sports Club to provide physical activity opportunities for children and young people with disabilities
- To deliver training to pre-school staff to deliver Buntús and Balance Bike in Early Years setting.
- To support the implementation of programmes to encourage increased physical activity by girls in schools and youth services.

Food & Diet

As noted above in the GUI research, the impact of diet on physical health is evident from infancy. World Health Organisation guidelines recommend that children should be exclusively breastfed where possible and not introduced to solid food for the first six months of life. Yet Ireland has one of the lowest breastfeeding rates in Europe and 46% of children are currently weaned onto solids by four months of age. As noted in Section 2, the rate of breast-feeding in Co. Tipperary lags behind the

national rate. In addition, findings from GUI show that, from infancy, children from lower class, education and income backgrounds were less likely to be breastfed, more likely to be weaned earlier, and significantly more likely to experience rapid weight gain in early infancy, even after adjusting for birth weight. The need for resources to promote breast-feeding is evident.

In relation to older age-groups, the GUI research continues to find a correlation between diet and socio-economic status. It noted that, for its research sample of 9-year olds, consumption of fruit and vegetables was relatively higher for children of parents with higher education, while consumption of energy-dense snack food was higher among children of parents with lower levels of educational attainment (GUI).

At county level, the CYPSC consultation with parents found that Food and Diet was one of the key health concerns for under three-quarters of respondents in relation to the 0 – 12 years age group. The importance of healthy nutrition was also noted in the CYPSC consultation with the 13 – 18 years age group in relation to the principal Health issues of Fitness and Obesity (Brennan, 2016).

Links to Action Plan:

- To increase service provision to encourage and support mothers to breast feed their babies
- ‘Cook It’ tutor training to be rolled out to staff in youth services, family support agencies and other front-line services. These staff then to deliver ‘Cook It’ programme to their service-users.
- Roll-out of Safefood initiative through hosting workshops and networking events

Sexual Health:

The family home provides the main model for children with regard to building relationships and forming the basis for the development of future relationships as they grow to maturity. The parents, as primary carers, would also be expected to be the main source for information on Relationship and Sexuality Education to their children. Growing Up in Ireland Research (GUI) noted that 51% of 13-yr old girls and 42% of boys reported that they had discussed sex and relationship issues with their mothers. When asked to whom they would go for advice on such matters, only 32% of the children reported that they would go to their mothers, 23% said they would talk to friends, 10% to a teacher, 6% to their fathers, and 14%, twice as many boys as girls, said they would go nowhere for such information.

Relationship and Sexuality Education (RSE) is also delivered as a component of the broader Social Personal and Health Education (SPHE) in schools. There are varied experiences of RSE in schools and some young people have indicated that they want more RSE classes and better quality teaching.

However, recent research suggests that the quality and reach of relationship and sexuality education in schools is improving. (NSHS, 2015)

Sexual Health was a significant health concern for parents of young people and of young adults who were surveyed on behalf of CYPSC, with suggestions for more information and better preparation of young adults transitioning to autonomy.

For some of the young people at risk of social exclusion who were consulted, it was apparent that sexual health was an area in which they were putting themselves at risk. Many young people felt that the kind of sex education that would reflect their concerns and needs, what they termed, 'real life' sex education, is missing from schools and that they are not informed of the risks and safe practices. Many felt that the Relationship and Sexuality Education (RSE) programme received in the school curriculum is biology based and hasn't moved with the times. For young people with a LGBT* identity, they felt that their experience was completely excluded in RSE in the school setting. They called for wider education about LGBT*, and in particular, the Transgender experience. (Brennan, 2016)

Young people who have experienced state care are particularly vulnerable to early sexual experiences and teenage pregnancy. This is because of the adverse impact of the instability and dislocation in their personal and familial circumstances on development of a sense of emotional security and the attainment of the life skills for participating in positive mutually respectful intimate relationships (Túsla & HSE Crisis Pregnancy Programme, 2016).

Other vulnerable groups include people with a migrant background and people with an intellectual disability (NSHS, 2015)

The National Sexual Health Strategy has outlined 3 Goals:

- To ensure that everyone will receive comprehensive and age- appropriate sexual health education and/or information and will have access to appropriate prevention and promotion services.
- To ensure availability of equitable, accessible and high quality sexual health services that are targeted and tailored to need.
- To ensure that robust and high quality sexual health information will be generated to underpin policy, practice, service planning and strategic monitoring.

Links to Action Plan & Goal 1, NSHS:

- To provide Sexual Health training to staff working with young people and young adults in different settings
- To deliver programmes on healthy relationships to young people

Children with Additional Needs

In the South of the county, HSE provides for the health care needs of children with disabilities, while the Brothers of Charity have a remit to provide certain support services. These latter consist of Psychology (which they share with HSE Psychology) and Social Work services, as well as respite and residential care and child development provision in a specialised pre-school setting in relation to children with moderate, severe to profound disabilities. Services for the 0 – 5 years age group are reportedly very supportive as there is a stipulated protocol to be adhered to in relation to assessment, referral to the Early Intervention Team and a care plan developed. However, services appear more attenuated for the 6 – 18 years age group with gaps in specific provision for certain categories of children with disabilities.

In the North of the county, Enable Ireland and the HSE Disabilities services work in partnership to provide specialist therapeutic assessment and intervention to children with complex disabilities and/or developmental delay. The services are delivered by multi-disciplinary teams, composed of HSE and Enable Ireland staff: the Early Intervention Team for children aged 0 – 5 years, and the

School Age Team, for children and young people, aged 6 – 18 years. The service model is acknowledged to be progressive, and with its features of an integrated approach; the aim to provide uniform consistent coverage for children across the catchment area; and the capacity to provide services locally for any child with whatever level of disability in the home or school setting, it represents the prototype of the model adopted by the national *'Progressing Disabilities Services for Children and Young People'* programme.

The major issue concerning service provision for children and young people with Special Needs both in the North and South of the county is that of a lack of adequate resources to meet the demands. Too few professional staff, key staff vacancies, and excessively long waiting times to receive services are common complaints among families with children and young people with a variety of Special Needs. This is an issue that is being recognised in the implementation of the national *'Progressing Disabilities Services for Children and Young People'* programme and new staff are being allocated to provide the services under said programme. In 2016, for instance, new staff, including Speech and Language Therapists, Physiotherapists and OTs, were allocated to the South of the county to fill existing vacancies.

Nonetheless, families are often driven to seek a service privately at considerable financial cost in order to ensure timely accessibility to the appropriate service. Some have also expressed concern that they may be missing key information about services that their children would need, and wish for one central source for all the information that would be of use.

Link with Action Plan:

- To produce Guidelines poster and leaflet re. pathways to these services and to publicise

National Outcome 2: Achieving Full Potential in Learning & Development

The key areas of need are identified as follows:

- Early School Leaving
- Transitions
- Literacy Development
- Education for Travellers
- Language Barriers

Service provision

In the audit of service provision in education, the following issues were identified:

- The viability of community based pre-schools has come into question. While there are two community-based pre-schools for every three private pre-schools in the South of the county, it has been noted with concern that there is a greater imbalance between community-based and private provision, respectively, in the North of the county, with less than one community-based pre-school for every five private childcare services. There is no community based full day care service in Thurles or Borrisokane in the North of the County . There are many issues facing the sustainability of community childcare services . An over-reliance on staff employed through the Community Employment (CE) scheme to maintain

staff ratios has been impacted negatively by the introduction of a minimum qualification (FETAC 5) for childcare workers in January 2017. Additional transitional supports for these services have been negotiated with the Dept. of Children & Youth Affairs by Child Care Committees Ireland (CCI), the network for Childcare Committees .

- The 19 DEIS Primary Schools account for 12.2% of all Primary Schools in the county and this rate represents the 10th lowest in the country. There is also a distinct lack of DEIS Primary and Secondary Schools in the North-West of the county, with the exception of the TETB college in Newport. There is no DEIS school at Primary level in the RAPID town of Tipperary (AIRO, 2016). In view of the levels of social disadvantage in this town, this is a striking gap.
- Education Welfare Officers have identified the lack of an Alternative Learning service provision in the county as an issue for young people under 16 years who are unable to accommodate to the conventional academic curriculum and structured format in secondary schools.
- Current education provision for children and young people with a range of Special Needs is unevenly developed and resourced. For children and young people with Mild Disability who do not attend a Special Needs school, and for those with ASD, Dyslexia and Dyspraxia, respectively, the individual school experience can vary depending on the availability of the appropriate provision and sufficiency of resources. For instance, for children with Dyslexia, the assessment of this condition usually takes place in the main-stream school setting. Yet with the NEPS staff usually carrying out only 2 -3 assessments per annum, many parents of children with suspected Dyslexia have to look for the service from the Dyslexic Association of Ireland (DAI) for a fee, or to pay for an assessment by a private educational psychologist. In fact, from a national sample of parents surveyed, only 26% of their children were assessed by NEPS, with 74% having to seek a private assessment (DAI, 2015). Other issues that parents in Co. Tipperary have raised include:
 - Need for training for school teachers in main stream school settings to recognise and respond appropriately to children and young people with Dyslexia and Dyspraxia (both often categorised, along with other conditions, as Specific Learning Disorders - SLDs)
 - While some schools at Primary and post-Primary levels appear to have the resources to provide good support to children and young people with Dyslexia and other SLDs, there are evidently other schools where there is a lack or insufficiency of learning support resources for SLDs.
 - Issue of insufficiency of special educational provision for children and young people with ASD in mainstream school settings. Current provision consists of 7 pre-school classes in 6 Primary Schools, 25 classes in 16 Primary Schools, and 18 classes in 9 Secondary Schools, mainly TETB, around the county (NCSE, 2017).

Early School Leaving

There is a range of service provision at levels of Prevention, Early Intervention and alternative educational provision addressing the issue of Early School Leaving in the county.

- At the levels of prevention and early intervention, the Incredible Years Teacher Classroom Management (TCM) training has been rolled out by the Local Development Companies among teachers of Primary Schools since 2013, initially in the South of the county, and more recently in the North. The training, which focuses on the practice of strategies which reduce negative pupil behaviour and encourage motivation, has been offered to all DEIS Primary

Schools by NEPS since 2017. To date, staff from over two-thirds of all Primary Schools in the South of the county have participated in this training. Partly because of the more recent introduction of the training programme in the North of the county, the number of teachers trained in Primary Schools there are smaller.

- Also at the levels of Prevention and Early Intervention, the School Completion Programmes (SCPs) operate in secondary schools with DEIS status and their feeder Primary Schools with a focus on targeting and providing supports to young people who are at risk of early school leaving. Initiatives to support and secure retention of young people include breakfast clubs, homework clubs and mentoring programmes, programmes to support transition from primary to secondary school. There are 5 School Completion Programmes operating in the county, covering between them Clonmel and environs, Carrick-on-Siúr, Tipperary town, Fethard, Killenaule, Thurles, Templemore, Roscrea and Newport. It should be noted that this does not include any Primary Schools in Tipperary town, Thurles or Newport.

The Home School Community Liaison (HSCL) Scheme operates in primary and secondary schools with DEIS status to engage and work collaboratively with the adult carers of children & young people who have difficulties in school.

- At the level of Early Intervention, homework clubs are provided through the School Completion Programme in the DEIS schools. Similar supports are also provided through After-School care services by some childcare facilities, as well as the NTLP's Homework club in Nenagh.
- At the level of alternative provision, there are 6 Youthreach Centres and Community Training Centres under TETB, located around the county for young people not in education, employment or training, aged 15/16 years and upwards.

Also under TETB, there are Local Training Initiatives (LTIs) which are project-based training and work experience programmes carried out in the local community and run by local community groups throughout Tipperary. They are designed for people who are unemployed, and who are experiencing difficulty in gaining entry to the labour market.

Other programmes are the Vocational Training Opportunities Scheme (VTOS) and the Back to Education Initiative.

As noted in Section 2, school absenteeism rates for Primary and Post Primary levels in Co. Tipperary fall below the State average and school retention rates at Post Primary level are above the corresponding rates for the State. The consultations undertaken with the children, young people and young adults, all categorised as being at risk of social exclusion, reveal the factors which have an adverse impact on their experience of the education system and also the supports which contribute to their participation in education.

Children in Primary School recognized that school plays an important role in supporting their learning and development, as well as providing a place to meet friends. Some made suggestions for additional alternative methods of learning, particularly interactive ones or those that make use of information technology. Those children who had access to after-school and homework clubs believed that these were important in helping them to manage their workloads and get a range of supports/skills to help their development more generally (*Bookle, 2016*). It remains the case that supportive teachers are the most effective agent for ensuring that the class can be a positive educational environment for children. It is important therefore to enhance their skills to facilitate

the child to interact positively with the teacher and with other pupils in the class.

Link to Action Plan:

- To continue to roll out the Incredible Years Teacher Class Management programme in Primary Schools around the county.
- To promote the establishment of Homework Clubs in school settings in areas of Social Disadvantage.

At secondary level, for the young people, aged 12/13 – 18 years, who represented a sample of the general youth population, school was an area of stress, where they face challenges of dealing with exams, bullying, homework, finding and keeping friends and feeling pressured to do well. There was also a common perception that a young person's background could adversely affect how they experienced school, namely, by being from the Traveller community, by being from a lower social class with an associated negative family history, or by coming from difficult family circumstances with no home support. The responses of the sample of young people drawn from vulnerable groups who had left mainstream schooling revealed the aspects of school that had led them to feel isolated and excluded in the class environment. They noted the emphasis on academic performance in the class where the teachers tended to engage mainly with the students who achieved high grades and were bound for 3rd-level education. The young people reported struggling with the conventional academic programme, feeling inadequate and ignored or embarrassed and exposed when required to respond to questions from the teacher (*Brennan, 2016*).

The young adults, respectively, in the Justice system and in the Túsla After-care service, raise similar issues to those of the vulnerable young people referred to above about their collective experience in school. Difficulty with exams and school work, pressures to fit in and to be socially accepted, bullying, and anxiety are all identified as challenges by both sets of young people, although only the young people in the Justice system also refer to exposure to Alcohol & Substance Misuse, and anti-social behaviour.

Those young people who have left school before they have reached the age of 16 come under the remit of the Education Welfare service. Because of the work of School Completion Programmes with young people at risk, the number who fall out is comparatively small. Reasons for the inability of young people to remain in school reportedly include learning difficulties, anxiety issues, and lack of any parental support.

Link to the Action Plan:

- To support establishment and roll-out of Alternative Learning Programme (ALP) or similar programme for NEETs, aged ≤ 16 years.
- To develop a policy paper around the value, impact and 'ease of use' of ALP for submission to the Department of Education & Science.

Transitions

The parents surveyed generally reported a satisfactory transition by their children to secondary school, although some expressed concerns about stress around exams and exposure, variously, to smoking, bullying and substance misuse.

The CYPSC consultation with children noted that transition to secondary school is a key time of concern for children, particularly such vulnerable groups as Travellers, children from the Syrian

refugee families and children with learning difficulties. Older children raised the question of transition to secondary school, which was viewed with a mixture of anxiety and excitement. It was understood that this would have impacts on friendships and support networks, which offered some cause for insecurity. Refugee children were concerned that they would not have the supports that they require to help them integrate when they move from primary to secondary (*Bookle, 2016*). The successful negotiation by children and young people of these transitions is therefore critical to how they experience the next educational level. Actions addressing this issue are key preventative actions addressing school absenteeism and Early School Leaving.

Development of protocols and programmes to facilitate transition between pre-school and Primary School and between Primary School and Post Primary School has been very much left to local initiative until recently. The National Council for Curriculum and Assessment (NCCA) in collaboration with Early Years Ireland has recently developed a protocol for the transition from pre-school to Primary School. Tipperary CYPSC promotes and supports the implementation of the NCCA Transition protocols in the county.

Link to the Action Plan:

- Pre- development work re. linking pre-schools and Primary Schools to discuss implementation of Transition protocol.
- Adoption of NCCA Transition protocols
- To identify good models of 'Transition' support at Post-primary level and to share information through the National Association of Principals and Deputy Principals

Literacy Development:

Parental involvement in a child's education from the earliest age is widely recognized as a key influence in the child's engagement with educational process. Programmes that encourage and promote parental involvement are therefore key preventative actions addressing the issues of school absenteeism and Early School Leaving.

Link to the Action Plan:

- To support joint Library service and pre-school initiative to encourage parents to read bed-time stories to their children from infancy (Books for Babies/Bed-time Storytime Bag)

Education provision for Travellers

Children and young people from the Travelling community have access to the mainstream school system, but it has been recognized that they have not benefitted in terms of positive educational outcomes. The loss of the Visiting Teacher for Travellers post in recent years has meant the loss of a critical service and support for Traveller children and young people to engage with the educational system, with implications for their engagement with and participation in wider society.

In response to the concern about barriers and challenges faced by Traveller children in the mainstream school system, the Tipperary Rural Traveller project commenced an educational initiative for Traveller children, the Traveller Community Family Learning Programme, in Cashel in 2013. It was envisaged as an innovative approach to tackle educational disadvantage, using an approach that involved close co-operation between children, their parents, teachers and educational workers from the Traveller community. The educational model that was used has been evaluated. (*NEXUS Research*)

The aims of the programme were to:

- Improve the children’s attention & listening skills.
- Improve the children’s reading skills at sound and word level.
- Improve the children’s writing skills at letter and word level.
- Build an appreciation of reading through shared reading activities, which incorporate stories which are relevant to Traveller culture.
- Build the children’s confidence to engage fully in education and reach their full potential.

The children targeted were aged between 4 – 7 years and were drawn from Junior & Senior Infant Classes in a local Primary School. The sessions took place twice a week in the afternoon for 2 hours. Over the 4-month period, clear improvements were reported in the children’s sound recognition, word reading and letter and word writing. The initiative had to be suspended in 2016 due to lack of funding.

Link to the Action Plan:

- To deliver the Traveller Community Family Learning Programme in partnership with local schools. Dependent on available resources.

Language Barriers:

The issue of language acquisition was highlighted by the experience of the Syrian Refugee families, as expressed by the children and young people consulted. The parents of refugee children were identified as needing ongoing support to increase English language skills and to integrate into broader society. This also supports their children’s social, educational and emotional wellbeing (*Bookle, 2016*). The young people in the 13 – 18 years age group acknowledged that the language barrier was an issue for them as they were only learning English a short time, and “*Irish people speak so fast*” (*Brennan, 2016*). This is still acknowledged as a major difficulty for young people from the Syrian community, particularly as those aged 15 – 17 years are not eligible for the English for Speakers of Other Languages (ESOL) programme, delivered by Tipperary Education and Training Board. The Syrian Refugee families are not alone in facing the language barrier. Some 3,140 persons reported in the 2011 Census that they could not speak English well or at all (CSO, 2011).

Link to Action Plan:

- To research how many young people, aged 15 – 17 years, are affected by ineligibility for ESOL service, and to produce policy paper.
- To request provision by Department of Education & Skills for cluster of schools with young people who are facing this issue.

National Outcome 3: Safe and Protected from Harm

The key areas of need are identified as follows:

- Priority areas – Vulnerable Families
- Parenting Support
- Alcohol and Substance Misuse
- Social Media
- Bullying
- Domestic Abuse
- Welfare of Children, Young People and Adults

Family Support service provision

In terms of service provision deficits:

- Non-statutory family support services are often operating on limited resources in terms of the needs that they are faced with. This is particularly the case where they are the sole providers in the towns in which they are located. Both the plans of Roscrea Community Action Partnership and of Littleton Community Action Partnership, for instance, highlight the need for extra resources for family support in the respective towns. (*Tipperary County Council, 2015*)
- There are evident deficits in family support service provision in the North-West area of the county which has experienced significant population growth in the towns of Newport and Ballina and environs in the past 15 years. North Tipperary Community Services is the only agency in this area and has not sufficiently resourced to meet the growing needs. This situation may improve with the agency's successful application for funding to establish a Family Resource Centre in the first half of 2018. There also continues to be a lack of services in Cahir and in the South-West of the county, where the services of Clonmel Community Mothers Programme are dependent solely on Tony Ryan Trust funding for a limited period. In Clonmel, there is fragmented service provision due to varying remits, with no one service having a comprehensive remit to meet the totality of family support needs in the towns. In Carrick-on-Siúr, the remit of the sole family service provider is limited to families with children aged 0 – 5 years.
- There are no free community counselling services in relation to family support issues being provided in Carrick-on-Siúr, Cahir, Clonmel and Fethard in the South of the county or anywhere outside Nenagh in the North of the county.
- Between the North & South of the county, it is acknowledged that there is a disparity in relation to service development. This is most evident in relation to the establishment of 3 Family Resource Centres (FRCs) and 4 Community Development Projects (CDPs) in the southern part of the county, historically a pattern of service development which was not replicated in the North, although this has changed in recent times. The 3 FRCs and the Tipperary Rural Traveller Project CDP continue to operate while Knockanrawley Resource Centre remains contracted by South Tipperary Development Company to fulfil its former CDP social inclusion brief. The STDC continues to develop the community initiative in Carrick-on-Siúr which was initiated by Siúr CDP in that town.

Priority areas – Vulnerable Families

Secure stable families are the primary environment to ensure the safety and security of children and young people. Combinations of internal and external stresses and problems can affect a family's capacity to fulfil this role to the detriment of child welfare. Major stressors can be financial problems, as well as adverse and disadvantaged social circumstances.

In the Local Authority Local Economic and Community Plan (LECP), the CYPSC is tasked to identify the top Priority Areas where vulnerability to children is greatest and where service provision is limited. (*LECP, C&S 7.1 b & g*). In seeking to identify the priority areas in the county, we need to look at where social and economic conditions pre-disposing to vulnerability prevail and correlate these with the level of service provision available locally to address needs. The Pobal/Trutze/Haase index is clearly a starting point for identifying levels of Social Deprivation in the county. Its scores are arrived at as composite measures of levels of advantage or disadvantage at ED and Small Area (SA) levels

across a set of variables which include Age Dependency rate, Educational attainment, Employment status and Household type. Those scoring between -10 and -19.9 are designated as 'Disadvantaged', while those scoring ≤ -20 are designated as 'Very (V.) Disadvantaged'.

Some other indicators can also be considered such as the incidence and distribution of vulnerable categories of families, and prevalence of such social issues as family support needs and substance misuse, where these are recorded.

The basis for selection of the priority areas below, therefore, derives from the consideration of the level of needs on the one hand and of the adequacy of the relevant service provision to respond, on the other.

Because of the higher density of population in the towns, the profile of different aspects of social disadvantage and vulnerability is more evident than in rural settings. However, there are significant levels of social deprivation in rural areas around the county and these areas are also considered below on the same basis.

In terms of level of needs and insufficiency of service provision, the urban areas of main concern are Clonmel, Carrick-on-Siúr, Roscrea, Tipperary, Thurles and Nenagh. These towns have relatively high numbers of socially disadvantaged SAs, with correspondingly substantial numbers of the age group, 0 – 24 years, residing in them. In the cases of Carrick-on-Siúr and Tipperary, a little less than two of every three of this age group in the towns' populations comes from socially disadvantaged SAs, in the case of Roscrea, less than one in every two, and in the case of Thurles, almost one out of three.

Tipperary, Carrick-on-Siúr and Roscrea have higher numbers of SAs of 'V. Disadvantaged' status than the other towns, but pockets with similar levels of deprivation are also to be found in Clonmel and Nenagh. Clonmel and Carrick-on-Siúr have some of the highest numbers of socially disadvantaged SAs composed of $\geq 50\%$ of Lone Parent households, 9 and 7, respectively, followed by Tipperary with 5, then Thurles and Nenagh with 2 apiece. The Social Welfare Office (SWO) catchment area for Social Welfare purposes in which Thurles is located, which also includes Templemore and Littleton, has experienced the highest unemployment rates and has the highest number of child dependents of adult welfare recipients (*One Parent Family & Job Seeker*) than other such areas in the county. It also has the highest number of unemployed young people. The next highest levels of child dependency on welfare recipients are to be found in the respective SWO catchment areas in which Nenagh and Clonmel lie. Nenagh, Clonmel and Carrick-on-Siúr also have recorded some of the highest levels of Substance Misuse in the county, and it is a significant issue also in Thurles and Roscrea (*Tipperary Co. Co., 2015*). In relation to referrals to Túsla Child & Family services and Túsla Level 4 intervention, respectively, as indicators of family support needs, Clonmel, Tipperary and Carrick-on-Siúr have each had over twice the overall South Tipperary Túsla area average of referrals, while Nenagh and Thurles each had about 3 and 2½ times, respectively, the North Tipperary Túsla area average of children in care. Tipperary, Clonmel and Roscrea also have relatively high proportions of children in care, amounting to over four times the average, in Tipperary's case, and twice the average, in the case of the latter towns, of their respective areas in the South and North of the county. In terms of implications for resources, it is important to note that Small Areas with the highest youth dependency rates of over 60% were to be found in Clonmel, Carrick-On-Siúr and Nenagh. Furthermore, Roscrea and Nenagh have higher proportions of the age cohort, 0 - 4 years, with pockets as high as $\geq 15\%$ in the former town. Higher proportions of the age group, 13 – 17 years, than the county and national rates are also to be found in Roscrea, while proportions of the young adult cohort, aged 18 – 24 years, in Roscrea and Thurles exceed the county and national rates. For similar reasons, it is important to note that Clonmel and Nenagh have the highest number and 2nd

highest number of people, respectively, from the new communities in the county, in the case of Nenagh, accounting for slightly over one in five of the town's population.

In the light of the level of need highlighted here, the extent to which there is adequate service provision in each town must be considered:

- In Clonmel, family support service and youth service provision is quite under-resourced for the size of the town population and is limited in remit. There is also a need for resourced Level 1 Community Development services to outreach and engage with vulnerable families all around the town, beyond the boundaries of the residential estates under the RAPID programme.
- Family support service provision in Carrick-on-Siúr is quite limited with no agency providing a comprehensive Levels 2 & 3 service to the population of the whole town. Youth service provision has a remit for the town and there is a Community Based Drugs Initiative and a Garda Youth Diversion project, as well as some Level 1 Community Development activity under STDC auspices in one area of the town.
- Family Service provision in Roscrea is under-resourced. Reference to the need to make a case of extra resources for the existing service is included in the Roscrea CAP plan (*ibid.*). There is also reference to the need for a community development worker specifically to act as a support to community activity in Roscrea, namely, connecting and facilitating community groups and support for families on the ground. There is a youth service and a Garda Youth Diversion Project in the town.
- Family Support service provision in Nenagh is dependent on one sole provider and is acknowledged to be under-resourced for the level of need to be met, particularly as its remit extends well beyond the boundaries of the town. Youth service provision is relatively better resourced. There is also a Garda Youth Diversion project in the town. The Family Support service provider, referred to above, also delivers Level 1 Community Development services in one area of the town. The family support service provider in the town was successful in its application in 2018 for a Family Resource Centre.
- Family Support service provision in Thurles is very dependent on one provider for comprehensive coverage and would appear to be under-resourced for the needs of the population of the town and its environs. There is also a Community Mothers service in the town and a youth service. There are no Level 1 Community Development services in the town.
- Family Support services provision in Tipperary town is comparatively better resourced than in other towns, at Levels 1 – 3. There is also locally-based youth service provision, a Youth Diversion project and a Community-Based Drugs Initiative project in the town. Nonetheless, in view of the high levels of need in the town, there is a question as to sufficiency of service provision to address this. Certainly, it appears to have experienced a decline in social conditions since 2011, with a rise in the number of socially disadvantaged SAs from 14 to 17, and the proportion of the age-group, 0 – 17 years, living in these areas rising from 45.5% to 59%.

The rural areas with significant levels of social deprivation include :

- Littleton has one 'V. Disadvantaged' SA in which 107 of the age group, 0 – 24 years, reside, and a significant proportion of the population of the village are Travellers. The catchment area in which Littleton is located, and which includes Templemore and Thurles, has the highest unemployment rate in the county, 17.2%, as well as the highest number of child dependents of adult welfare recipients. The Littleton Community Action Partnership Plan noted issues of relatively high unemployment, few employment opportunities, and lack of public transport services for access to support services in local towns (*Tipperary Co. Co., 2015*). There is a Community Family Support service provided by Barnardos and youth service provision for Travellers and for younger children from the settled and Traveller communities.
- There are 6 'Disadvantaged' SAs in the North-West with a combined population of 461 in the 0 – 24 years age group, one in Newport and 5 variously in and around the settlements of Portroe, Borrisokane and Cloughjordan. The SWO catchment area which includes Nenagh has the 2nd highest unemployment rate, 15.56%, in the county, and the 2nd highest number of child dependents, respectively, of Job Seeker welfare payment recipients, and of all adult welfare recipients. (*Job Seeker & One Parent Family*). This area has higher proportions of the age cohorts that are currently 5 – 9 years, and 10 – 14 years, respectively, in Ballina and Newport than the equivalent county and national rates, as well as significant numbers of the same age groups in and around other rural settlements there. There is some family support service provision by the North Tipperary Community Service in this area, but no youth service provision.
- The Slieve Ardagh area, extending to include Killenaule and Fethard, has a total of 15 'Disadvantaged' SAs with a combined population of 1,096 in the 0 – 24 years age group (*CSO, 2016*). There is one 'Disadvantaged' SA in Fethard, composed of >50% of Lone Parent Households. Family Support service provision in this area comes from Millennium Family Resource Centre and Clonmel Community Parents Support programme, the latter being confined to Fethard. Relatively well-resourced youth service provision for Killenaule and Fethard has recently been established. Nonetheless, this has been an area of high need and appears to have experienced a further decline in social conditions over the period since 2011. There has been a rise in the number of socially disadvantaged SAs from 11 in 2011 to 15 currently, and a more general decline may be reflected in the increase of socially disadvantaged EDs in the area from 2 to 6 over the same period.
- There are 6 rural 'Disadvantaged' SAs in the West of the county, with a combined total of 420 children and young people, aged 0 -24 years.
- There are 4 rural 'Disadvantaged' SAs in the South West of the county, in Clogheen, Ballyporeen and Ardfinnane, specifically, with a combined total of 198, aged 0 – 24 years.

Availability of services for child and family support service provision in rural areas is minimal. The remits of services in most cases do not extend beyond the towns in which they are located.

In terms of considering the rural areas of most need therefore, these would appear to be Littleton, the Slieve Ardagh area (including Killenaule and Fethard), the North-West of the county, and the socially disadvantaged SAs in the West and South-West of the county.

Link to Action Plan and LECP Priority 7, Strategic Action, 7.1g:

- To identify in the CYPP the deficits in family support service provision in the county particularly in areas of high levels of social deprivation

Parenting Support:

Parents have the primary caring role for their children and there is a need to promote and support the enhancement of the quality of parental care in every way for better Safety & Security Outcomes. This includes promotion of Infant-Parent attachment initiatives, evidence-based parenting programmes, and the Parent Support strand of the Túsla Prevention Partnership and Family Support Programme. Currently, there are a range of parenting group programmes delivered across the county by different agencies working variously in the fields of Substance Misuse, Family Support, Youth, and Local Development. Tipperary CYPSC advertises these and other Parent Support services in an on-line calendar produced every quarter. Issues that have arisen in relation to parenting group programmes include:

- Difficulties in recruiting parents to attend such programmes: those agencies that have been most successful in this regard are those that have engaged with parents through individual parent support work initially to the point where the parents feel comfortable to graduate to a group programme hosted by the same agencies.
- Matching needs of parents with appropriate programmes: this does not relate as much to the range of generic parenting programmes that are already available, as to the availability of specialist programmes such as those targeting children with additional needs or in specific adverse circumstances. Often there is a resource issue as staff express the need for more training in order to be able to deliver the specialist programmes.

Link to Action Plan:

- To continue to produce the quarterly calendar of parenting supports & programmes
- To disseminate information on all parenting supports across Tipperary CYPSC area using CYPSC web-site and other on-line fora.
- To establish the parenting needs addressed by the current programmes and interventions and identify the gaps.
- To seek resources to roll out targeted supports to parents dealing with conflict/aggression from their children / adolescents in the home.
- To seek resources to support roll out of programmes for children affected by domestic abuse.
- To highlight the issues of children in families with Alcohol/Substance Misuse
- To promote and support the roll-out of the Túsla Parenting Support Strategy.

There is a need to look at the support needs of children in families where there has been a breakdown of the primary carers' relationship and where family access generates major stress.

Link to Action Plan and to LECP Strategic Action, 7.1j:

- To undertake research re needs of family access in Co. Tipperary

Alcohol & Substance Misuse

In relation to service provision addressing Alcohol and Substance Misuse, there appears to be a disparity in Alcohol and Substance Misuse service provision between the North and the South of the county. This is particularly evident in the development of the 3 community-based drugs initiatives (CBDIs) in the South of the county, of which there is no equivalent in the North. There has been close collaboration between the HSE Substance Misuse services in the South and the 3 CBDIs over the years and a more integrated approach has developed as a result. Furthermore, particularly in the cases of the Mid Tipperary Drugs Initiative in Tipperary/Cashel and Clonmel Community Based Drugs Initiative in Clonmel which have links with Level 2 youth service provision, the CBDIs are closely integrated with the areas in their respective geographical remits.

The issue of under-age alcohol consumption in the county is particularly insidious because the practice is rooted in socially acceptable behavioural norms. A report in 2004 by the Mid-Tipperary Drugs Initiative found that there was a problem primarily of alcohol misuse and that peer influence and relative ease of access to alcohol, in a context of cultural tolerance and in the absence of effective pro-active parental intervention or other counter-influences, facilitated experimentation at a young age, often leading to regular under-age consumption. In 2014, research on the prevalence of alcohol use among adolescents in North Tipperary and Limerick would appear to show that alcohol misuse remains a relatively unchallenged peer-driven socialization process, in which the mean age of alcohol consumption is 13 years of age for both girls and boys, and the average pattern of consumption is on a regular weekly basis. (ref. in *National Institute of Health Sciences Research Bulletin, Jan 2014*) Drinking for social reasons, to feel more relaxed and liking the taste, were reported as the main motives for drinking. Recent reports from the Community Based Drugs Initiatives (CBDI) in Clonmel and Carrick-on-Siúr (2014 & 2015) also identify under-age drinking as a major concern, highlighting:

- The easy access to alcohol by young people, with off-licenses not always looking for identification of age eligibility, adults purchasing alcohol on behalf of young people, and young people resorting to 'distance purchasing' of alcohol. Young people are also able to access it in the family home.
- Regular engagement by groups of young people in 'street drinking' at weekends, leading to anti-social behaviour.

The CBDI reports also highlight local patterns of misuse of other substances, with particular reference to the popularity and availability of benzodiazepines, cannabis, Heroin, Cocaine, Speed and Ecstasy. They also identify an increase in the phenomenon of poly drug use, which, depending on the combination of substances consumed, can have potentially lethal consequences. Alcohol is often a staple element of poly drug use and consumption of alcohol with benzodiazepines is reported as being particularly common.

The CYPSC consultation with young people, aged 12 – 18 years from a range of backgrounds and circumstances that made them vulnerable to Social Exclusion found that Substance Misuse was the most urgent health issue for them. In terms of substances consumed, cannabis, cocaine and alcohol emerged as the drugs of choice for Tipperary's youth. Binge drinking and intoxication to the point of risk of serious bodily harm was reported as commonplace, often linked to reckless and anti-social behaviour. Cannabis use was reported by the young people as being without health risks or addictive features. Yet it was evident from some of the feedback that there were instances of dependence on this particular substance, where it adversely affected motivation to participate in sporting and other positive communal activities, and served as a gateway drug leading to the use of more serious drugs.

In engaging in Substance Misuse, young people reported being able to access drugs on 'tick' (on loan), and thus being regularly enmeshed in financial indebtedness to drug dealers which could have serious personal consequences for them if the money was not paid (*Brennan, 2016*).

Alcohol, Substance Misuse and Addiction were the most common health concerns identified by respondents in two separate CYPSC consultations, respectively, of young men involved in the Justice system, and young adults engaged with the Túsla After-Care service. The CYPSC consultation with parents found that those who with children in the 13 – 17 years age group and 18 – 24 years age group, respectively, collectively ranked Drugs & Alcohol consumption as the major health concern after Mental Illness (and Anxiety & Stress, in the case of the former). This view was also reflected in the CYPSC on-line survey of LIT students (*McMahon & Keating, 2016*).

Suggestions from the young people to address the issue of Drugs & Alcohol Misuse included:

- Ensuring easier access to appropriate services, including counselling in a Drop-In setting
- Preventative measures such as awareness raising programmes targeting younger children, promoting involvement by children and young people in sporting activities.
- Provision of alternative constructive activities for young people to engage in: youth clubs, sporting activities, training & employment opportunities.
- Provision of credible interactive educational programmes in school settings around issues of Alcohol & Substance Misuse. (*Brennan, 2016*)

Link to Action Plan:

- To identify Alcohol & Substance abuse service provision deficits around the county and identify actions to address these.

The excessive consumption of alcohol at under-age level and among young adults is widely recognized as a serious issue. It is not one that is amenable to simple resolution and needs the joint commitment of more than one agency and of other relevant stakeholders to address it in determined fashion. There is possible scope for an Early Intervention action by key stakeholders at local level.

Link to Action Plan:

- To pilot a community-based protocol around minimising access to alcohol for teenagers and to monitor level of success.

There is also a need to promote the implementation of programmes which positively engage with young people in relation to Alcohol/Substance Misuse, as identified by themselves above.

Social Media:

Technological development in a very short span of time has led to the mobile phone, from being primarily a phone, becoming a sophisticated medium both for instant communication and for untrammelled access to the Web. The ubiquitous unmediated access to the Internet that children and young people can have through their mobile phones has thrown up a lot of concerns for adult caregivers. With children introduced at younger ages to the new technology, they tend to become adept in its use in ways that often leave the adult carers struggling in their wake and at a loss to adequately supervise the social media content to which the children have access. As well as the physical health issue identified by the GUI research, in which a direct link has been identified between average daily 'screen-time', calorie intake and BMI status for children as young as 5 years of age, concerns also abound on exposure of children and young people to unsuitable material on

the web and how this can be addressed.

The concerns in relation to Social Media are most evident among the parents who participated in the CYPSC on-line consultation. Three-quarters of the respondents agreed that children and young people are exposed to unsuitable material on social media. One comment highlights the 24/7 access to social media and its adverse impact on emotional wellbeing and physical health, as young people spend time on their phones instead of being physically active. Another comment highlights the hazard of posting statements on social media without due thought about consequences of their public exposure on the Internet. The need for education for both parents and children was the suggested approach to address the concerns about Social Media, with the education taking the form of a programme targeting children, and workshops targeting parents.

The issue of safety for children and young people in relation to Social Media was also identified by staff in service provision. Concerns were expressed about cyber-bullying, inadequate parental supervision due to lack of awareness, exposure of children and young people to sexual exploitation, and the need for education in the area.

The CYPSC consultation with children, aged 5 – 12/13 years, found that the older children were aware of cyber-bullying. There was also an awareness of the risks posed by social media and the need to be safe on-line (*Bookle, 2016*). For the age-group, 12 – 17/18 years, there was an awareness of bullying in cyber-space, but it was not perceived as the arena in which it was most prevalent (*Brennan, 2016*). Cyber-bullying was also identified as one of the things that make young people feel scared and unsafe in responses from the sample of young adults in the Justice system and in Aftercare, respectively.

The CYPSC recognizes the need to equip parents and other responsible adults with the information and knowledge to ensure appropriate and beneficial use of social media by the children and young people in their care. There is also a need to educate children and young people and to raise their awareness about the risks to which they can be exposed on social media.

Link to the Action Plan:

- Promotion of National Internet Safety Day
- To review existing guidelines on safe and healthy Internet use and to disseminate through appropriate networks.
- To promote webwise.ie and other resources for parents.
- To support Comhairle na nÓg to implement Cyber-Bullying and Internet Safety priorities.
- 1 County-wide “Internet Safety” conference and/or awareness-raising event developed and delivered in partnership with young people.

Bullying:

Bullying continues to be a key issue of concern for children and young people. The children, aged 5 – 13 years, who were consulted spoke about its prevalence, particularly in the school setting. Its impact and fears about its occurrence were mentioned consistently throughout the consultation were process. Older children are particularly aware of cyber-bullying (*Bookle, 2016*).

The consultation with the young people in Secondary School also highlighted concerns in relation to bullying. After the issue of school, bullying surfaced as the most frequent answer to what makes young people feel scared. Answers reveal that bullying is occurring in a number of places including

cyberspace, however, school appears to be the most frequent venue for this behaviour (Brennan, 2016).

Focus group participants in the same age-group provided an in-depth exploration of bullying and many reported either experiencing it or witnessing it frequently within their schools. *“You see it every day. There is always someone shouldering or pushing around someone”*. This regularity has prompted young people then to feel as if they have to prove themselves in order to avoid being a target for bullies. *“In our school you have to be able to stand up for yourself. It’s a dog eat dog world. If you back down, you are going to be hounded”*. Unfortunately, not all young people have developed the ability to ‘stand their ground’ and reported suffering at the hands of bullies and ultimately either left or changed schools to escape the persecution. The bullying itself ranged in methods from verbal abuse to isolation, with violent incidents recounted by some participants (*ibid.*).

Young people with Special Educational Needs (SEN) also reported experiencing bullying based on their attendance at a Special Needs School. They felt they were often targeted based on their special needs (*ibid.*). Some young people reported that LGBT* young people can have a hard time in school, can be bullied over their sexual orientation and that LGBT* young people are forced to answer queries about their sexual identities that can make them feel uncomfortable or exposed. Young LGBT* people in one focus group discussion revealed that sometimes school can feel like an arena that is emotionally unsafe for them. *“Nobody means anything but everyone takes the p** out of you. Some people take it way too far”* (*ibid.*).

A National Action Plan on Bullying was launched in January 2013 by the Minister for Education & Skills and the Minister for Children & Youth Affairs which included proposals to develop new national anti-bullying procedures for all schools. All schools have subsequently developed such policies. In the light of the continuing prevalence of Bullying in school settings, however, there is a need to consider pro-active Anti-Bullying strategies to address this.

The impact of bullying on Mental Health & Wellbeing is acknowledged in the ‘*Connecting for Life*’ strategy under Goal 3 with the action, ‘*To implement the National Anti-Bullying Action Plan including online and homophobic bullying*’.

Link to Action Plan:

- CYPSC will seek to promote implementation of the Action Plan on Bullying
- To up-date and re-print the Comhairle na nÓg booklet on Bullying for distribution

Domestic Abuse:

In terms of the prevalence of Domestic Abuse nationally, it is estimated that 15% of women and 6% of men have experienced severely abusive behaviour of a physical, sexual or emotional nature from a partner at some time in their lives (NCC & ESRI, 2005). It is noteworthy that those who have ever had children face over three times the odds of severe abuse compared to those without children.

There is also a correlation between increased risk of abuse and isolation from close family and neighbourhood supports: the odds of having been severely abused are slightly higher (27%) in urban than in rural areas and are 76% higher for those born outside Ireland (most of whom are other Europeans) than for those born in Ireland.

Domestic Abuse was identified as a significant issue by staff in service provision in Co. Tipperary who were consulted in 2016, with suggested actions including raising awareness among young people in

schools, providing a therapeutic service for children exposed to Domestic Abuse, and supporting the formation of peer support groups for women.

There is a concern for children and young people living in circumstances where there is Domestic Abuse. At the very least, exposure to it can be a form of emotional abuse and in some cases, the children and young people can themselves also experience physical abuse. The impact of witnessing Domestic Abuse on children and young people leads to fear, sadness, anger, powerlessness, development of health problems, educational difficulties, as well as adversely affecting relationships with abusing parent, non-abusing parent, siblings and peers. The most common impact identified by children themselves was the fear and intimidation they felt on an almost daily basis, resulting in behavioural problems and aggressiveness.

Túsla Child Protection services can intervene in cases of the emotional and physical abuse of children in circumstances of Domestic Abuse. As noted in Section 3, there are Women's services in the North and South of the county, respectively, providing advice and support to women and children who have experienced or are experiencing Domestic Abuse. TLC Kidz is a relatively recently introduced programme for children and their mothers in these circumstances, run by Barnardos and which needs to be resourced to be sustainable.

Link to Action Plan and LECP Strategic Action 7.1i:

- To seek resources to support roll out of programmes for children affected by Domestic Abuse

An emergent concern has been the phenomenon of children and young people displaying patterns of intimidatory and aggressive behaviour, including violence, towards their adult carers. What is termed Child-to-Parent Violence (CPV) can be defined as an act carried out by a child or young person with the intention to cause physical, psychological, or financial pain or to exert power and control over a parent. In this way, it can resemble Domestic Abuse and can have the same impact on the adult carer. The research indicates that it is mainly mothers who experience CPV and mainly sons who use physical violence, but that daughters can also be violent to parents and that fathers can also be targeted. A history in families of domestic violence/sexual abuse, substance abuse, learning difficulties and /or mental health problems can be a precursor to manifestations of CPV behaviour.

Link to Action Plan:

- To seek resources to roll out targeted supports to parents dealing with conflict/aggression from their children / adolescents in the home.

Young people leaving care

Young people who have been placed in alternative care and subsequently need to leave their carers on reaching majority at 18 years have particular issues around their safety and security because of their circumstances. In the CYPSC consultation with a sample of young people in the After-care service, their responses to what concerns affected their sense of security and safety included lack of support from family and other significant adults, family difficulties, bullying, worrying about current circumstances and future prospects, and having to conform to anti-social group behaviour with a set of peers. As noted earlier, young people who have experienced state care are particularly vulnerable to early sexual experiences and teenage pregnancy.

As well as the provision of an After-Care support service to young people leaving care, Túsla has been charged to set up a Local After-Care Steering Committee in each Túsla Area. The aim of the Aftercare Steering Committee is to provide a forum to ensure that there is an enhanced inter-agency partnership approach to meet the needs of young people leaving care and aftercare. The Aftercare Steering Committee is chaired by Túsla and includes all key services providers who work with children and young people in care and aftercare.

The After-Care Committee will report on a regular basis, to be determined, to the CYPSC.

Link to Action Plan:

- To support the development of After-care committees in the North and south of the county.

Welfare of children, young people and young adults:

The CYPSC supports the following policies & programmes to improve safety and security outcomes for the age group, 0 – 24 years, namely:

- Prevention, Partnership and Family Support / Local Area Pathways programme: The PPFs/LAP Steering Committees in the North and South of the county, respectively, constitute Sub-Groups of CYPSC.
- Child Protection legislation

National Outcome 4: Economic Security & Opportunity

The key areas of need are identified as follows:

- Opportunities for young people not in education, employment and training (NEETs)
- Opportunities for young Travellers
- Opportunities for young people with additional needs

NEETS

The CYPSC consultations with young people and young adults at risk of social exclusion reflect the sense of economic precariousness that many of them experience.

In the CYPSC consultation with children at risk of Social Exclusion, they showed a high level of awareness of the challenges of paying bills and the domestic stress that this can cause, of the economic downturn in recent years and its adverse impact on employment for adults that they know, and of the plight of such vulnerable groups as homeless people in these adverse economic conditions (*Bookle, 2016*).

For the young people at risk of social exclusion, aged 12 – 18 years, concerns under this outcome included lack of money to pay for basic necessities, or for illicit substances, in some cases. Where they were receiving some income on an Alternative Learning programme, its inadequacy for them to consider leaving the family home to live independently was an issue. This group also expressed concerns about perceived barriers to employment that they might experience because of their background or circumstances. Some considered that prospective employers would judge them on the basis of a history of criminal charges, others on the basis of coming from the Traveller community, and some on the basis of coming from a residential school. For one group attending a Youthreach Centre, the concern was about the extent to which their qualifications would secure

them adequate employment in a context of strong competition in the job market. Young adults, aged 18 – 24 years, in this category spoke of their pessimism of finding employment after successive rejections, in some cases leading them to give up on looking for work (*Brennan, 2016*).

For young adults, aged 18 – 24 years, in the justice system, the main financial concerns related to the inadequacy of their income, whether from low-paid employment or from Social Welfare, to meet their basic accommodation and living costs. For the young adults in After-care, the lack of job opportunities to earn an income was the main issue, and for one or two, the lack of money impacted on their need to pay college-related costs. For both groups, lack of employment opportunities, low educational attainment levels, and lack of relevant qualifications and of prior work experience were considered to be the main obstacles to finding work. For the young adults in the justice system, previous history of criminal charges and one's social background were also considered factors.

To improve employment prospects, there was a range of suggestions made including:

- Lessening the emphasis on academic performance in school and engaging educationally with the range of different skills and abilities which young people exhibit.
- Equipping students with skills to improve work readiness.

The issue of long-term youth unemployment in its member states was recognized at EU level by the adoption of a Council Recommendation to member states on a Youth Guarantee in 2013. The aim of the EU-wide Youth Guarantee, supported by central EU funding of €6 billion, is to provide young people under the age of 25 with a good quality offer of employment, continued education, an apprenticeship or a traineeship within a short time of becoming unemployed.

As a consequence, the First Steps programme was re-launched by the Department of Employment Affairs and Social Protection (DEASP) in February 2016, followed by the Youth Employment Support Scheme (YESS) in June 2018. The aim of the latter scheme is to provide young adults, aged 18 – 24 years who are unemployed for 12 months or more, or who are faced with significant barriers to unemployment with the opportunity to learn basic work and social skills in a supportive environment while on a work placement.

Currently, a small number of programmes, adopting a youth work approach, are designed to engage with young adults who are not in education, employment or training. The Work Winner project, run by Youthwork Ireland Tipperary (YWIT) works with disadvantaged young people disconnected from any supports and who lack opportunities to take up any employment or educational opportunities. Through a youth work model of engagement, they participate in an individualized programme of work experience and training to facilitate transition to mainstream work or training.

The CYPSC will work with the DEASP, YWIT and other stakeholders to support the development of such initiatives that facilitate NEETs to transition into paid employment.

Link to Action Plan:

- To replicate and support existing successful projects such as 'Work Winners' in those areas that have high levels of youth unemployment

Young Travellers

The families of the Travelling community are particularly exposed to economic insecurity and lack of economic opportunity because of their social circumstances. Generally, the majority of Travellers are unemployed and are dependent on social welfare payments. Barriers to Travellers accessing the

mainstream labour market include educational standards, lack of role models and discrimination. The conditions of economic recession and associated cutbacks in government spending have also adversely affected outcomes for Traveller children and young people. The downturn in the economy has reduced opportunities for Travellers for income generation (*National Traveller MABS Pre-Budget submission, 2013*).

The challenges faced by young Travellers in education and the school system have already been highlighted above. In relation to access to the job market, young Travellers who were consulted identified their ethnic identity and social circumstances as being major barriers. In the words of one of these: “*I wouldn’t say I will get a job over being a Traveller*” (*Brennan, 2016*). While a significant number attend Training Centres in the county, there appears to be a need for an initiative to specifically target young adult Travellers to improve their work-readiness.

Link to Action Plan:

- To support a Youth Employability programme or similar programme to target young Travellers

Young adults with additional needs

Another group of young people who face barriers to achieving economic independence are those with additional needs. The unemployment rate of people with disabilities aged between 18 and 24 in County Tipperary is generally high: it was 60.7% at the time of the previous census (*CSO 2011*). Their options are limited and, in the CYPSC consultation with young people, some young people with additional needs spoke of their worries about the challenge of accustoming themselves to new situations, particularly in relation to a transition from Special School. A focus group of young people attending a special needs school expressed the same concern already noted above in relation to another group of young people at risk of social exclusion: that their qualifications would not be enough to secure them adequate employment (*Brennan, 2016*).

The need for initiatives to support young adults with additional needs to progress from school to work has already been recognized by the launch of the ‘national ‘Ability’ programme in 2018.

Link to Action Plan and LECP Strategic Action 10.1a:

- To support a pilot project to facilitate young people with additional needs to transition to appropriate work settings.

National Outcome 5: Connected & Respected

The key areas of need are identified as follows:

- To enhance the social lives of children and young people with additional needs
- Supports for LGBT* youth
- Children and youth participation
- Integration of Syrian Refugee families
- Play
- Youth service provision deficits

Children and young people with additional needs

Opportunities to play and to make friends were identified by children, aged 3 - 13 years, as being highly important in their lives (*Bookle, 2016*). However, feedback from children and young people with additional needs highlights the barriers and challenges that they face to avail of such opportunities.

Nationally, children with a disability and/or chronic illness were found less likely to report having three or more friends of the same gender (*SONC, 2016*). This was reflected in the responses from the CYPSC consultation in which children with disabilities spoke about feeling very isolated outside of school and lacking adequate opportunity to engage socially with other children. This was particularly the case because of a lack of access to clubs, or clubs with appropriate facilities. Relatedly, children with disabilities were much more dependent on information technology for play and felt it played a more central role in their lives (*Bookle, 2016*).

The CYPSC consultation with young people, aged 13 – 17/18, also found that those with special needs had little or no opportunity for social interaction with peers outside school. Those of them who lived in rural settings felt particularly cut off from the leisure and social opportunities that might be accessible to them in an urban setting (*Brennan, 2016*). This isolation is often also experienced by parents and families of children with Special Needs, consumed as they can be by the demands of care, as reflected in the following comment:

'Friendship clubs for children with ASD could be established to support both children and parents. Living in a rural area is very isolating when you are on the spectrum because of a lack of access to clubs, or clubs with appropriate facilities.'

Other socially inhibiting factors identified by young people with additional needs included feelings of stress and anxiety around exposure to new unfamiliar situations, preventing them from joining clubs or activities outside school, and, in one specific case, exposure to taunts for being associated with a Special School.

There are few social leisure facilities outside the Special schools which would cater specifically for children and young people with additional needs. As a measure to raise awareness on this matter, the CYPSC will undertake an audit of current provision.

Link to Action and LECP Strategic Action 5.1h:

- To undertake an audit of social events/clubs that can be accessed by children and young people with additional needs and to identify actions to be progressed.

Supports for LGBT* youth

Academic under-achievement, Early School Leaving among LGBT youth and homophobic behaviour directed towards them in the secondary school setting are recurring issues highlighted by research on young LGBT young people in Ireland (*Kavanagh & Duane, 2014*). The CYPSC consultation carried out at county level with LGBT* youth highlighted the social isolation and alienation that they experience (*Brennan, 2016*). LGBT young people reported that they can have a hard time in school, be bullied over their sexual orientation and that they are forced to answer queries about their sexual identities that can make them feel uncomfortable or exposed. In other words, school was an arena that was emotionally unsafe for them (*ibid.*).

For trans-gender youth, the dominant binary gender, male/female, conceptual framework affects their ability to participate in society. This was evident in the CYPSC consultation, where, in one case,

the Trans-gender young person was not allowed to participate in sport activities with peers of the gender with which the young person identified. In another case, there was a difficulty when seeking employment where the young person had to explain a change of name from that on the birth certificate. Ultimately, trans-gender young people are constantly faced with the challenge of trying to inhabit the gender they identify in a non-supportive wider societal environment. *“Imagine if you were born in a body you felt wasn’t yours and then nobody would respect your choice to try to change it” (ibid.).*

The need for wider education around LGBT, and in particular, the Transgender experience was highlighted in the consultation. The Trans-gender youth felt that while schools may educate young people around sexuality and being homosexual, there is little covered about being born Transgender.

The ‘Supporting LGBT Lives’ study notes that parents, families and friends play a crucial supportive role in facilitating LGBT* youth to acknowledge their gender identity. It notes that schools have an important role in protecting and supporting LGBT* young people. It also highlights the importance of the role that can be played by youth services and family support services in providing supports (Mayock, et al., 2008).

There is a need for supportive awareness in the community and among service providers engaging with LGBT* of their circumstances and for adequate resources for appropriate service supports.

Specific supports for LGBT* young people in the county are provided by youth services, with two of these, Youthwork Ireland Tipperary and the North Tipperary LEADER Partnership youth service, each hosting a support group. However, resources available to sustain these supports are minimal.

Awareness raising and training in relation to LGBT identities in the county is being undertaken by the Clonmel LGBT project and the South East HSE Social Inclusion Unit but resources to do this are limited.

Links to actions and to LECP Strategic Action 6.1d:

- To support awareness raising and training re. LGB and Transgender identities and issues, targeting staff and the public
- To contact schools and to DES to request inclusion of LGBT awareness in school curriculum
- To support the adequate resourcing of LGBT supports around the county.
- To support coordination of these supports
- To support research to ascertain the extent, needs and requirements of LGBT youth
- To highlight activities of the group on CYPSC web-site

Children & Youth Participation

The process of facilitating and educating children and young people to be active participants in and contributing positively to community and society begins in family relationships as far back as Early Childhood. Recent Irish research on the experience of participation by children and young people in the family home found that there was evidence to suggest that children and young people were happy, for the most part, with their level of participation in family decision-making and personal autonomy in relation to key areas of consumption activities, leisure and friends (Horgan, D. et al, 2015). The Horgan report also notes that the teenagers in its sample have greater autonomy and independence at home than younger children. However, in relation to levels of participation in school settings, it states that in spite of the establishment of formal representative structures, such as student councils:

'it is clearly evident that most children and young people who participated in this research were generally dissatisfied with their level of input into decision-making processes in school. They had very low expectations of schools being participatory sites and recognised that they had little say in anything apart from peripheral matters in school.' (ibid.)

The CYPSC consultations had some interesting findings about the views of children, young people and young adults about barriers to participation:

- Older children frequently expressed the view that their parents, and adults in general, do not respect their opinions or seek them often enough. They also felt strongly that they are often not enabled to be independent, walk to meet friends or to be out late (*Bookle, 2016*).
- In relation to participation in the community setting, of the young people, aged 12/13 – 18 years, who were consulted on-line, 24% said that they were not listened to, 17% said that they were and the remaining 59% were unsure. Where young people were listened to, it was most often in Youth clubs, Student Councils, Comhairle na nÓg and other such youth participation structures (*Brennan, 2016*).

For young adults, youth groups and clubs were perceived as being the settings in which there was most scope for being listened to and for having one's say. Involvement in sports organizations and events was also seen as offering somewhat similar opportunities of being heard. This was less the case for voluntary organizations and while a substantial minority felt there were opportunities to be listened to and to have their say in the 3rd-Level education setting, more of the respondents did not agree. Most also felt that they would not be listened to by local voluntary committees; in relation to community planning; by the Church; or by the Local Authority (*McMahon & Keating, 2016*).

- A majority of young people stated that not all young people in the community are treated equally, identifying those from the Travelling community, those from different backgrounds and cultures to the native Irish, those with disabilities and those who come from economically disadvantaged areas, as the discriminated categories (*Brennan, 2016*).
- The vast majority of the young adults, aged 18 - 24 years, who were LIT students, agreed with the statement that a young adult's family circumstances, religion, ethnic background, sexual orientation, financial status or disability could have an adverse impact on his/her progress in education (*McMahon & Keating, 2016*).
- Not surprisingly, the views of the majority of young people and young adults at risk of social exclusion concurred with those of their peers above.

At government level, policy is being developed to promote and support meaningful participation by children and young people. The 4 priority objectives of the National Strategy on Children and Young People's Participation in Decision-Making, 2015 - 2020 (DCYA) state that:

1. Children and young people will have a voice in decisions made in their local communities.
2. Children and young people will have a voice in decision-making in early education, schools and the wider formal and non-formal education systems.
3. Children and young people will have a voice in decisions that affect their health and well-being, including on the health and social services delivered to them.
4. Children and young people will have a voice in the Courts and legal system.

Tipperary CYPSC promotes the participation by children, young people and young adults at local level.

Link to Action Plan:

- Develop a consultation strategy for the CYPSC
- Ensure that all CYPSC Sub-Groups consider how to listen to the views of children, young people and parents.

At county level, the Comhairlí na nÓg are local councils for children and young people, aged 12-17 years, that give them a voice on the development of local policies and services. They are the recognised structure for participation by children and young people in decision-making in all 31 local authorities and are supported by the Department of Children and Youth Affairs. Members of each Comhairle are elected at an AGM for a two-year period and half of the membership of the Comhairle is rotated from year to year. In Tipperary, the Comhairle is recognized to be a vibrant active forum with some 40 members elected from across the county. Particular attention is paid to the elective process to ensure participation by a wide range of young people of every social category and to ensure a representative composition on the Comhairle. It is significant in relation to the empowerment of the young people on the Comhairle, that the Coordinating Body of the Comhairle, as a youth service provider, undertakes its role informed by a youthwork ethos and principles. As well as meeting together at Comhairle meetings, the Comhairle members also meet in smaller local Working Groups in their respective Municipal District Areas to pursue specific projects addressing themes and issues identified at the AGMs. The Comhairle is seen as representing the voice of young people in the county and, consequently, has been requested to assign members on to a number of committees, and is also asked regularly to make presentations on its work.

Tipperary CYPSC has been engaging with Tipperary Comhairle na nÓg as the representative body for young people in the county. It has been working to facilitate regular attendance by Comhairle representatives its meetings.

Link to Action Plan and to LECP Strategic Action 5.1e:

- To continue to formalise & strengthen the role of Comhairle na nÓg in CYPSC by facilitating the Comhairle to send a representative to CYPSC meetings and to have an opportunity to send a delegation to meet with CYPSC once a year, at minimum.

Volunteering provides opportunities for young people to take on a positive productive role in their communities. It is a way of gaining new experience, learning new skills, making new friends and contributing to building social solidarity, as well as being personally rewarding. Through the Volunteer Centre and through national and international programmes, there are many opportunities available to become involved in volunteer activities.

Link to Action Plan and LECP Strategic Action 5.1b:

- To promote and highlight opportunities for young people to engage in volunteering activities

Syrian Refugee families

Some 12 Syrian families, official refugees from the ongoing Civil War in their country, were settled in Thurles under the state-funded Refugee Resettlement Programme in 2014. Resources were allocated in the first two years to facilitate the integration of the families into the local community, including the assignment of a Refugee Resettlement Officer through North Tipperary LEADER Partnership (NTLP). The Refugee Resettlement Officer worked with the Thurles Resettlement Interagency Working Group to provide day to day support to the families, to advocate for them, to assist service providers to identify and address gaps in service provision to them. Much good work

has been done over this period, including a big emphasis being put on building up social connections with the host community. For the children, a Homework Club was set up and run by the NTLP.

Children and young people from this small Syrian community who participated in the CYPSC consultation process were particularly appreciative of the efforts made to assist them to settle. The acquisition and provision of books in Arabic through the Thurles library branch was viewed very positively by the children. Similarly, the experience of attending secondary school was found by the young people to be very positive: they reported receiving support from school staff and said that students had been welcoming and friendly. They were also able to avail of resources to assist them settling into their new school lives.

The consulted children and young people also highlighted issues for their families which could adversely affect their integration into Irish society. The parents of refugee children were identified as needing ongoing support to increase English language skills and to integrate into broader society. This also supports their children's social, educational and emotional wellbeing. The young people in the 13 – 18 years age group acknowledged that the language barrier was an issue for them as they were only learning English a short time, and "*Irish people speak so fast*". This is still acknowledged as a major difficulty for young people from the Syrian community, particularly as they are not eligible for the ESOL (TETB) service. The Syrian young people also felt that Ireland is a very expensive place, particularly in relation to their home country. In particular, they were worried about the price of insurance in Ireland should they wish to start driving.

The CYPSC consultation report on the children of primary school age commented:

'The refugee children interviewed highlighted that while they are largely very positive about life in Ireland, the complexities that they experience should not be underestimated. Their resettlement in Tipperary is relatively recent. In this time all aspects of their lives have changed. The importance of ongoing commitment to support the integration of these children and their families is required. This will ensure that their ability to fully participate in all aspects of life in Tipperary is secure and that this transition is fully supported.'

However in 2016, the Refugee Resettlement programme ended on reaching the end of its two-year span. There were no further resources for the key post of Refugee Resettlement Worker which was terminated. Such vital services as the children's Homework Club were at risk and there was and continues to be concern expressed that the integration process may have stalled.

It is important to sustain the integration process for these families and the investment of the necessary resources for this. The CYPSC endorses the continuation of the Local Authority-led inter-agency coordinating structure and the re-installment of an Advocate Support Worker to work on the families' behalf.

Link to Action Plan:

- To support the Inter-agency Committee overseeing the re-settlement project to allocate the resources to meet the needs of the families

Play

One of the key messages from the research underpinning the development of the Aistear curriculum framework is the importance of play for the multi-faceted development of the child. Play can be exploratory, constructive, creative, fantasy, socio-dramatic, physical and verbal.

Another key message is the adult's important role as a facilitator and enabler of creative play for children at different ages (*M. Kernan, NCCA, 2007*).

The importance of play for children was particularly evident from the CYPSC consultations with the children, aged 3 – 13 years.

In the CYPSC consultation with the pre-school children, their responses highlight their association of the pre-school with opportunities to play, the availability of toys and play equipment inside and outside, and the organization of activities by the childcare staff in which the children voluntarily engage and from which they derive satisfaction.

In the consultation with the children, aged 5 – 12/13 years, they consistently highlighted playing, sports and activities as among the best things about being a child in Tipperary. All of the feedback demonstrated the importance of children's participation in:

- Organised sports such as soccer, hurling, Gaelic football, athletics and swimming
 - Dance
 - Gymnastics
 - Playing games and general play
 - Going to parks and playgrounds
- (Bookle, 2016)*

This was mirrored by responses in the online survey where 46 (46%) of respondents said that the best thing about being a child is that there are lots of places to play and be active in Tipperary.

Traveller children consulted particularly highlighted the importance of outdoor activities and playing outside. In contrast, children with learning difficulties did not stress the importance of outdoor play and activity as strongly.

Not surprisingly, children highlighted their use of technology (tablets, PlayStations, X-Box, phones) as important ways to fill leisure time. This was particularly highlighted by children with disabilities.

The children often mentioned the importance of playing with and having fun with their parents. However, a common complaint was that parents were often too busy to do this.

In relation to play, one suggestion was for playgrounds catering for older children, as the latter felt that existing play facilities were designed only to meet the needs of children up to the age of seven or eight years. One of the recommendations of this CYPSC consultation report is that Tipperary CYPSC needs to consider the infrastructure, supports and services that will enable children across the county to play in both structured and unstructured ways, with particular consideration given to supporting older children to continue to play and supporting children with disabilities to play within their own communities (*ibid.*).

Link to Action Plan:

- The CYPSC to consult as appropriate in relation to the Local Authority Playground policy and to seek to ensure even playground provision across the county and its inclusivity of all children.
- To support piloting a programme for parents and children around the importance of play.

Youth service provision

Youth work plays an important social educational role in *'offer(ing) young people , on the basis of their voluntary involvement, developmental and educational experience which will equip them to play an active part in a democratic society, as well as meeting their own personal developmental needs.'* (Costello Report, 1984). There is already evidence cited above of the extent to which young people and young adults feel listened to in youth service structures in contrast to other structures and agencies.

The research undertaken for the service provision audit highlights the service deficits and the dearth of youth service provision in areas of the county.

- The SPY projects, in some cases one-worker projects, are not adequately resourced to meet the needs. This is effectively acknowledged by virtue of the increased resources made available to the recently established pilot DCYA-sponsored youth projects.
- There is a stark lack of youth service provision, with the exception of the Foróige project in Nenagh, in the North-West of the county. The need is particularly pressing in view of the higher proportions of children and young people in that area than the equivalent county rates. The Nenagh Municipal District has the highest Youth Dependency rate in the county (AIRO, 2017)
- There is a lack of service provision catering for children and young people with additional needs.

Link to Action Plan and LECP Strategic Action 5.1c:

- To highlight the need for more youth service provision, particularly in those areas where there are gaps, in the CYPP
- To advocate for resources for youth services

There is a need to consider sustainable targeted youth service provision for Travellers. The young Travellers consulted themselves suggested the need for a space where they could share their views on the basis of a common cultural and social experience: *"Get groups of Travellers together. More people will understand how people are feeling and how they don't feel"* (Brennan, 2016). The model practised in the Young Travellers Mental Health Improvement Programme, led out by the Tipperary Rural Traveller Project, highlights the effectiveness of youth work methodologies on a basis of trust and of a common social and cultural experience to address such key issues for young Travellers as self-esteem, mental wellbeing, inter-personal relationship skills, as well as the wider social challenges that they face. The programme has been evaluated with positive conclusions (Atwell, 2017). However, it is not in receipt of mainstream funding and is not sustainable if not adequately resourced.

Link to Action Plan:

- To support initiatives providing youth services targeted at young Travellers, dependent on resources being available

Section 5: Summary of Children and Young People’s Plan for Tipperary

Outcome Areas	Local Priority Areas
Active and healthy, physical and mental wellbeing	<ul style="list-style-type: none"> • Mental Health & Wellbeing & Service provision deficits • Physical Activity • Physical & Mental Wellbeing • Food & Diet • Sexual Health & Behaviour • Children with Additional Needs
Achieving full potential in learning and development	<ul style="list-style-type: none"> • Early School Leaving • Transitions • Literacy Development • Language Barriers
Safe and protected from harm	<ul style="list-style-type: none"> • Parenting Support • Bullying • Substance & Alcohol Misuse • Social Media • Prevention Partnership & Family Support • Aftercare • Children First • Family Support Service provision deficits
Economic security and opportunity	<ul style="list-style-type: none"> • NEETs • Young Travellers • Young Adult with Additional Needs
Connected, respected and contributing to their world	<ul style="list-style-type: none"> • Children & Young People with Additional Needs • LGBT Youth • Children & Youth Participation • Syrian Refugee Families • Play • Youth service provision deficits
Change Management	<ul style="list-style-type: none"> • Research & Planning

Action Plan for Tipperary Children and Young People's Services Committee

Outcome 1: Active and healthy, physical and mental wellbeing

Priority Area	Objective(s)	Indicators	Target	Activities	Timeframe for completion	Lead Responsibility and partners	Link to other plans	Linked to other national outcome(s) and or Transformational Goal(s)
Mental Health & Wellbeing	To improve staff skills which focus on enhancing parent-infant attachment in Early Years.	Number of training events for staff No. of staff trained	1 training programme p.a. 20 staff trained p.a.	To organize training in attachment-based programmes for staff working with children and families.	Ongoing	North Tipperary Community Service Tipperary IMH Steering Group	Nurture programme	Transformational Goal: <i>Earlier Intervention and Prevention</i>
	To increase the number of social & emotional development/ resilience programmes in Primary Schools, in Junior Cycle at 2 nd -level and in settings outside schools.	Numbers of schools running programmes	45 Primary schools hosting RoE programmes over 3 academic yrs Zippy's Friends training to 5-7 schools p.a.	To roll out such programmes as: - 'Roots of Empathy' (RoE) - 'Zippy's Friends'	Q. 4, 2019 Ongoing	- Barnardos - HSE Health Promotion	<u>Connecting for Life</u> , Actions 2.3.3 & 3.1.6 <u>LECP</u> , C&S 7.1e: <i>To support initiatives that address the needs of families children and young people in relation to Mental Health</i>	Transformational Goal: <i>Earlier Intervention and Prevention</i>
	To increase service provision for children & young people affected by loss and bereavement	Number of new services for children & young people experiencing loss.	2 new Rainbows sites established	To set up active Rainbows sites in areas currently without the service	December 2020	CYPSC Outcome 1 Working Group		

Action Plan for Tipperary Children and Young People's Services Committee

Outcome 1: Active and healthy, physical and mental wellbeing

Priority Area	Objective(s)	Indicators	Target	Activities	Timeframe for completion	Lead Responsibility and partners	Link to other plans	Linked to other national outcome(s) and or Transformational Goal(s)
Mental Health & Wellbeing	To increase Mental Health supports and to facilitate access to appropriate services for young people	1 CYPSC Working Group of key stakeholders	Formation of CYPSC Working Group	To work together with 'Connecting for Life' MW & ST Strategy Implementation Gps. and with Tipperary LCDC to respond to Youth Mental Health needs in the county.	Q. 2, 2018	CYPSC Outcome 1 Working Group LCDC HSE Mental Health service HSE Primary Care HSE Health & Wellbeing Túsla Schools & TETB Comhairle na nÓg Youth services	<u>Connecting for Life Strategy</u> , 3.1.3, 3.3.5, 3.3.6 & 4.2.1 MW Strategy: 3.1.3.37 & 4.2.1.2 South Tipperary strategy: 4.2.1a <u>LECP</u> : C&S 7.1e Healthy Tipperary Strategy	
	Increase awareness of services by professionals, parents & young people Improve information about referral pathways to services	Increase in awareness of services & referral pathways by professionals, parents & young people	Information on services adapted for various target groups – e.g. GPs, Parents, Young People will be developed & disseminated	Map existing service provision for mental health support for young people Poster will be developed and distributed to staff in PCTs Information leaflet developed for Parents Information will be developed for Young People using website & social media	Q. 2, 2019	HSE Mental Health HSE Primary Care Comhairle na nÓg Túsla TETB	Connecting for Life Strategy ST Action 4.1	

Action Plan for Tipperary Children and Young People's Services Committee

Outcome 1: Active and healthy, physical and mental wellbeing

Priority Area	Objective(s)	Indicators	Target	Activities	Timeframe for completion	Lead Responsibility and partners	Link to other plans	Linked to other national outcome(s) and or Transformational Goal(s)
Mental Health & Wellbeing	To build capacity among agencies to address Mental Health issues.	The number of staff in different agencies attending training.	2 Suicide Prevention training courses & 1 WRAP p.a.: ≥40 staff	Provision of Mental Health training such as WRAP, Suicide Prevention, to frontline workers.	Ongoing	Office of Suicide Prevention Áras Folláin		
		% of DEIS Primary & Post-primary schools to be offered 'Friends for Life' tutor training	100% of DEIS Post-primary schools	Staff in DEIS Primary & Post-Primary schools to be offered 'Friends for Life' tutor training	Q. 4, 2017	NEPS		
		No. of staff of Post-Primary schools in receipt of Mind-Out tutor training	5 – 7 staff p.a.	Staff in Post-primary schools to receive Mind-Out tutor training	Ongoing	Health Promotion		
	To engage young people in relation to Mental Health issues	The number of young people who are in receipt of Mental Health programmes.	20 young people p.a. in receipt of WRAP 1 TY class p.a. 2 young adults p.a. 2 young adults trained p.a.	Delivery of WRAP to young people in youth services Delivery of WRAP to young people in schools Delivery of WRAP courses to young adults Providing WRAP tutor training to young adults	Ongoing	YWIT Áras Folláin	Connecting for Life Strategy, 3.1.6	

Action Plan for Tipperary Children and Young People's Services Committee

Outcome 1: Active and healthy, physical and mental wellbeing

Priority Area	Objective(s)	Indicators	Target	Activities	Timeframe for completion	Lead Responsibility and partners	Link to other plans	Linked to other national outcome(s) and or Transformational Goal(s)
Mental Health & Wellbeing	To engage young people in relation to Mental Health issues	The number of activities run by Comhairle na nÓg in the year.	3 actions p.a.	Comhairle na nÓg programme of activities re. Youth Mental Health	Ongoing	Comhairle na nÓg		
	To ensure an effective coordinated and appropriate response to a Critical Incident	No. of Critical Incidents in place	One Critical Incident protocol in place, in the North and South of county	To evaluate existing Critical Incident protocols and, where necessary, to develop new ones	December 2018	ST: Schools HSE ROSP, HSE Primary Care/SIU MW: ETB & NEPS	Connecting for Life Strategy , 3.3.2 & 3.3.3 ST CfL: 3.3.2 CfL MW: 3.3.2.1	
Physical Activity	To increase engagement in physical activity by children & young people	Annual number of schools with Active School Flag	2 schools p.a.	To promote extension of the Active School Flag initiative in schools	Ongoing	Health Promotion	National Physical Activity Plan	
		No. of Primary & Post-Primary schools contacted and providing required information	100% of schools	To audit and share information on the physical activity programmes in schools	Q. 4, 2018	CYPSC Outcome 1 Sub-Group Schools	Healthy Ireland: a Framework for Improved Health & Wellbeing, 2013-2025	
		Establishment of a Sports Club for children and young people with disabilities	Sports Club in Thurles	To set up a Sports Club to provide physical activity opportunities for children and young people with disabilities	Q. 4, 2017	Tipperary Sports Partnership (TSP) Irish Wheelchair Association, HSE		

Action Plan for Tipperary Children and Young People's Services Committee

Outcome 1: Active and healthy, physical and mental wellbeing

Priority Area	Objective(s)	Indicators	Target	Activities	Timeframe for completion	Lead Responsibility and partners	Link to other plans	Linked to other national outcome(s) and or Transformational Goal(s)
Physical Activity	To increase engagement in physical activity by children & young people	No. of pre-school staff in receipt of Buntús Start training	20 staff from pre-schools trained in Buntús Start p.a.	To deliver training to pre-school staff to deliver Buntús and Balance Bike in Early Years setting.	Q.4, 2020	Tipperary County Childcare Cttee Pre-schools TSP	National Physical Activity Plan Aistear	
		No. of pre-school services being trained in the use of Balance Bikes and delivering programme to children	48 pre-schools p.a.		Q.4, 2020			
		No. of schools and youth services	1 school implementing a programme for girls p.a. Youth services implementing 1 programme p.a.	To promote physical activity programmes targeting girls in schools and youth services	Ongoing Ongoing	Tipperary Sports Partnership Schools Youth services	Healthy Ireland: a Framework for Improved Health & Wellbeing, 2013-2025 National Physical Activity Plan	
Physical & Mental Wellbeing	To develop a plan of action targeting the Physical and Mental Wellbeing of children and young people.	Development of a Healthy Ireland strategic plan	Healthy Ireland strategic plan for the county	To work with Tipperary LCDC Healthy Tipperary Sub-Group to develop Healthy Tipperary strategic plan	Q.2, 2018	HSE Health & Wellbeing CYPSC LCDC Sub-Group Comhairle na nÓg	Healthy Ireland Framework National Physical Activity Plan	

Action Plan for Tipperary Children and Young People's Services Committee

Outcome 1: Active and healthy, physical and mental wellbeing

Priority Area	Objective(s)	Indicators	Target	Activities	Timeframe for completion	Lead Responsibility and partners	Link to other plans	Linked to other national outcome(s) and or Transformational Goal(s)
Food & Diet	To increase and raise awareness of the importance of healthy weaning & good nutrition in order to achieve a healthy diet for children, young people and their families	No. of staff trained	8 staff p.a.	'Cook It' tutor training to be rolled out to staff in youth services, family support agencies and other front-line services. These staff then to deliver 'Cook It' programme to their service-users.	Ongoing	Health Promotion Youth services NTLP	Healthy Ireland: a Framework for Improved Health & Wellbeing, 2013-15 Healthy Tipperary Strategy	
		No. of 'Cook It' programmes delivered.	16 'Cook It' programmes delivered p.a. to 160 participants					
		No. of families to participate in events held to promote healthy eating	Members of 40 families p.a. to participate in events held to promote healthy eating	Roll-out of Safefood initiative through hosting workshops and networking events	December 2018	STDC	do.	
		No. of initiatives to promote Breast-feeding	One initiative p.a. in addition to home visiting support	To increase service provision to encourage and support mothers to breast feed their babies	Ongoing	NTCS Clonmel Comm. Mothers HSE PHN services	Healthy Ireland Nurture programme	
Sexual Health & Behaviour	To increase young people's awareness in relation to Sexual Health & Behaviour	No. of staff trained who are working with young people and adults	30 staff trained p.a.	To provide Sexual Health training to staff working with young people and young adults in different settings	December 2018	Outcome 1 Working Group	National Sexual Health Strategy, 2015-2020 Healthy Tipperary Strategy	

Action Plan for Tipperary Children and Young People's Services Committee

Outcome 1: Active and healthy, physical and mental wellbeing

Priority Area	Objective(s)	Indicators	Target	Activities	Timeframe for completion	Lead Responsibility and partners	Link to other plans	Linked to other national outcome(s) and or Transformational Goal(s)
Sexual Health & Behaviour	As above.	No. of schools engaged with programmes	8 schools p.a.	To deliver programmes on healthy relationships to young people	Ongoing	Ascend, NTLP Cuan Saor	National Sexual Health Strategy, 2015-2020 Healthy Tipperary Strategy	
Children with additional needs	To increase parents' awareness of available supports for children with additional needs	Parents will have access to information about relevant services	Information on services will be available on CYPSC web-site and in a range of appropriate venues, e.g. library branches, Health Centres.	To research information about support services for children with additional needs. To produce Guidelines poster and leaflet re. pathways to these services. To publicise on CYPSC web-site and to distribute through library service, Health Centres, etc.	Q. 2, 2019	HSE Disabilities Service Enable Ireland Brothers of Charity CYPSC		

Action Plan for Tipperary Children and Young People's Services Committee

Outcome 1: Active and healthy, physical and mental wellbeing

Priority Area	Objective(s)	Indicators	Target	Activities	Timeframe for completion	Lead Responsibility and partners	Link to other plans	Linked to other national outcome(s) and or Transformational Goal(s)
Mental Health & Wellbeing: Service provision deficits	To highlight the need to address service provision deficits in the area of Mental Health and Wellbeing	Service provision deficits identified in the CYPP	Report on these deficits in CYPP	To map and highlight the uneven distribution, the lack of access to, and the under-resourced status of a range of services from Early Intervention to clinical service provision.	Q. 4, 2018	CYPSC		

Action Plan for Tipperary Children and Young People's Services Committee

Outcome 2: Achieving full potential in learning and development

Priority Area	Objective(s)	Indicators	Target	Activities	Timeframe for completion	Lead Responsibility and partners	Link to other plans	Linked to other national outcome(s) and or Transformational Goal(s)
Early School Leaving	Increased retention of children and young people at risk of social exclusion in an educational setting.	No. of Alternative Learning Programme or similar courses running	One ALP or similar course p.a.	To support the Alternative Learning Programme (ALP) and to promote its rollout. Dependent on resources.	Ongoing	TETB Youth services Túsla EWOS	LECP, C&S 4.2e: <i>Support alternative learning programme delivered through youth services to support young people at risk of Early School Leaving</i>	
		Development of a policy paper	One Policy paper	To develop a policy paper around the value, impact and 'ease of use' of ALP for submission to the DES	Q. 4 2018	CYPSC TETB		
		No. of Traveller children attending the programme	12 Traveller children p.a. who attend one Primary School	To deliver the Traveller Community Family Learning Programme in partnership with local schools. Dependent on available resources.	Ongoing	TRTP Primary Schools	LECP, C&S 12.1c: <i>...Develop innovative initiatives... with Primary Schools, Homework Clubs, as required.</i>	
		No. of Homework Clubs	3 Homework Clubs	To promote the establishment of Homework Clubs in school settings in areas of Social Disadvantage; To map current provision; To develop a proposal to work with a no. of schools on a pilot basis to develop Homework Clubs	Q. 4, 2020	LDCs DSP TRTP		

Action Plan for Tipperary Children and Young People's Services Committee

Outcome 2: Achieving full potential in learning and development

Priority Area	Objective(s)	Indicators	Target	Activities	Timeframe for completion	Lead Responsibility and partners	Link to other plans	Linked to other national outcome(s) and or Transformational Goal(s)
Early School Leaving	Increased school retention of children and young people at risk of social exclusion in an educational setting.	No. of Primary Schools taking part in IY TCM training % of DEIS Primary Schools receiving offer of IY TCM training	24 in 2017/18; 12 p.a. in following years 100% of DEIS Primary Schools	To continue to roll out Incredible Years TCM in Primary Schools around the county. Delivery of IY TCM training to all DEIS Primary Schools	Ongoing Q. 2, 2018	STDC NTLP NEPS		
Transitions	To facilitate children and young people to make positive transitions from pre-school level to Post-Primary level.	No. of pre-schools adopting protocol Transition model options identified	10 Early Years services p.a. Transition model and pilot school identified	Pre-development work re. linking pre-schools and Primary Schools to discuss implementation of Transition protocol Adoption of NCCA Transition protocols To identify good models of 'Transition' support at Post-Primary level and to share info through NAPD	Ongoing Q. 4, 2018	Tipperary Co. Childcare Cttee Pre-schools Primary Schools Outcome 2 Working Group Comhairle na nÓg Post-primary schools		

Action Plan for Tipperary Children and Young People's Services Committee

Outcome 2: Achieving full potential in learning and development

Priority Area	Objective(s)	Indicators	Target	Activities	Timeframe for completion	Lead Responsibility and partners	Link to other plans	Linked to other national outcome(s) and or Transformational Goal(s)
Literacy development	To increase parental involvement in measures to improve literacy development	No. of pre-schools implementing the initiative	10 pre-school services p.a.	To support Library service initiative to encourage parents to read bed-time stories to their children from infancy (Books for Babies/Bed-time Storytime Bag)	Ongoing	TCCC Library service Pre-schools Parents	- LECP, C&S 12.1c - National Literacy Strategy - Healthy Ireland Framework, Theme 3, Action 3.3	Transformational Goal: <i>Support Parents</i>
Language barriers	To improve service provision for families from the new communities and Syrian refugee families seeking to learn English	Completion of policy paper	Policy paper	To research how many young people, aged 15 – 17 years, are affected by ineligibility for ESOL service, and to produce policy paper. To request DES provision for cluster of schools with young people who are facing this issue.	Q. 4, 2018	TETB Adult Education	LECP, C&S 12.1c: See above	

Action Plan for Tipperary Children and Young People's Services Committee

Outcome 3: Safe and protected from harm

Priority Area	Objective(s)	Indicators	Target	Activities	Timeframe for completion	Lead Responsibility and partners	Link to other plans	Linked to other national outcome(s) and or Transformational Goal(s)
Parenting Support	To co-ordinate, and where possible increase supports for parents so that they have information, skills and support to rear their children to reach their potential.	Mapping all available parenting support services and programmes around the county	Production of a quarterly Parenting Support Calendar	Develop quarterly calendar of parenting supports & programmes	Ongoing	Parenting Support Cttees PPFS Cttee (ST)/ Outcome 3 Sub-Group	Better Outcomes Brighter Futures	Transformational Goal: <i>Support Parents</i>
		Development of CYPSC web-site	CYPSC web-site established.	Disseminate information on all parenting supports across Tipperary CYPSC area using website		LAP Cttee (NT)/ Outcome 3 Working Group		
	To create awareness & linkages to supports for families dealing with the impact on children/ young people of parental separation, domestic abuse, parental mental health difficulties or substance misuse	Formation of Working Groups from PPFS/LAP Steering Groups, respectively, to progress	2 Working Groups Formed and meeting 3/4 times p.a.	Establish the parenting needs addressed by the current programmes and interventions and identify the gaps. Seek resources to roll out targeted supports to parents dealing with conflict/aggression from their children / adolescents in the home.		Parenting Support Champions		
		To identify & highlight supports required for parents with children with multiple or additional needs	Number of programmes running	2 TLC Kidz programmes p.a.	Seek resources to support roll out of programmes for children affected by domestic abuse.	Ongoing	Barnardos	

Action Plan for Tipperary Children and Young People's Services Committee

Outcome 3: Safe and protected from harm

Priority Area	Objective(s)	Indicators	Target	Activities	Timeframe for completion	Lead Responsibility and partners	Link to other plans	Linked to other national outcome(s) and or Transformational Goal(s)
Parenting Support	As above	Research undertaken and published	Report produced	To highlight issues of children in families with Alcohol/Substance Misuse	Q. 2, 2018	SERDATF Túsla		
		Actions to publicise 50 Key Messages and the Túsla Parenting 24/7 website	4/6 actions p.a	To promote and support roll-out of the Túsla Parenting Support Strategy	Ongoing	PPFS Managers Parenting Support Champions		
	To support children to continue to engage positively with both parents in context of parental separation	Identification of a model to meet need for positive access with parents	Model for a pilot project	To undertake research re needs of family access in Co. Tipperary	Q. 4, 2019	Outcome 3 Working Group		
Bullying	To promote and support the roll-out of anti-bullying strategies which effectively safeguard children and young people	Booklet up-dated and re-printed	Copies printed for distribution	To up-date and re-print the Comhairle na nÓg booklet on Bullying for distribution	Q. 2, 2019	Comhairle na nÓg	'Connecting for Life Strategy Action: 3.3.4: <i>'Implement the National Antbullying action plan including online and homophobic bullying'</i> National Anti-Bullying Action Plan	

Action Plan for Tipperary Children and Young People's Services Committee

Outcome 3: Safe and protected from harm

Priority Area	Objective(s)	Indicators	Target	Activities	Timeframe for completion	Lead Responsibility and partners	Link to other plans	Linked to other national outcome(s) and or Transformational Goal(s)
Alcohol & Substance Misuse	To implement controls in a community setting around access to and excessive consumption of alcohol by young people	One pilot delivered	Roll out one pilot in one town	To pilot a community-based protocol around minimising access to alcohol for teenagers and to monitor level of success	Q. 4, 2020	Business Community; YWIT/MTDI; Secondary schools; Retail Forum; Vintners; Off licence; Bus owners/drivers		
	To highlight service deficits in the area of Alcohol & Substance misuse service provision. To advocate the need for an increase in resources	Audit commenced	Report complete	To identify Alcohol & Substance abuse service provision deficits around the county and identify actions to address	Q.4, 2018	CYPSC		
Vulnerable Families	To highlight service deficits in the area of Family Support service provision To advocate the need for an increase in resources	Mapping of areas of high levels of social deprivation and insufficient service provision in CYPP	6 urban & 5 rural priority areas identified in CYPP	To identify in the CYPP the deficits in family support service provision in the county particularly in areas of high levels of social deprivation	Q.4, 2017	CYPSC	LECP, C&S 7.1b, 7.1g LECP 6.1c – re. Lone Parent families Túsla Commissioning strategies (MW & SE)	

Action Plan for Tipperary Children and Young People's Services Committee

Outcome 3: Safe and protected from harm

Priority Area	Objective(s)	Indicators	Target	Activities	Timeframe for completion	Lead Responsibility and partners	Link to other plans	Linked to other national outcome(s) and or Transformational Goal(s)
Reducing risks associated with young people's online activity	Promote healthy online activity by young people	Primary and Secondary schools receive information about National Internet Safety Day	All Primary and Secondary Schools in Tipperary	Promotion of National Internet Safety Day	Annually on 1 st Tuesday in February	CYPSC	National Anti-Bullying Action Plan, DES	
	Provide information for parents on internet use	Number of specific information/education initiatives undertaken with parents	Develop a Good Practice Guide on screen time access for children of different ages	Review existing guidelines for parents on safe and healthy Internet use and disseminate through appropriate networks To promote webwise.ie and other resources for parents	Q. 4, 2019 Ongoing	CYPSCs		
		Improved collaboration with Comhairle na nOg towards achieving Cyber Bullying and Internet Safety priorities.	2 Meetings annually with appropriate CnanÓg Working Gp.	Support Comhairle na nOg to implement Cyber Bullying and Internet Safety priorities	Ongoing	Comhairle na nÓg		
		Number of specific initiatives delivered with young people on theme of online safety/ reducing related risks	1 Internet Safety awareness-raising event	1 County-wide "Internet Safety" conference and/or awareness raising event developed and delivered in partnership with young people	Q. 4, 2019	PPFS & LAP Steering Groups, Comhairle na nÓg		

Action Plan for Tipperary Children and Young People's Services Committee

Outcome 3: Safe and protected from harm

Priority Area	Objective(s)	Indicators	Target	Activities	Timeframe for completion	Lead Responsibility and partners	Link to other plans	Linked to other national outcome(s) and or Transformational Goal(s)
Prevention Partnership & Family Support / Local Area Pathways	To support the development and the effective operation of PPFS/ LAP	Attendance at PPFS/LAP meetings by CYPSC Coordinator PPFS/LAP progress reports to CYPSC	8 – 10 meetings attended p.a. Progress reports for every 2 nd meeting	CYPSC Coordinator to liaise with the PPFS/ LAP Steering Groups by attending their meetings. Regular Progress Reports to be delivered to CYPSC raising any issues that need to be addressed strategically by CYPSC.	Ongoing	Túsla PPFS / LAP Steering Groups	Túsla National Service Delivery Framework	
After-care	To support the development of a comprehensive, integrated After-care service for each young person leaving care	No. of Progress reports delivered at CYPSC meetings	4 Progress Reports p.a.	To support the development of After-care committees in the North and south of the county.	Ongoing	Túsla After-Care Committees in North & South of county	LECP, C&S 5.1i	
Children First	To support the implementation by all relevant services of Children First legislation and policy.	No. of Progress Reports delivered at CYPSC meetings	4 Progress Reports p.a.	To cooperate with Túsla on implementation of Children First	Ongoing	Túsla		

Action Plan for Tipperary Children and Young People's Services Committee

Outcome 4: Economic security and opportunity

Priority Area	Objective(s)	Indicators	Target	Activities	Timeframe for completion	Lead Responsibility and partners	Link to other plans	Linked to other national outcome(s) and or Transformational Goal(s)
NEETs	To support the development of initiatives that facilitate NEETs to transition into paid employment	No. of participants on Work Winner and similar programmes	20 young adults p.a.	To replicate and support existing successful projects such as 'Work Winners' in those areas that have high levels of youth unemployment	Ongoing	Youth services TETB	LECP, High Level Community & Social Inclusion Priority 4: <i>To address the high level of long-term unemployed through targeting those areas with the highest level of LTU in the county.</i>	
Young Travellers	To support the devt. of initiatives that target getting young Travellers into employment	No. of initiatives	One Employability programme	To support a Youth Employability programme to target young Travellers	Q. 4, 2018	LDCs TRTP	LECP, C&S 5.1h	
Young Adults with Additional Needs	To support young adults with additional needs to progress from school to work	No. of initiatives	One pilot project	To support a pilot project to facilitate young people to transition to appropriate work settings. To discuss with stakeholders as to design & development	Q. 4, 2018	LDCs Special Schools; NLN; Employability services; PPN Disability Forum	LECP, 10.1a – re Disability Action Plan LECP, C&S 5.1h	

Action Plan for Tipperary Children and Young People's Services Committee

Outcome 5: Connected, respected and contributing to their world

Priority Area	Objective(s)	Indicators	Target	Activities	Timeframe for completion	Lead Responsibility and partners	Link to other plans	Linked to other national outcome(s) and or Transformational Goal(s)
Children & Young People with Additional Needs	To promote initiatives that enhance the social lives of children and young people with additional needs	Audit completed	Completion of audit	To undertake an audit of social events/clubs that can be accessed by children and young people with additional needs and to identify actions to be progressed.	Q. 3, 2018	County Co. TETB LDCs Youth work services HSE Disabilities services	<u>LECP</u> , C&S 5.1h & C&S 10.1a	
LGBT* Youth	To secure resources for supports for LGBT* young people	No. of active resourced support groups	2 groups	To support the adequate resourcing of LGBT supports around the county.	Q. 2, 2018	Youth services NTLP HSE Social Inclusion	<u>LECP</u> , C&S 6.1d Healthy Tipperary Strategy	
		To have a Coordinator position	Coordinating role being undertaken by one of youth services	To support coordination of these supports	Q. 4, 2020	CYPSC Outcome 5 Sub-Group		
		To employ a researcher	A researcher in place	To support research to ascertain the extent, needs and requirements of LGBT* youth	Q. 2, 2018	YWIT TETB		
		Activities are included on CYPSC web-site	Activities advertised on CYPSC web-site	To highlight activities of the group on CYPSC web-site	Q. 1, 2019	CYPSC		

Action Plan for Tipperary Children and Young People's Services Committee

Outcome 5: Connected, respected and contributing to their world

Priority Area	Objective(s)	Indicators	Target	Activities	Timeframe for completion	Lead Responsibility and partners	Link to other plans	Linked to other national outcome(s) and or Transformational Goal(s)
LGBT* Youth	To raise awareness about the LGBT* identity, particularly about being Transgender	No. of awareness-raising & training events	5 LGBT* awareness raising events 1 Transgender training event	To support awareness raising and training re. LGBT and Transgender identities and issues, targeting staff and the public To contact schools and to DES to request inclusion of LGBT* awareness in school curriculum	Ongoing	CYPSC Clonmel Community Resource Centre HSE Social Inclusion		
Children & Youth Participation	To promote the role of children and young people in influencing the decisions that affect their lives	No. of CYPSC meetings attended by CnanÓg representatives	3 CYPSC meetings p.a. at minimum	To continue to formalise & strengthen the role of Comhairle na nÓg in CYPSC by facilitating the Comhairle to send a representative to CYPSC meetings and to have an opportunity to send a delegation to meet with CYPSC once a year, at minimum	Ongoing	Comhairle na nÓg CnanÓg Steering Group	LECP, C&S 5.1e: <i>Proactive inclusion of CnanÓg in the consultation and youth proofing of any planning and development work relevant to young people in the county.</i> National Strategy on CYPP in Decision Making	Transformational Goal 3: <i>Listen to and Involve Children and Young People</i>
		No. of CnanÓg meetings attended by CYPSC Coordinator	2 meetings p.a.					
		No. of CYPSC mtgs attended by CYPSC delegation	1 meeting p.a.					

Action Plan for Tipperary Children and Young People's Services Committee

Outcome 5: Connected, respected and contributing to their world

Priority Area	Objective(s)	Indicators	Target	Activities	Timeframe for completion	Lead Responsibility and partners	Link to other plans	Linked to other national outcome(s) and or Transformational Goal(s)
Children & Youth Participation	To promote the role of children and young people in influencing the decisions that affect their lives	To develop a CYPSC consultation protocol	Consultation with children & young people is integrated into CYPSC actions	Develop a consultation strategy for CYPSC Ensure that all CYPSC Sub-Groups consider how to listen to the views of children, young people and parents	Q. 4, 2018	CYPSC	National Strategy on Children and Young People's Participation in Decision Making	
	To encourage young people to volunteer in local community	No of initiatives undertaken by VC to encourage youth volunteers	6 youth volunteer initiatives by end of period	To promote and highlight opportunities for young people to engage in volunteering activities	Q. 4, 2020	Tipperary Volunteer Centre (VC)	LECP, C&S 5.1b <i>Develop programmes and supports that encourage youth to volunteer in the c & vol. sectors</i>	
Syrian Refugee Families	To support the integration process for these families and the investment of the necessary resources for this.	No. of Progress Reports to CYPSC	3/4 Progress Reports p.a.	To support the Inter-agency Committee overseeing the re-settlement project to allocate the resources to meet the needs of the families	Ongoing	Tipperary Co. Co. Túsła	LECP, C&S 6.1b	
Play	To highlight the importance of creative play for the child and young person	CYPSC to participate in the periodic reviews of Local Authority Playground policy	Participation in periodic reviews of the Playground policy	The CYPSC to consult as appropriate in relation to the Local Authority Playground policy and to seek to ensure even playground provision across the county and its inclusivity of all children.	Ongoing	CYPSC Tipperary Co. Council	LECP, C&S 1.3b	

Action Plan for Tipperary Children and Young People's Services Committee								
Outcome 5: Connected, respected and contributing to their world								
Priority Area	Objective(s)	Indicators	Target	Activities	Timeframe for completion	Lead Responsibility and partners	Link to other plans	Linked to other national outcome(s) and or Transformational Goal(s)
Play	To highlight the importance of creative play for the child and young person	No. of programmes	2 programmes p.a.	To support piloting a programme for parents and children around the importance of play	December 2020	Outcome 5 Working Group	Aistear programme	
Youth service provision	To give young people around the county the opportunity to avail of youth service provision	Mapping deficits in youth service provision	Deficits identified in CYPP	To highlight the need for more youth service provision, particularly in those areas where there are gaps, in the CYPP To advocate for resources for youth services	Q. 4, 2017	CYPSC	<u>LECP, C&S 5.1a & 5.1j:</u> <i>Prioritise the development of appropriate youth infrastructure and programmes where Youth Dependency ratios exceeds 33 (in)...areas of deprivation</i>	
	To support youth service provision targeted at Traveller youth	No. of initiatives targeting Young Travellers in operation	2 Young Traveller initiatives in operation	To support initiatives providing youth services targeted at young Travellers, dependent on resources being available	Q. 4, 2018	TRTP YWIT	LECP, C&S 5.1h	

Action Plan for Tipperary Children and Young People's Services Committee

Change management

Priority Area	Objective(s)	Indicators	Target	Activities	Timeframe for completion	Lead Responsibility and partners	Link to other plans	Linked to other national outcome(s) and or Transformational Goal(s)
Research & Planning	To measure the impact of the CYPSC Work Plan in terms of outcomes for children, young people and young adults			To identify benchmarks for each of the National Outcomes from the AIRO research in order to set targets over the timespan of the CYPSC Work Plan	Q. 4, 2018	CYPSC		

Section 7: Monitoring and Review

Tipperary Children and Young People's Services Committee is committed to a continuous process of monitoring and review of the Children and Young People's Work Plan (CYPP) and will meet with the requirements of the CYPSC Planning and Reporting Framework, as follows:

- Tipperary CYPSC will produce an Annual Programme of Work which will outline the work to be undertaken and achieved by the CYPSC in each calendar year over the span of the CYPP, 2018 - 2020.
- Tipperary CYPSC will produce a Mid-year Progress Update to demonstrate the level of progress with the Annual Programme of Work, and to identify issues and challenges in the implementation of the programme.
- Tipperary CYPSC will also produce an Annual Progress Report which will include details on progress of actions in the Annual Programme of Work, on CYPSC inter-agency activity during the year, on participation of children and young people in CYPSC and its structures, on challenges and achievements, and other required details.

Each CYPSC Sub-Group will submit a progress report to each CYPSC meeting on progress on actions under the respective remits and on any issues and challenges arising.

The Tipperary CYPSC will continue to engage with children and young people, aged 0 – 24 years, and with families and stakeholders to ensure that the CYPP remains focussed on the needs of this age cohort.

Tipperary CYPSC will continue to liaise on an ongoing basis and to share information with the Tipperary Local Community Development Committee (LCDC) and will work with all strategic partners locally to improve outcomes for children, young people and young adults throughout the county.

Section 8: Appendices

Appendix 1

TIPPERARY CYPSC TERMS OF REFERENCE

We, in the Tipperary Children’s Services Committee, here express our commitment to work and plan together with all relevant stakeholders to improve outcomes for children & young people in Tipperary.

The Tipperary Children and Young People’s Service Committee is an all-county structure which reflects the needs of the county as a whole.

Children and Young People’s Services Committees (CYPSC) are a key structure identified by Government to plan and co-ordinate services for children and young people in every county in Ireland. The Department of Children and Youth Affairs (DCYA) provides the policy lead for CYPSC.

The CYPSC is responsible for improving the lives of children, young people and families at local and community level through coordinating, planning and service delivery. The overall purpose of CYPSC is to secure better outcomes for children and young people, with a particular focus on those most at risk. The basis for measuring the achievement of this purpose is derived from the 5 National Outcomes, as per the *Better Outcomes, Brighter Futures: The National Policy Framework for Children and Young People 2014-2020*. This is the first overarching national policy framework for children and young people aged 0-24 years.

1. Active and healthy with physical and mental well being
2. Achieving full potential in all areas of learning and development
3. Safe and protected from harm
4. Have economic security and opportunity
5. Connected, respected and contributing to their world

Membership of the Tipperary CYPSC

Informed by the *Blueprint for the Development of Children and Young People’s Services Committees* (DCYA), the following will comprise the membership of Tipperary CYPSC:

- **Tusla:** Two seats (one representative from the North and one from the South)
- **HSE:** Three seats, one general, one Senior Medical Officer and a representative from the Disability sector. (*This specification has been revised to two seats, one for representative from North of the county, and one for representative from the South of the county*)
- **Tipperary County Council**
- **Tipperary Education Training Board**
- **Irish Primary Principals Network**
- **National Association of Principals and Deputy Principals Association.**
- **National Educational Psychological Services**
- **Probation Service**
- **An Garda Síochána**
- **County Childcare Committee**

- **Local Development Companies:** Two seats (one representative from the North and one from the South)
- **Third Level & Young Person:** One seat filled by the President of the Student's Union LIT (*To be reviewed*)
- **Community & Voluntary:** One seat to be filled by the Tipperary Public Participation Network (PPN).
- **Youth services Sector**
- **Family Support:** Three seats, one to be filled by Barnardos, and two seats to be filled by PPN, one from North Tipperary Social Inclusion College, and one from South Tipperary Social Inclusion College.

Role of the Chairperson:

The key responsibilities of the Chair are to:

- Provide leadership and direction for the Committee
- Ensure the effectiveness of the Committee in all aspects of its role, including delivery of its work programme
- Ensures appropriate interaction between the Committee and external
- In the case of unavailability of the person in the role of Chair at any meeting, these responsibilities will be exercised by the Vice-Chair

The responsibilities of the Vice-Chair are to:

- Support the Chair in the performance of her/his duties
- In the case of unavailability of the person in the role of Chair at any meeting, to take the role of Chair for that meeting.

The key responsibilities of the CSC Coordinator are to:

- Organise and administer meetings of the Committee
- Ensure the collection, provision and reporting of relevant data and information
- Foster and develop relationships with key personnel including committee members and other stakeholders involved in provision of child & family services

Meeting format

- **Frequency of Meetings:** Meetings will take place monthly, to be reviewed in January 2016
- **Quorum:** At meetings of the CSC, 25% of the total number of members shall constitute a quorum. If after the expiration of thirty minutes after the time appointed for the meeting, a quorum is not present, the CSC shall rise and the meeting shall stand adjourned to a date to be then named by the Chair of the meeting
- **Decision making:** Decision making by consensus will be encouraged where possible. In circumstances where it is necessary to make a decision and where there is no consensus, a decision by the committee can be carried by a simple majority.
- **Notice of Meetings** A notice to attend the meeting, and a draft agenda of business items for the meeting, shall be sent to each member of the Committee at least five working days

before any meeting. Such notice will include any documentation relevant to the agenda for the meeting in so far as possible.

- Minutes of Meetings: The minutes of every CSC meeting when adopted shall be signed by the Chair at such meeting at which the minutes are considered, and shall be kept and certified by the CSC Co-ordinator. No Minutes shall be considered for confirmation unless a copy thereof has been previously forwarded to every member of the Children's Services Committee. The Minutes of all meetings shall contain the names of the members and officials present together with particulars of all decisions and recommendations made. Minutes from any CSC meeting will be sent to members 10 working days before the following meeting.
- Attendance at Meetings If a CSC member is absent from three consecutive meetings without any apology, the CSC may ask the agency or organisation which is represented by this member, to nominate another person to take his/her place on the Committee.
- Substitution of Members: Substitute delegates may only be nominated by permission of the Chair.

CYPSC Sub-Groups

- Purpose & Function: Each Sub-Group is aligned with one of the National Outcomes in '*Better Outcomes, Brighter Futures*' and is responsible for progressing implementation of the CYPSC Work Plan actions that correlate to the specific National Outcome. The Sub-Groups also have a role in identifying issues and related actions under the specific National Outcomes to which they are aligned for inclusion in the CYPSC Work Plan.
- Membership: Membership of the Sub-Groups is drawn from organizations, groups and individuals who have particular knowledge and expertise in the areas relating to the specific priorities of each of the Sub-Groups.
- Chair: Each of the Sub-Groups will be chaired by a member of CYPSC, or by an appropriate nominee, who has particular responsibilities and expertise in the area relating to the Sub-Group's priorities.

Reporting mechanism

- At a national level: The CYPSC will furnish progress reports as required to the National CYPSC Steering Group

Review & Evaluation

- The CYPSC will undertake an annual review and evaluation of its performance. This will be based on the goals and targets as outlined in the CYPSC Work Plan.

Appendix 2

Children and Young People’s Services Committees Sub-Groups and their membership

Outcome 1 Sub-Group: ‘Active and Healthy’

Name	Agency / Service / Organization
Caroline Lydon (Chairperson)	North Tipperary Community Services
Lisa Kavanagh	Tipperary Education and Training Board
Ann Marie Crosse	HSE Health and Wellbeing
Anne Delahunty	HSE Public Health Nursing service
Aileen Healy	Tipperary Childcare Committee
Niamh McGrath	HSE Primary Care
Anne Keating	National Educational Psychological Service
Tracy Nugent	Regional Office of Suicide Prevention (SE)
Mary Kennedy	Regional Office of Suicide Prevention (MW)
Tracey Tobin	Health and Wellbeing
Pauline Strappe	Youthwork Ireland Tipperary
Mary Geoghegan	Foróige
Rabiya Ali	Ascend Women’s Services
Naomi Burke	Clonmel Community Resource Centre
Valerie Connolly	Tipperary Sports Partnership
Elaine Cullinan	Tipperary Sports Partnership
Jennie McAleese	HSE Disabilities services
Jill Sandvoss	Clonmel Community Mothers programme

Outcome 2 Sub-Group: ‘Achieving full potential in Learning and Development’

Name	Agency / Service / Organization
Aileen Healy (Chairperson)	Tipperary Childcare Committee
Miriam Gleeson	Education Welfare service, Túsla
Lisa Kavanagh	Tipperary Education and Training Board
Staff member	Tipperary Rural Traveller Project
Representative	North Tipperary LEADER Partnership
Daryl Walsh	Foróige
Séamus Ryan	National Association of Principals and Deputy Principals
Joan Doherty	Irish Primary Principals Network

Outcome 3 Sub-Group: 'Safety and Security'

(composed of the Local Area Pathway (LAP) Advisory Group in North Tipperary and Prevention Partnership and Family Support (PPFS) Steering Group in the South Tipperary)

LAP Steering Group	
Name	Agency / Service / Organization
Fionnuala Kenny, PPFS Manager (Chairperson)	Túsla
Yvonne Fitzsimons, CFSN Coordinator	Túsla
Caroline Lydon	North Tipperary Community Services
Rabiya Ali	Ascend Women's services
Lorraine Duane	Tipperary Education and Training Board
Olive Carter	Barnardos
Sara Leahy, Parent Support Champions	Youthwork Ireland Tipperary
Helen Taffinder	Nenagh Childcare Centre
Siobhán Brennan	Túsla
Pat Carroll	Education Welfare services, Túsla
Lesley Devlin	Túsla
Aileen Healy	Tipperary Childcare Committee
Anne Delahunty	HSE Public Health Nursing service
Tracey Thompson	Tipperary County Council
Joe Slattery	Community Substance Misuse Team
Ruth Swanton	Túsla
Justine O'Brien	Foróige Garda Youth Diversion Project
Elaine Ryan	Focus Ireland
Deirdre Cahir	North Tipperary LEADER Partnership
PPFS Steering Group	
Joan Dunne, PPFS Manager (Chairperson)	Túsla
Julie Ryan, Senior CFSN Coordinator	Túsla
Esther Butler	HSE Public Health Nursing service
Geraldine Mullane	'Cuan Saor' Women's services
Tess Collins	Tipperary County Council
Michelle Kelly	Waterford and South Tipperary Community Youth Service
Sarah Dunleavy	Foróige
Carol McDonnell, Parent Support Champion	Barnardos
Naomi Burke	Clonmel Community Resource Centre
Sinéad O'Mahony	HSE Substance Misuse services
Miriam Gleeson	Education Welfare Service, Túsla
Martina Wells Casey, Parent Support Champion	Túsla
Diane Buckley	Spafield Family Resource Centre, Cashel
Gloria Walsh	Túsla After-care
Della Devereaux	Probation service

Outcome 4 Sub-Group: 'Economic Security and Opportunity'

Name	Agency / Service / Organization
Michael Murray (Chairperson)	North Tipperary LEADER Partnership
Peter O'Dwyer	Department of Employment Affairs and Social Protection
Clare Healy	do.
Jimmy Cass	EmployAbility Service South Tipperary
Donal Kelly	Youthwork Ireland Tipperary
James Galvin	Occupational Guidance, HSE Mid West Community Healthcare Disability Services
Stephen Power	Foróige
James Ryan	EmployAbility Service, North Tipperary
Deirdre O'Dwyer	South Tipperary Development Company
Mary Aylward	Occupational Guidance, HSE South Tipperary Disability Services
Lisa Kavanagh	Tipperary Training and Education Board
Lorraine Lowry	Scoil Chormaic Special School, Cashel
Ronnie Corbett	Cluain Training Centre, Clonmel
Representative	Tipperary Rural Traveller Project
Paul Farrell	St. Cronan's Centre, Roscrea

Outcome 5: 'Connected, Respected and Contributing to their World'

Name	Agency / Service / Organization
Michelle Kelly (Chairperson)	Waterford & South Tipperary Community Youth Services
Representative	Youthwork Ireland Tipperary
Sheridan Brady	Foróige
Enya Lee	Waterford and South Tipperary Community Youth service
Gerard Sweetman	LGBTI project, Clonmel
Lorraine Duane	Tipperary Education and Training Board
Breada Ryan	North Tipperary LEADER Partnership
Deirdre Cahir	North Tipperary LEADER Partnership
Aileen Healy	Tipperary Childcare Committee
Anne Bradshaw	HSE Disability services
Derek Fanning	Tipperary Volunteer Centre
Deirdre Cox	Tipperary County Council

Appendix 3

Hardiker model

In the 1990's in the UK, building on an ecological perspective, Pauline Hardiker and her colleagues developed a model to help understand different levels of need within a population of children*. This model is now widely used and has been found to be a useful planning framework by both the UK and Irish governments. The model outlines four levels of intervention as follows:

Level 1: refers to those mainstream services that are available to all children – health care, education, leisure and a range of other services provided in communities. It also offers the potential for targeting resources through community development initiatives such as parent and toddler groups, community houses and women's groups which may be available to the whole community but particularly targeted at disadvantaged communities.

Level 2: represents services to children who have some additional needs. Services at Level 2 are characterised by referral, and full parental consent and negotiation. Examples would be Behaviour Support, Parenting Support, additional Educational services, and support for children who are deemed vulnerable through an assessment of what their need is, and via targeted specific services provided by education, health, social services, law enforcement and the voluntary sector.

Level 3: represents support to families or individual children and young people where there are chronic or serious problems. Support is often provided through a complex mix of services which usually need to work together well in order to provide the best support. State intervention can have a high profile at this level. Examples would be children on the Child Protection Register, or who have come before the courts.

Level 4: represents support for families and individual children or young people where the family has broken down temporarily or permanently, where the child or young person may be looked after by social services. It can also include young people in youth custody or prison or as an in-patient due to disability or mental health problems

(from: *Owens, S.: An Introductory Guide to the key terms and inter-agency initiatives in use in*

the Children's Services Committees in Ireland, p. 17

(Centre for Effective Services, 2010)

*Hardiker, P, Exton, K., Policies and Practices in Preventative Childcare
& Barker, M. : (Aldershot: Avesbury, 1991)

Appendix 4

Consultations undertaken

Groups consulted	Form of Consultation	Date
75 staff of statutory and non-statutory agencies from all over the county	<ul style="list-style-type: none"> - Facilitated ½ day workshop - Purpose was to identify actions to address issues from CYPSC workshop in February 2016 	25 th May 2016
<ul style="list-style-type: none"> - 259 children, aged 5 – 13 years, from social groups vulnerable to social exclusion, being variously from socially disadvantaged circumstances, from Traveller and ‘new community’ backgrounds and attending school for Special Needs. - 106 children of the same age group from the general population 	<ul style="list-style-type: none"> - School-based and community-based focus groups with the 1st group of children - On-line survey in which the 2nd group of children participated. <p>The consultation was undertaken by Susan Bookle, Burtenshaw Kenny Associates, and a report was issued.</p> <p>The consultation was financed by CYPSC Seed funding received in December 2015 and by funding under SICAP from the two Local Development Companies, STDC and NTLF.</p>	January – June 2016
<ul style="list-style-type: none"> - 300 young people, aged 13 – 18 years, of which a proportion were youth variously from Traveller and Syrian Refugee families, Special School and Alternative Learning settings, alternative care situations and socially disadvantaged circumstances. Young people identifying as LGBT also took part. 	<p>The consultation was undertaken by Joyce Brennan under the auspices of Youthwork Ireland Tipperary with Túsla funding:</p> <ul style="list-style-type: none"> - Focus Groups with the youth from social groups vulnerable to social exclusion. - Questionnaires to secondary schools and youth projects, an on-line survey, and two world café-style consultations to elicit mainstream responses. 	January – May 2016
Children under 5 years attending: Naíonra Dhúrlas Éile, Thurles; Tots to Teens, Clonmel; Nenagh Childcare Centre; Community Childcare Services, Spafield FRC, Cashel; and Bright Sparks Childcare service, Ballingarry.	Consultation was undertaken by pre-school staff adopting an approach, suggested by Early Childhood Ireland, that was child-led and creative.	November 2016 – February 2017
Students, aged 18 – 24 years, attending LIT and who were residents of Co. Tipperary	On-line survey, organized by Paul Keating and Sinéad McMahon, LIT staff. There were some 50 responses	September 2016
7 young adults, aged 18 – 24 years, in the Justice system	The consultation was organized by Della Devereaux, Senior Probation Officer, Tipperary. Staff from Probation service undertook one-to-one interviews with these young adults	3 rd Quarter, 2016
8 young adults, aged 18 – 24 years, linked with the Túsla After-care service in the North of the county.	<ul style="list-style-type: none"> - One-to-one interviews. - The consultation was organized by Margaret Treacy, After-care Services Worker, Túsla 	2016
c. 169 parents resident in the county	<ul style="list-style-type: none"> - On-line survey 	7 th November 2016 – 20 th February 2017
County Councillors from 4 Municipal Districts	<ul style="list-style-type: none"> - Presentations on CYPSC at MD meetings and discussion of issues 	April 2017

Appendix 5

CYPSC consultation workshop, 25th May 2016: list of priority issues

Active & Healthy	Achieving in all areas of Learning & Development	Safe & Protected from Harm	Economic Security & Opportunity	Connected, Respected & Contributing	Other issues
<p>1. Mental Health of age cohort, 0 – 24 years. Securing a Jigsaw project for Co. Tipperary</p> <p>2. Shortage of therapeutic interventions for children, aged 3+ , e.g. Art Therapy, Play Therapy.</p> <p>Need to carry out audit and to address uneven service distribution geographically</p> <p>Need to ensure service provision is integrated with a community-based approach.</p>	<p>1. Transitions re. children with EBD and other vulnerable categories:</p> <ul style="list-style-type: none"> - Pre-school into Primary - Primary into Secondary <p>Importance of engaging parents at Early Years</p> <p>Importance of an integrated approach with community-based services to ensure parental engagement.</p> <p>Identification & tracking of these children in Early Yrs, and supporting them with the relevant services</p> <p>2. NEETs, particularly young Travellers.</p>	<p>1. Young people leaving care at ≤ 18 years: lack of after-care services. Homeless young people</p> <p>2. Domestic Abuse</p> <p>3. Social media & Bullying</p> <p>4. Prevention, Partnership & Family Support Programme.</p> <p>5. Children First policy & practice: To support dissemination of the relevant information and compliance with the guidelines</p> <p>6. Early Years 0 – 3 years age group: To support parents in devt. of the baby/toddler</p>	<p>1. NEETs in low-paid, 'dead-end' employment</p> <p>Youth unemployment</p> <p>CYPSC to support adoption of 'Work Winner' type projects</p> <p>2. Traveller youth unemployment</p> <p>3. Young people with mild intellectual disabilities, aged ≥ 18 years</p>	<p>1. Young people with mild intellectual disabilities – social lives Support for their parents</p> <p>2. Supports for LGBTI youth and their parents</p>	<ul style="list-style-type: none"> • 'New communities' • Cognisance of the rural dimension • Learning from existing models • Transitions • Early Intervention

Appendix 6

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